

EMPOWERED WOMEN EMPOWERED CHILDREN

EXAMINING THE RELATIONSHIP BETWEEN WOMEN'S EMPOWERMENT AND THE WELL-BEING OF CHILDREN IN TRANSITIONING ECONOMIES



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World Vision is a Christian relief, development, and advocacy organisation dedicated to working with children, families, and communities to overcome poverty and injustice. Inspired by our Christian values, we are dedicated to working with the world's most vulnerable people. We serve all people regardless of religion, race, ethnicity, or gender.

CHILD AND ADULT SAFEGUARDING

World Vision ensured the safe and ethical participation of girls, boys and women, adhering to World Vision's Safeguarding policy and protocols on data collection and World Vision's Code of Conduct. Data collectors were trained on Psychological First Aid (PFA) and how to conduct interviews in an ethical and safe manner. Names of participants have been anonymised and changed to ensure confidentiality. Children and women were oriented on the possibility of withdrawing from the interview process at any moment. Identified cases of child and adult abuse and violence were referred to specialised agencies for case management.

Acronyms

| BiH | Bosnia and Herzegovina |
|----------|--|
| COVID-19 | Coronavirus Disease-19 |
| GBV | Gender-based Violence |
| HH | Household |
| IDP | Internally Displaced Person |
| IPV | Intimate Partner Violence |
| KII | Key Informant Interview |
| MEER | Middle East and Eastern Europe |
| MEERO | Middle East and Eastern Europe Regional Office |
| UN | United Nations |
| UN Women | The United Nations Entity for Gender Equality and the Empowerment of Women |
| UNFPA | United Nations Population Fund |
| UNICEF | United Nations International Children's Emergency Fund. |
| WHO | World Health Organization |





Contents

| Executive Summary | 6 |
|--|----|
| I. Introduction | 8 |
| 2. Context overview | 8 |
| 3. Research framework | 9 |
| 4. Methodology | 10 |
| 5. Demographic and socio-economic profile of surveyed women | П |
| 6. Women's empowerment factors | 12 |
| 6.1. Women's empowerment through relational factors | 12 |
| 6.1.1. Household decision-making power | 12 |
| 6.1.2. Control over household assets | 13 |
| 6.1.3. Experience of gender-based violence (GBV) | 13 |
| 6.1.4. Control over time and ability to redistribute burden of care | 14 |
| 6.2. Women's empowerment through personal factors | 15 |
| 6.2.1. Self-esteem and mental and spiritual well-being | 16 |
| 6.2.2. Attitude on gender roles (sexism) | 16 |
| 6.2.3. Acceptability of GBV | 17 |
| 6.3. Women's empowerment through environmental factors | 18 |
| 6.3.1. Social norms/stereotypes and safety and freedom of movement outside the home | 18 |
| 6.3.2. Civic rights and access to legal aid and assistance | 19 |
| 6.4. Associations between women's socio-economic and demographic characteristics and empowerment factors | 20 |
| 7. Child well-being outcomes | 24 |
| 8. How women's socio-demographic and empowerment factors affect child well-being | 25 |
| 9. Recommendations | 32 |
| 0. Conclusions | 34 |

Executive Summary

Gender equality and the well-being of children go hand in hand. When women are empowered to live up to their full potential, their children prosper, but when women are restrained and denied equal opportunities within a society, their children suffer. Child vulnerability is greatly exacerbated by gender inequality and assuring the well-being of children when the gender gap is high remains a global challenge.

In the so-called 'transitioning economies', the transition process has affected men and women differently and the growing gender inequalities have important social and economic costs. On the 2021 Global Gender Gap Index, Albania ranks 25^{th1}, Bosnia and Herzegovina 76th, Romania 88th, and Armenia 114^{th.1} The costs associated with restructuring the economies of these countries has had a further impact on children. The risk of falling into child poverty has increased substantially and, more recently, the COVID-19 pandemic has worsened the social and economic vulnerabilities.

To explore the relationship between women's empowerment and child well-being in transitioning economies in more depth, we designed a mixed methods research where we assessed the level of women's empowerment through selected personal, environmental, and relational empowerment factors and looked at how these three empowerment dimensions in women are associated with the core well-being outcomes in children.

The findings showed that only 1% of the surveyed women in Albania, BiH and Armenia, and none of the women in Romania are empowered at a relational level. Many of the women surveyed in these transitioning economies have decision-making power in their households and control over assets; however, time poverty is a major limitation to their relational empowerment as the majority of these women continue to provide most of the unpaid care work and care activities, often leaving them with little or no discretionary time. Almost one-quarter of the surveyed women experience gender-based violence (GBV), especially emotional and verbal violence, undermining their health, dignity, security and autonomy.

Unlike empowerment through relational factors, up to half of the women surveyed are empowered through personal factors. The majority of these women have moderate-to-high self-esteem and a positive self-image, as well as being spiritually empowered through their faith. Most of them have good mental health, are resilient, and can cope with challenging situations in their lives. However, the challenges encountered in their patriarchal and traditional societies make it difficult for these women to break out of the traditional gender roles and consequently, the majority of them still conform to self-sabotaging discriminatory attitudes and beliefs.

