Dear Hana, Laura, and WB Gender Strategy team,

Thank you for the continued opportunities to provide feedback to the draft World Bank Gender Strategy 2024-2030. The Strategy comes at a crucial moment where gender equality has regressed as evidenced by the Bank, and in the midst of a global polycrisis testing underfunded and fragile public systems with many poorer countries facing crushing debts and impossible decisions.

Oxfam especially welcomes the repeated references to human rights and the rights of women and girls throughout this new Strategy. We also appreciate efforts to build on gender tagging and flagging at project level by also including gender-disaggregated indicators for project evaluation metrics; introducing High-Level Outcomes in Country Partnership Frameworks; and the links made between gender and macroeconomic policy approaches.

However, we are disappointed that despite it being highlighted in several CSO calls, the Strategy has not adequately acknowledged or addressed the harmful gendered effects of the World Bank’s core project approach or the impact of macroeconomic policies it advises – particularly on regressive taxation, promoting market-based solutions to build public goods like privatization of social services, and fiscal consolidation. The content in the Strategy referencing macroeconomic dimensions is largely descriptive, but elides the World Bank’s impact on those gender gaps. This seems like a missed opportunity to focus on the Bank’s impact on gender gaps and reflect on them through the priorities in the Gender Strategy. Reflecting recommendations from the IEG midterm review, it is critical that the Bank invests in inward-looking gender and social impact assessments of the Bank’s approaches and policy advice as a broader part of the Gender Strategy, including evaluations of the gendered and social impacts of the private sector-led approach central to current Bank approaches, and take accountability for the results.

The World Bank is an influential organization that can play a pivotal role in advancing gender equality. In order to do so and to make sure that Bank’s actions contribute to, and are not detrimental to, gender equality, we’d like to draw attention to the following concerns and highlight specific recommendations for the 2024-2030 Gender Strategy:
A. **On Private Finance:** The Strategy states “advancing gender equality requires financing, including mobilizing and allocating resources effectively in the public and private sectors”. While the intention to address the financing gap is appreciated, we are concerned about the risks of relying on private finance and private sector delivery to meet public system gaps and structural problems. The reliance on the private sector to deliver development risks increasing inequalities, primarily through disarming public infrastructure and reducing public control which exposes women, girls and non-binary people more to exploitation and all forms of gender-based violence. The private sector-led and private-finance led development approach is not new and has been promoted with very limited success since the 2015 “From Billions to Trillions” document and the 2017 “Maximising Finance for Development” approach. So far, none of these efforts have met expectations; neither in mobilizing financing that was promised, nor having the positive development impacts promoted. Thus, we caution the Bank gender team against suggesting/assuming that private finance or blended mechanisms can address systemic gender gaps and meet development goals in this area.

More specifically, clear evidence exists of the negative impact of private sector investments on education and health which are an integral part of Outcome 2 of the proposed strategy. For example, Oxfam’s research on IFC healthcare investments in India, Kenya, Nigeria and Uganda, has deeply troubling findings on health access and equity. It finds that women, particularly from lower income groups, are being excluded, bankrupted or impoverished by exorbitant prices and profiteering of IFC clients and experiencing human rights abuses such as patient detentions or imprisonment for failure to pay hospital bills. Specifically, Oxfam found that the average starting cost of an uncomplicated vaginal birth delivery at a DFI-funded private hospital (among those studied in Kenya and India) amounts to over one year’s total income for an average earner in the bottom 40%! Similarly, there are clear risks with PPPs in education promoting inequality instead of achieving universal quality education. Evidence outlines the mixed outcomes which have come with these PPPs including the negative or null effects on education outcomes and negative impacts of exclusion on poor children and girls. Lastly, recent reports are emerging around IFC’s management, monitoring and supervising of its investments in the social sector particularly in education, which indicate a clear and systemic gap in the IFCs capacity to prevent, mitigate or remedy harm in its investments in the social sectors, with tragic implications for women and girls. When it comes to basic services, evidence strongly suggests that private sector financing and delivery drives inequalities in access and outcomes. As such, transparent ex-ante and ex post impact assessments must be undertaken where public
development resources are being utilized for private finance mobilization. There is also a need for strong guardrails, safeguards and clear criteria for the use of private finance within the Strategy – with a more sophisticated approach to determining where it is appropriate and actually contributes to development impact and where women and girls are most likely to face risks of harm and exclusion.