ENVIRONMENTAL LEVEL

RELATIONAL LEVEL

Power over

PERSONAL LEVEL

Power from within,

Power to"



In this region, patriarchal gender norms are deeply rooted, especially in the domain of time use. The majority of the surveyed women live in communities with restrictive gender norms and relations, leading to restraints on their behaviour and increased time poverty. Although significant efforts have been made in these countries to develop gender-responsive legal and policy frameworks, most women still lack an awareness of their own civic rights, with some still lacking access to much needed legal services. Consequently, 2 per cent of surveyed women in BiH, 1 per cent in Albania and Armenia, and none in Romania are empowered through environmental factors.

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GIRLS AND BOYS WELL-BEING



The vast majority of the surveyed children in these countries are enrolled in schools and willing to learn. Furthermore, most have good or moderately diverse and adequate nutrition and have developed psychosocial skills to protect themselves; they are resilient, empathic, self-confident, with good mental health and a strong sense of spirituality. Despite these positive outcomes, there are still many factors that hinder the total well-being of these children. Among these factors, functional literacy and positive health-related behaviour are very important, with the majority of the surveyed children not considering themselves as functionally literate in the three domains of language, digital and numeric skills, and many that haven't developed positive health-related behaviour. In addition to this, many of the girls and boys experience violence at home, school and in their communities, especially emotional and verbal violence which affects their total well-being.

MOTHER - CHILD CONNECTION

When studying correlations between the empowerment of mothers and children and their well-being, a number of significant associations were identified. These include factors such as the poor education of mothers, living in an extended family, and marriage at a young age – all of which limit women's empowerment and are negatively associated with child well-being outcomes. The study confirmed that domestic and gender-based violence shapes the physical and mental health of children, while the participation of mothers in power structures and decision-making enables women to better protect their children from abuse. Finally, the research identified a strong connection between women's mental health and children's mental health and resilience. The children of mothers with poor mental health do not generally reach their emotional milestones and struggle to cope with challenging life situations.

Based on the findings, it is recommended that governments, donors, non-governmental organisations and programmes consider women's empowerment as a critical precondition for achieving children's well-being, with women's empowerment approaches embedded into child-focused funding strategies, policies and programmes, while continuing to invest in gender analysis and gender-transformative interventions.

I. Introduction

Achieving child well-being outcomes remains a global challenge due to the prevalence of child vulnerability, particularly in developing countries. Childhood is a critical period in human development, which affects social and economic life achievements in adulthood. For this reason, child focused outcomes have featured prominently in the international development agenda, especially in the last 20 years. World Vision is no exception, with its strategic commitment to help the most vulnerable children overcome poverty and experience the fullness of life.

The social, economic and health status of women is closely related to a child's survival and developmental outcomes.² Throughout history, women have been considered as the primary caregivers; it therefore follows that the empowerment of women is going to have an impact on the physical and emotional well-being of children. Protecting women's rights is essential for both women and children. At the same time, protecting the rights of children, especially girls, is a crucial step towards gender equality.³

This paper represents a compilation of research results carried out by World Vision in the following transition countries: Albania, Armenia, Bosnia and Herzegovina, and Romania. The research is aimed at measuring the extent of women's empowerment and then examining its association with the well-being of children in structured families in MEER countries.

2. Context overview

In the early 1990s, as a result of the conflicts that followed the crumbling of the Soviet regime, many post-Soviet countries had to endure harsh economic and social conditions, including widespread poverty. The crises affected women disproportionally due to the fundamental changes in economic structures, social institutions and the strengthening of traditional gender roles. The crises also had a significant impact on a generation of children by substantially increasing the risk of more children falling into poverty. Countries with transitioning economies have made significant progress over the last three decades and this has included some significant steps towards gender equality. Despite this progress (much of which has occurred in the education and health sectors), gender disparities still manifest in other areas, such as the economic and political participation of women.

The Eastern European and Central Asian region ranks fourth globally in terms of gender parity with an average remaining gap of 28.9 per cent (approximately 5 per cent below the Western European average). It is estimated that it will take 134.7 years to close the gender gap in this region, which is twice as long as expected in Western Europe (52.1years).⁴ On the 2021 Global Gender Gap Index, Albania ranks 25th, Bosnia and Herzegovina 76th, Romania 88th, and Armenia 114th. with Albania's relatively high ranking being conditioned by women's increased participation in the country politics during the last few years.⁵





² UNFPA; UNICEF. (2010). Women and Children's Rights: Making the Connection. New York.

³ Ibid.

⁴ http://www3.weforum.org/docs/WEF_GGGR_2021.pdf.

⁵ http://www3.weforum.org/docs/WEF_GGGR_2021.pdf.

3. Research framework

The current research framework is a result of analysing, adapting, and merging several internal and external models and frameworks of women's empowerment, gender equality and child well-being. Consequently, the research framework is the first of its kind and different from existing research models available in the literature.

Empowerment dimensions:



Empowerment at the personal level refers to women's self-perception, qualities, and a woman's perceptions in relation to herself, her well-being, how she considers her role in society and the roles of other women.



Empowerment at the relational level takes place in a woman's immediate surrounding network such as her family and community. It refers to the relationships and power relations within this network and includes decision-making power, control over assets, control over time (unpaid domestic work) and ability to redistribute the burden of care, as well as the experience of GBV.



Empowerment through environmental factors implies a broader context which consists of informal factors (such as equitable social norms, attitudes, and the beliefs of wider society), and formal aspects (such as a gender-responsive political and legislative framework).

In addition, the research framework consists of the specific child well-being indicators that focus on children's education, health, protection, and psychosocial well-being.

Figure 2: Research framework



4. Methodology

World Vision carried out a mixed methods study design with children and mothers benefiting from World Vision programmes in Albania, Armenia, BiH and Romania. Participating girls and boys were aged 11-15, while the mothers were between 35 and 50 years old. The quantitative data was gathered through population-based cross-sectional design. The qualitative data was gathered through key informant interviews (KIIs). The sample of surveyed children and their mothers in Armenia, BiH and Romania was selected by convenience from a group of World Vision programme/project participants in the vulnerable communities. In Albania the sample of surveyed children and their mothers was selected through a proportional random sampling.⁶ The sample size for each country is provided in *Table 1*.

Table 1: Sample size in response areas/countries

| AREA/COUNTRY | TARGET |
|--------------|--|
| ALBANIA | 464 women, 239 girls and 225 boys |
| ALBANIA | 20 KIIs with women and 20 KIIs with girls and boys (split equally) |
| ARMENIA | 100 women, 54 girls and 46 boys |
| | 2 KIIs with women and 4 KIIs with girls and boys (split equally) |
| BiH | 104 women, 52 boys and 52 Girls |
| Diri | 2 KIIs with women and 4 KIIs with girls and boys (split equally) |
| ROMANIA | 104 women, 51 girls and 49 boys |
| | 2 KIIs with women and 4 KIIs with girls and boys (split equally) |

The survey tools relied on existing reliable and valid instruments/scales to measure various indicators of women's empowerment and children's well-being. The quantitative and qualitative tools for women and children were compiled and translated into the respective languages by WV MEER National Offices.⁷

The data collection took place during May/June 2021, with full consideration to COVID-19 preventive measures. The data collection was guided by the WVI Safeguarding policy and minimum standards for interviewing children, developed by the Inter-Agency Working Group on Children's Participation.

When considering the findings of the study, some methodological limitations should be noted. First, the sample size in Armenia, BiH and Romania was chosen through a convenient sampling method, which follows non-probability rules. Thus, the results from this research cannot be generalised to the entire population of children and their mothers in the target countries. It should also be noted that statistical associations were drawn from a convenient sample with limited power and therefore, research conclusions should be analysed carefully and explored further in future research.

⁶ The sample was calculated based on the total number of children aged 11-15 in Albania considering 95% CI and 5% margin of error.

⁷ A detailed description of the tools can be found in the country reports.

5. Demographic and socio-economic profile of surveyed women

The women surveyed in transitioning economies were on average from 28 to 31 years old. They married at around the age of 21 and live with extended families consisting, on average, of four to five family members. Most of them were citizens, with the majority having secondary or higher-level education, and more than half involved in paid activities.

| | | | ALBANIA | ARMENIA | BiH | ROMANIA |
|------------|---------------------------|------------------------------------|-----------|------------|-----------|------------|
| *iii | AGE | Average | 27.7 | 28.3 | 30.7 | 30 |
| M Â | AGE GETTING MARRIED | Average | 21.2 | 20.7 | 23.2 | 21 |
| | HOUSEHOLD SIZE | Average | 5.1 | 4.9 | 4.3 | 5 |
| | RESIDENCY STATUS | Citizen Internally displaced | 93% 7% | 100% 0% | 96% 4% | 100% 0% |
| | EDUCATION | Illiterate | ١% | 0% | 0% | 2% |
| | | Primary | 2% | 0% | 4% | 6% |
| | | Intermediate | 64% | 6% | 22% | 36% |
| | | Secondary and higher | 33% | 94% | 74% | 56% |
| | PAID | No | 49% | 58% | 26% | 39% |
| Ċ | ACTIVITY | Yes | 51% | 42% | 74% | 61% |
| \$ | MONTHLY INCOME | Average | USD 294 | USD 209 | USD 504 | USD 690 |

6. Women's empowerment factors

6.1. Women's empowerment through relational factors

Empowerment at the relational level takes place in the relationships and power relations within women's surrounding networks. In order to define women's empowerment through relational factors, five core indicators were selected, namely: household decision-making power, control over household assets, control over time, ability to redistribute the burden of care, and experience of GBV.