The evidence and current focus on private finance mobilization contradicts the welcome emphasis in the draft Gender Strategy on public services, like universal health coverage and care services as fundamental enablers of women’s rights and gender equality. If the Bank chooses to prioritize mobilizing private capital or blended finance for development over supporting and investing in public resource mobilization, women will suffer. At a minimum, public services such as education and healthcare should be approached with extra caution and protected from the “private-first” financing agenda. Ultimately, however, it’s hard to think of anything more powerful than enabling universal, quality, free, public systems in reducing gender and economic inequalities.

B. On the Gendered Impact of Macroeconomic Policies: We encourage the Bank to think bigger. The Strategy primarily focuses on microeconomic “empowerment” approaches that involve integrating women into existing economic systems that are bad for women. This approach often atomizes women's economic struggles and might not address the underlying structural barriers that hinder women's full economic participation. The Strategy should acknowledge the need for systemic changes that go beyond integration to the formal labour sector, to truly empower women and girls by addressing the root causes of gender inequality in economic systems. While there is a strong economic rationale for gender equality, we do not strive for gender equality for the sake of economics. Having the appropriate rationales/goals will help ensure better indicators of success for this Gender Strategy. For example, while the strategy rightly mentions the current sluggish economic growth and rising poverty, nowhere in the document is economic inequality mentioned, which is very disappointing at a time when extreme wealth and extreme poverty have increased simultaneously for the first time in 25 years. The evidence is incontrovertible that high and persistent levels of inequality undermine all the economic, social, and environmental goals of the World Bank – including gender equality goals. Inequality also drives weaknesses in institutions and governance that in turn undermine the prospect of successfully implementing reforms.

Furthermore, the Strategy would benefit from acknowledging the role of macroeconomic policies which are worsening and entrenching gender inequality. During COVID, many governments slashed critical health and social protection spending fuelled by advice from IFIs; cuts which can have particularly detrimental effects on survivors of
gender-based violence, which rose during the pandemic. The World Bank’s advice and conditions over the last 40 years, even during the COVID-19 pandemic, has led countries to continue cutting back public spending on social services with the resulting gaps often filled by unaccountable private enterprises.

Below we highlight examples of how the narrow and more micro lens of the draft Gender Strategy results in key gaps in analysis regarding three crucial internationally-recognized rights for women: health, social security, and education –

- **Health:** The focus on UHC guaranteeing access to adolescent, SRHR, maternal and GBV response services is welcome; however, a more systemic focus on economic barriers is needed. This includes, among others, addressing the financial challenges by women resulting out of rising out of pocket expenditure on health (in part caused by cutbacks or stagnation in government spending on healthcare), and ensuring access to essential medicines and diagnostics.

- **Social protection:** The draft Strategy appears to largely focus on cash-transfer approaches; at the expense of comprehensive, universal systems which are needed to make social protection gender-responsive and transformative. This is concerning because evidence demonstrates most low- and middle-income countries have, for decades, pursued a failed model of social protection, often with the support and advice of the World Bank. A more comprehensive approach to social protection would include support for informal workers, and maternity/paternity leave policies among others. In addition, social protection interventions must be designed and implemented with a gender lens, in particular with a view to ensuring they do not exacerbate or entrench unequal care burdens (as has been shown to be the case with many conditional cash transfer programs).

- **Education:** The focus on retention, building girls’ aspirations, promoting girls’ participation in STEM fields, and building job-relevant skills is welcome. However, the framework could be strengthened by complementing these measures by championing systemic measures like abolition of school fees at the secondary level, the introduction of policy and legislative measures that ensure the universal right to education, and adequate public financing for education.

To be truly intersectional and enable the realization of human rights, the Strategy should commit to acknowledging the impact of cuts to social spending, privatization of social services, and regressive tax systems on women, especially women facing additional intersecting forms of discrimination based on e.g. race, class, disability, indigeneity, cast and migrant status. In turn, it should commit to approaches that strengthen public financing and delivery of key social services that mitigate gender
inequality such as universal social protection systems, universal access to education, universal healthcare and quality, accessible childcare.