6.1.1. Household decision-making power

The women surveyed were found to have different levels of decision-making power. This is most likely influenced by the different contextual and gender-responsive legislative developments in the respective countries. The largest percentage of women without decision-making power was found in Armenia, with Albania coming in second. Conversely, most of the women in BiH, and even more so in Romania, reported being the decision-makers in their households. Generally, decisions are made in conjunction with their husbands, with very few women having complete autonomy. However, many of the women reported that they were able to influence decisions, especially related to household management, and to a lesser degree, decisions involving consumption, expenditure, investment and business activities. The exception to this was found in Romania where a large percentage of women reported that they could influence all decisions.

| 6 | |
|---|--|
| | |

'When the decision is related to purchasing kitchen equipment, I take it alone. When it is related to bigger issues, such as renovation, we decide together. There are also certain issues, when my husband decides alone, and it is normal.' – Lia, Armenia

| | ALBANIA | ARMENIA | BiH | ROMANIA |
|---|---------|---------|-----|---------|
| Women without household decision-making power (%) | 45 | 76 | 28 | 17 |

6.1.2. Control over household assets

A majority of the women surveyed in Albania, BiH and Romania reported having control over household assets; however, there were still many women who reported having no control and this was especially the case in Armenia where this group makes up the majority. Romania is at the other end of the scale where over 80 per cent of women reported having control over household assets. Again, the women in all four countries stated that they did not have autonomous control, with joint decisions required, especially when it came to selling or replacing items. Women appeared to have the most control over matters related to communications and consumer durables, but very little control when it came to matters related to the agricultural lands and transportation.

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'When something has to be changed in the house, often the decision is made by my husband, whether we have to replace a certain object or we have to repair it, but in any case, I have a great influence on the decisions that my husband makes.' – Luljeta, 46, Albania

| 6 0000 | | ALBANIA | ARMENIA | BiH | ROMANIA |
|--------|--|---------|---------|-----|---------|
| | Women with no control over household assets (%) | 39 | 64 | 30 | 18 |

6.1.3. Experience of gender-based violence (GBV)

On average, one-fifth of the surveyed women have experienced GBV, with the lowest percentage from Armenia and the highest percentage from BiH. Emotional abuse was reported to be the most common form of violence against women, with a relatively lower prevalence of physical and sexual violence. A vast majority of the women with experience of GBV also mentioned intimate partner violence (IPV). It should be noted that external resources report a much higher prevalence of GBV in all four countries.



'I know some families where women have an inferior status compared with men. They are humiliated and aggressed by their husbands.' – T.M, 49, Romania

| K | | ALBANIA | ARMENIA | BiH | ROMANIA |
|----|----------------------------------|---------|---------|-----|---------|
| TA | Women with experience of GBV (%) | 22 | 16 | 25 | 23 |

6.1.4. Control over time and ability to redistribute burden of care

The unequal division of household activities is still highly prevalent in all four countries. Traditionally, women do almost all the unpaid and reproductive work, in addition to paid work, while men are responsible only for the paid labour. The majority of the surveyed women do not have control over their time, with most overworking and resting less than 10 hours per day (including sleeping hours). Men's involvement in childrearing is still limited in all four countries. In BiH, approximately one-fourth of the surveyed women said they can delegate care activities to their husbands. In Albania and Armenia, only one in ten women stated they were able to redistribute care, with this figure dropping to only 4 per cent in Romania. As shown in the vast body of evidence, gender disparities related to the distribution of care work, exist all around the world and are rooted in the hetero-patriarchal structures common in many societies.⁸

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'I spend my free time with children. The older son and daughter train karate so I drive them to training. I take my youngest daughter out to play on the playground. Also, I use my free time to work in the greenhouse, which allows us to eat healthily.' – Sjenzana, 30, BiH

| | ALBANIA | ARMENIA | BiH | ROMANIA |
|--|---------|---------|-----|---------|
| Women with no control over time (%) | 68 | 81 | 75 | 78 |
| Women without ability to redistribute the burden of care (%) | 91 | 87 | 76 | 96 |

8 Samman, E., Presler-Marshall, E., Jones, N., Bhatkal, T., Melamed, C., Stavropoulou, M., & Wallace, J. (2016). Women's work: Mothers, children and the global childcare crisis. Overseas Development Institute. London: Overseas Development Institute.

Overall, the research results show that

Women empowered through relational factors (%)

Only ALBANIA ARMENIA l per cent % % of the surveyed women in Albania, Armenia and BiH are empowered through relational ROMANIA BiH factors, with all five indicators present, while in Romania none 0% of the surveyed women are empowered through these factors. The major factor limiting women's empowerment at a relational level is TIME POVERTY and

at a relational level is **TIME POVERTY** and the **INABILITY TO REDISTRIBUTE CARE** burden.

This result confirms the assumption that, along with personal and environmental conditions, relational factors play a critical role in the empowerment of women. It does, however, remain the most challenging part of empowerment work as the responsibility lies in a woman's immediate environment (her family and community) which is often resistant to change.

6.2. Women's empowerment through personal factors

Empowerment at a personal level takes place within a woman. This refers to how a woman perceives herself and her well-being, as well as what she considers her role (and that of other women) to be in society. In this study, the personal empowerment dimension was measured through five indicators: self-esteem, attitudes on gender equality (sexism), acceptance of GBV, mental/emotional well-being, and spiritual well-being.





6.2.1. Self-esteem and mental and spiritual well-being

Unlike relational factors, women have a lot more control over personal resources that are critical for their empowerment. Overall, most of the surveyed women reported having high or moderate self-esteem, a positive self-image, and high or moderate mental well-being. Furthermore, all the women surveyed in all four countries reported having high or moderate spiritual well-being.

The data showed that approximately one in ten women showed signs of probable depression. The mental well-being of the surveyed women was affected by a variety of factors, including financial problems, absence of personal space and self-care, relationships with partners, the pandemic and related challenges. In Armenia, the country's political situation and conflict was identified as one of the major factors affecting the mental well-being of women.

Spiritual well-being can be considered a sign of a woman's resilience against hardships. Religiousness is a significant resilience factor for many people in this region. It helps individuals withstand the effects of life crises and major life stressors.

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'The last year has been a series of difficulties due to the global COVID-19 pandemic. This has affected us in many aspects of our lives as it first and foremost brought about isolation for our entire family. My husband did not have many opportunities to emigrate and the income decreased for our family. Having said that, it has also affected the mental and emotional well-being of me and my whole family.' – Luljeta, 46, Albania.

| | | ALBANIA | ARMENIA | BiH | ROMANIA |
|------|--|---------|---------|-----|---------|
| | Women with high/moderate self-esteem (%) | 94 | 96 | 97 | 98 |
| N1/2 | Women with high/moderate men- tal well-being (%) | 89 | 91 | 89 | 94 |
| | Women with high/moderate spiri- tual well-being (%) | 100 | 100 | 100 | 100 |

6.2.2. Attitude on gender roles (sexism)

The survey results show that the majority of women surveyed in all four countries are likely to endorse egalitarian and gender transcendent beliefs; however, women from these countries still find it difficult to break out of the traditional gender roles. This explains why most of the women hold high gender-linked views. With the prevalence of deeply rooted gender norms, the women tend to internalise the sexism and conform to it on a daily basis. The most common beliefs associated with gender and social roles are that mothers are responsible for their children's upbringing, while fathers are largely responsible for providing financially for their children, and that some types of work are not appropriate for women.

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'The role of a woman is to take care of her family; I never had a desire to work.' – Lia, Armenia

| | 500 | | ALBANIA | ARMENIA | BiH | ROMANIA |
|---|-----|--------------------------------|---------|---------|-----|---------|
| Ç | Ę | Women with sexist attitude (%) | 49 | 38 | 53 | 47 |

6.2.3. Acceptability of GBV

The survey results showed that while the majority of surveyed women do not accept GBV, some still do accept it. In Albania and BiH, approximately one in ten women justifies GBV; in Romania the figure is around 4 per cent, while in Armenia it rises to more than one-third of the women surveyed. The most common circumstances given for the justification of GBV include when a man suspects his wife of being unfaithful, when a woman disobeys her husband, or when she does not pay attention to their children.

| ~7 | | ALBANIA | ARMENIA | BiH | ROMANIA |
|----|--------------------------|---------|---------|-----|---------|
| Ţ | Women who accept GBV (%) | 14 | 37 | 11 | 4 |

Overall, the research results show that

Women empowered through personal factors (%)

4 per cent

of the women surveyed in Albania, Armenia and BiH. and almost half the women in Romania, are empowered through all the personal factors stated in the study.

ALBANIA 4 % BiH 41%

ARMENIA 4 % ROMANIA 48%

Compared to empowerment through relational factors, women are much more likely to be empowered through personal factors.

Compared to the relational empowerment score, this is a significant result that speaks on the one hand to the overall resilience of women and their ability to manage daily stress, while also demonstrating how women appear to internalise relational factors - a process which does not appear to affect their self-perception or well-being, perhaps because it has become such a part of everyday life and its corresponding social norms.



6.3. Women's empowerment through environmental factors

Empowerment through environmental factors looks at the broader context, which consists of informal factors such as inequitable social norms, attitudes and the beliefs of wider society, and formal aspects such as the gender-responsive political and legislative framework. This dimension was measured by three key indicators: accessibility of legal services and civic rights (formal), safety of movement outside home (informal) and social norms/stereotypes (informal).



6.3.1. Social norms/stereotypes and safety and freedom of movement outside the home

The majority of surveyed women are exposed to harmful stereotypes and hetero-patriarchal values in their communities. The stereotypes related to time use and distribution of household tasks, as well as financial inclusion, are still widespread in all four countries. The survey findings showed that many women in these countries still experience restrictions of movement and a lack of safety outside the home.



'I don't have a driving licence and that prevents me from going somewhere with the children, so we are always home.' – Vanja, BiH.

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'In my country, there is a problem between genders, our parents, grandparents, always make distinctions between girls and boys. Boys have always been preferred over girls.' Nafie, Albania



| | | ALBANIA | ARMENIA | BiH | ROMANIA |
|----------|--|---------|---------|-----|---------|
| | Women living in communities with high or moderate restrictive gender norms (%) | 88 | 80 | 58 | 59 |
| 1 Across | Women not able to enjoy safety and free- dom of movement outside home (%) | 43 | 30 | 21 | 12 |

6.3.2. Civic rights and access to legal aid and assistance

Access to civil rights and legal aid differs for women in each of the countries. The results show that Albanian and Armenian women have especially low (or no) knowledge about their own rights or any available services in their countries. Inequalities between women and men, gender bias, and stereotypes resulting in unequal access to justice for women persist in all four countries. Despite all the countries taking intentional steps over the last decade towards gender equality, such as joining international agreements and improving gender-responsive legislation, the legal systems and services remain ineffective, enabling continuous gender-based discrimination. Within the legal frameworks of these countries, the laws and their implementation are inconsistent and the monitoring of the implementation is ineffective.