C. On Care: The Strategy recognizes that not only do gender dynamics result in women and girls shouldering disproportionate responsibility of care, but also, that women constitute most of the paid care (including healthcare) workforce. However, we are concerned by the limited framing and goals for investing in care systems, beyond the goal of facilitating women’s entry into the workforce. Given how central the care economy is to our broader economies and societies’ well-being, and how intimately tied unpaid, and underpaid care and domestic work is to gender inequality, it is important that the framing go beyond simply women’s economic empowerment, which the Bank links with economic growth. Care work, whether it is unpaid, underpaid or paid, is a critical social and economic good. We propose a stronger framing on the centrality of care as a hidden engine of our economies and (ignoring it) as a barrier to advancing gender equality throughout the Bank’s priorities, program designs, and implementation and evaluation plans. It is important to consider investment in quality, affordable and accessible care services as part of a broader goal or vision towards realizing public care-supporting infrastructure (access to water, sanitation, energy and transport) and quality, universally accessible and gender-responsive basic services (including healthcare), to ultimately support care-responsive economies that reduce the time and intensity of labor spent on care work. It is also important to acknowledge at project level that projects which are demanding on women’s time without a reduction in caring responsibilities will entrench rather than alleviate gendered disadvantages. Oxfam’s Caring in a Changing Climate report provides good examples of climate interventions that exacerbated women’s time use and harms to wellbeing.

There is also lack of analysis of the global care chain – whereby a great majority of care workers, both informal and formal, and domestic workers are women from the Global South within marginalized groups, who face compounding risks based on sex, race, ethnicity, class, disability, indigeneity, migrant status and caste. The Bank risks further reinforcing these inequalities without adequate situational analyses, that takes into account the broader socio-political climate within which care policies are pursued. For the Gender Strategy to truly accelerate gender equality, its commitments for care systems must focus more on ensuring decent work for the care workers who are the heart of the sector. It is disappointing that the Bank chooses to use “better jobs” instead of the accepted ILO goal of “decent work”, emphasizes the quality, fairness, and dignity of employment, not just improvement in job opportunities and prospects.

We strongly encourage the strategy to align with the International Labor Organization’s “5 R” Framework for Care Work (including Reward and Representation), rather than the
“3 R” framework used in the current draft. To this end, the Gender Strategy should acknowledge the importance of the regulatory environment in each country in order to protect labor rights, and safe, quality and accessible care services. Promoting adequate representation of unpaid carers and formal care workers as critical stakeholders with agency, engaging them as policy experts and leaders; but also throughout program design, implementation and evaluation, will advance several of the Strategy’s outcomes – engaging women as leaders; securing high-quality economic opportunities; and elevating women’s wellbeing. To support, Oxfam’s IFI Care-Responsiveness Barometer takes the “5 R” Framework a step further by providing a planning tool for adopting the Care Principles developed with partners and a monitoring framework to capture progress on integrating a care perspective into the IFIs’ internal and external operations across project, country and corporate (institutional) levels.

Reinforcing the concerns outlined in the previous section, the Gender Strategy seems to envisage a private sector-led approach to delivery of care services. Oxfam believes this carries significant risks in terms of exclusion and quality; and we urge more emphasis on mobilizing more domestic resources to fund public care provision. We shared similar concerns for the Bank’s new Childcare Initiative, demonstrating the limits of the Bank’s current approach to establishing childcare systems that are gender transformative.

The below conceptual analytic framework that highlights key care policy areas to keep in mind, based on evidence, in developing Oxfam’s care policy scorecard, as the Bank team explores best practices to enable a conducive policy environment for care.

Different studies show that “family-centered”, “maternalist” and “patriarchal” focuses reign in the policy arena. This supports the predominant belief that families, especially women, exist to provide care. Analyzing the current challenges in this field reveals that there is a pressing need to find fairer ways to distribute the costs and benefits of care and household chores. This implies moving towards men and women taking shared responsibility for care, focusing on the “care diamond”, which looks at four sites of care provision: families, the state, the private sector and the community. This can only be achieved through an integrated policy approach. Thank you for your consideration.
Framework

Analytical care: Conceptual environment for enabling policy

Recommendations

Policy