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'Gender equality can be achieved when the government itself provides legal assistance and support to women, but also fights to enforce the law of equal rights. There should be policies even for abused women, they should be supported to find ways to get out of their situation.' – Enkelejda, 38, Albania.

| | ALBANIA | ARMENIA | BiH | ROMANIA |
|--|---------|---------|-----|---------|
| Women without access to legal aid/ assistance (%) | 78 | 63 | 86 | 73 |
| Women without access to civic rights (%) | 91 | 96 | 82 | 86 |

Overall, the research results show that

Only

l per cent

of the women surveyed in Albania and in Armenia, 2 per cent in BiH and none in Romania are empowered through environmental factors. Women empowered through all environmental factors (%)

ARMENIA

ROMANIA

0%

This is not surprising with similar results in the relational factors index, as relational and environmental factors are closely related and tend to reinforce one another.

ALBANIA

1%

BiH

2%



6.4. Associations between women's socio-economic and demographic characteristics and empowerment factors

Finding #1:

Education is a critical factor for women's empowerment.

The data showed that in comparison to less educated women, women with an education are less likely to hold gendered stereotypes on social roles and do not accept GBV. This finding is important since it confirms that the level of education is closely associated to changes in social norms – the more educated women and men are, the less likely they are to conform to traditional gender norms. Women with higher levels of education have more decision-making power in their HHs, more control over assets, and better access to legal aid. Women with a higher level of education are also less likely to be subject to restrictions in movement. This finding demonstrates that women's education and personal autonomy are closely related; higher levels of education bring more employment opportunities, along with more agency and awareness on how to exercise personal rights.





Finding #2:

Living with the extended family and marriage at a young age limit a woman's empowerment.

Women who live in large families (and with in-laws), have less control over the HH assets and are more likely to hold sexist attitudes. Larger HHs are normally associated with increased financial vulnerability, with more hierarchical power dynamics due to several generations living together. This explains why women in larger HHs are more vulnerable, with less control over HH assets, as well as being conditioned to maintain more traditional gender roles and relations within the family. Marriage at a young age is also associated with a lack of control over HH assets.

The data also showed that older women are more likely to delegate the burden of care to another adult in order to rest or do another activity, but are more likely to experience GBV than younger women.



Control over assets and HH size in Armenia



Control over assets and marriage age in Albania



Redistribution of care and age in Albania

Finding #3:

Women's economic participation plays a major role in women's empowerment

The analysis showed that employed women have more decision-making power at HH level, better access to legal aid, less restrictions on their movement, are less likely to hold sexist attitudes, are less likely to accept or experience GBV, have better mental well-being, but also have less control over their time. Women earning higher incomes were also shown to have better overall mental well-being compared to those with lower incomes; as well as having more egalitarian/non-sexist attitudes and no acceptance of GBV.

On the other hand, due to existing gender norms, women's employment does not translate into equal sharing of HH responsibilities, which is why they are loaded with paid and unpaid work, giving them less control over their own time in comparison to unemployed women who have to contend mainly with unpaid work.



7. Child well-being outcomes

Children's well-being was measured by looking at their education, health, protection, and psychosocial outcomes. In education, three indicators were prioritised: self-perceived functional literacy, access to formal education and positive attitude towards learning. With regards to health, children's diet diversity and positive health-related behaviours were measured. For protection, physical, emotional and the community's perceived sexual/online violence indicators were used. Self-esteem, mental well-being, spiritual well-being, resilience and empathy all feed into the psychosocial dimension of a child's well-being.

The analysis showed that only a very small percentage of the children surveyed met all the well-being criteria mentioned above. The main factors hindering the well-being of children were found to be low functional literacy, a lack of positive health behaviour, and violence. The highest scores for overall child well-being were found in BiH and the lowest in Armenia.

The vast majority of the surveyed children are enrolled in schools and willing to learn, with only a small amount out of school due to various factors such as distance to school, sickness, or having to support their families in nonpaid activities. The survey found that most of the children have good or moderately diverse and adequate nutrition, moderate self-esteem, high resilience capacity (especially in relation to their caregivers), high empathy, and very high spiritual empowerment. Less than 10 per cent of the children surveyed showed probable or possible signs of depression.

Regarding the factors hindering child well-being, the data showed that the majority of children in all the countries did not self-perceive themselves as being functionally literate. Furthermore, in Albania, BiH and Romania, only around half demonstrated positive health-related behaviour, with this figure dropping to one in ten in Armenia. High levels of exposure to violence were reported, with mothers, other family members and friends being the main perpetrators. Children also reported hearing about sexual violence in their community and online harm.

66

'It was difficult to adapt to online learning process; sometimes I wasn't able to understand what teachers were saying. Then the frustration came, especially when I couldn't meet my classmates and friends.' – R.S.S, I 5, Romania

66

'I love football very much. However, there is no women's football club in our municipality. I could go to training sessions with the boys, but I would never get a chance to play a match with them.' – Sara, 13, BiH.



Children well-being outcomes by countries (%)

| Dimension | Indicators | Albania | Armenia | BiH | Romania |
|--|--|---------|---------|-----|---------|
| Education | Children with self-perceived functional literacy | 26 | 9 | 43 | 20 |
| | Children with positive attitude towards learning | 71 | 59 | 64 | 97 |
| | Children enrolled in formal education | 99 | 100 | 91 | 98 |
| Nutrition | Children with diet diversity | 97 | 98 | 98 | 100 |
| Health | Children with positive health-related behaviour | 58 | 10 | 66 | 51 |
| Protection | Children not exposed to violence | 42 | 57 | 55 | 48 |
| Psychosocial | Children with self-esteem | 99 | 98 | 94 | 98 |
| | Children with socio-ecological resilience | 98 | 99 | 87 | 98 |
| | Children with empathy | 97 | 99 | 99 | 97 |
| Mental | Children with mental well-being | 93 | 89 | 93 | 91 |
| S piritual | Children with spiritual well-being | 99 | 100 | 100 | 100 |
| Children with overall well-being | | 6 | I | 9 | 7 |
| Children educated with good health and protected from violence | | 6 | l I | 9 | 7 |
| Children with psychosocial and mental well-being | | 87 | 86 | 88 | 86 |

8. How women's socio-demographic and empowerment factors affect child well-being

Finding #4:

Women's education and participation in labour force enable well-being in children

Children of educated and economically empowered women are better protected from violence and have higher self-esteem and resilience. This finding is supported by an extensive body of literature, demonstrating that the educational background of women has a significant impact on child development. For example, a 2017 study aimed at exploring the influence of mother's health and socio-economic determinants on the mental health of children, found that a mother's low level of education is strongly associated with a child's mental health disorders.⁹



Finding #5:

Women's mental well-being is strongly associated with their children's overall well-being, resilience, protection and good mental health

The correlational analysis revealed that mothers with a positive self-image and good mental well-being have children who are willing to learn and have better functional literacy. The research findings have demonstrated that mothers who have poor mental health are more likely to have children that experience abuse. Not surprisingly, a mother's mental well-being also influences a child's self-esteem and overall resilience. The literature suggests that a mother's mental health can affect a child in various ways; for example, evidence indicates that the children of mothers with depression or depressive symptoms are more at risk of developmental delays, behaviour problems and other health related issues.¹⁰ Furthermore, according to a 2017 study, the maternal mental health index is associated with hyperactivity and peer problems among children.¹¹



¹⁰ World Vision Australia. 2021. Equality and Empowerment: Critical Pathways to Child Well-being. Exploratory research to understand gender equality and women's empowerment pathways and contributions to child well-being.

¹¹ Arroyo-Borrell, E., Renart, G., Saurina, C. et al. Influence maternal background has on children's mental health. Int J Equity Health 16, 63 (2017). https://doi. org/10.1186/s12939-017-0559-1.

Finding #6:

Discriminatory attitudes in women are linked to negative educational, protection and psychosocial outcomes in children

The findings have shown that non-sexist mothers are more likely to be associated with children enrolled in school, while sexism might be a factor that prevents school enrolment. There was also an association found between women's sexist attitudes and children's exposure to violence, poorer mental health and resilience. These associations might be mediated by a woman's education levels. The data confirmed that educated women are less likely to hold sexist attitudes and accept GBV, while the children of educated women are more protected, have better mental health and education outcomes.



Mother's acceptability of GBV and children's exposure to violence in Albania.

Finding #7:

Women's decision-making power at household level is associated with better educational and protection outcomes in children

The data showed that women with decision-making power in HHs are more likely to have children with positive attitudes towards learning and higher literacy. Moreover, data showed that women who own the decision-making power also have control over HH assets, are able to protect their children from abuse and inflict less violence themselves. The vast body of research finds a positive association between women's decision-making power and child well-being. The studies have found that child well-being is closely linked to the degree of independence of women with decision-making power at HH level.¹²



Mother's control over assets and child's exposure to violence in Albania

¹² World Vision Australia. 2021. Equality and Empowerment: Critical Pathways to Child Well-being. Exploratory research to understand gender equality and women's empowerment pathways and contributions to child well-being.

Finding #8:

Women's experience of GBV is negatively associated with protection and mental health outcomes in children

A direct association was observed between women who experience GBV and the exposure of their children to violence. The children of women who have experienced GBV are more likely to experience violence themselves. Moreover, children experience both short- and long-term impacts from witnessing IPV, even when they are not physically or sexually harmed themselves; for example, the experience of GBV for mothers was associated with poorer mental health in children. This find-ing is supported by a substantial body of external literature. For example, a study by Straus and Smith (1990) revealed that even minor violence is associated with a 150 per cent increase in child abuse. Straus (1994) also found that mothers who had been subjected to physical violence by their partners had a 71 per cent chance of hitting their child compared to 48 per cent of women who had not experienced physical violence.^{13,14}



Mother's experience of violence and child's exposure to violence in Romania. Mother's experience of violence and child's mental well-being in Albania.

Finding #9:

Mothers' access to legal aid and civic rights are associated with better educational and protection outcomes in children

The data analysis showed that mothers' access to civic rights positively influences children's functional literacy, while access to legal aid also protects their children from violence. Women who have access to civic rights and legal aid are more educated (as confirmed by the survey data), which makes their children more likely to be better protected. Furthermore, it is expected that women with access to civic rights and justice are better equipped with information and instruments to ensure their children's rights by protecting them from violence and providing a better education.



Finding #10:

Freedom of movement for mothers outside homes is associated with better educational and protection outcomes in children

The data showed that a mother's freedom of movement outside her home is linked to better functional literacy in her children. Children who are functionally literate in the three domains of language, digital and numeric skills are more likely to have mothers with no restriction on movement. Moreover, the research findings have demonstrated that mothers with restrictions on movement are more likely to have children that experience abuse. This association is expected to be mediated by the education levels of mothers. The survey data suggests that the higher the education levels, the less likely there are to be movement restrictions, and that the children of educated women are better protected from violence and likely to have better educational outcomes.



Mother's freedom of movement and children's functional literacy n BiH. Mother's freedom of movement and children's exposure to violence in Romania.

Finding #11:

Community gender norms and stereotypes are associated with poorer nutrition and protection outcomes in children

The data showed that children with mothers living in communities with prevalent gender stereotypes and norms are poorly nourished and less likely to adopt healthy behaviour. Furthermore, the research findings have demonstrated that mothers that are exposed to inequitable gender norms in communities are more likely to have children that experience abuse.



Community gender stereotypes and children's diet diversity in BiH. Community gender stereotypes and children's exposure to violence in Romania.

9. Recommendations

Recommendations for donors, policymakers, and governments:

Prioritise women's empowerment projects

with a strong focus on preventing GBV, shifting gender norms, provision of life skills, women's employment and access to legal services.

Invest in adapting and expanding GBV response services

such as shelters and safe spaces, along with psychosocial support and advice for individuals experiencing or at risk of GBV.

Strengthen the application of gender markers

that ensure proposed projects address root causes of gender inequality, by specifically tackling gender norms and gender relations.

Ensure gender equality is embedded in the education policy and practice

to ensure gender-responsive classroom practices and effective transition from education to workforce.

State and non-state actors to better coordinate their efforts

to ensure women's empowerment dimensions are prioritised and addressed while developing and implementing national policies.

Consider women's empowerment as a critical precondition for achieving children's well-being

and accordingly embed women's empowerment approaches into child-focused policies, strategies, and interventions.

Provide income-generating activities for women

and potentially create sustainable economic participation opportunities within the community.

Provide targeted mental and psychosocial support for mothers and their children,

especially for the ones affected by GBV and IPV.

Thoroughly apply gender markers

that ensure proposed projects address root causes of gender inequality, by specifically tackling gender norms and gender relations.

Ensure consulting with women on their needs, barriers, and wishes,

while designing new projects and interventions, even when they primarily target children's well-being.

Invest in addressing harmful social and cultural norms,

through awareness-raising in close partnership with local CSO and faith leaders, as the leading power holders for social change.

Ensure that all projects are grounded in sound gender and social analysis,

which seeks to understand the different experiences, needs and barriers of women/men and girls/boys.

Provide mothers with education opportunities,

connected with future employment, to improve their basic life skills and awareness of human/civic rights and services.

Ensure adoption of project models/ approaches that are genderresponsive,

and provide explicit opportunities to address gender norms and relations in the project design.

State and non-state actors to better coordinate their efforts,

to ensure women's empowerment dimensions are prioritised and addressed while developing and implementing national policies.

Through informal power holders, strategically engage men and boys in dialogue to change social norms,

and strengthen their engagement in reproductive and caregiving roles, as well as women's participation in the economy.

Engage UN agencies, Civil Society Organisations, and organisations focusing on women's rights and empowerment

for effective coordination and work alignment.

10. Conclusions

This study empirically investigated the association between women's empowerment dimensions and various child well-being outcomes. This was done through the analysis of quantitative and qualitative data gathered from World Vision beneficiary children and their respective mothers in Albania, Bosnia and Herzegovina, Romania, and Armenia.

The research has demonstrated that transitioning economy countries need to accelerate effective measures towards achieving gender equality and women's empowerment.

> Women are dependent on their own inner empowerment capacities Adverse conditions that women face at home and in their communities, such as time poverty, ineffective legislation, traditional patriarchal values and associated harmful gender norms and practices, suppress their agency and realisation of human rights, making them dependent on their own personal/inner empowerment capacities.

2

Women's empowerment is essential for the well-being of children

The study also demonstrated that women's empowerment is essential for the wellbeing of children. A mother's household decision-making power, protection from GBV and overall good mental well-being are all important factors for improving children's physical and psychosocial well-being, including reducing the risk of child violence.

3

Gender-transformative and gender responsive actions are critical

Gender-transformative and gender-responsive actions, that address IPV, focus on increasing women's access to education and employment, promote women's status and rights within the family and community, are some of the critical strategies necessary for achieving gender equality and the subsequent well-being of children in the context of transitioning economies.