GENDER DISPARITIES AND POVERTY
A BACKGROUND PAPER FOR THE TOGO POVERTY AND GENDER ASSESSMENT 2022
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This background report to the Togo Poverty and Gender Assessment (2022) was prepared by Miriam Muller and Alina Kalle and benefited from valuable contributions from Stefane N’Dri, ToloBadia Ada Nayihouba, Rogeio Granguillhome Ochoa, and Aissatou Ouedraogo. The team is grateful to Jozefien van Damme and Eliana Matulevitch for their very insightful comments and inputs. Kossiwa Naman and Harende Kpango provided excellent logistical and administrative support. The team worked under the guidance of Carlos Rodriguez Castelan, Andrea Coppola, Hawa Cisse, and Johan Mistiaen.

A heartfelt thank you goes to all the key informants who generously shared their time, reflections, insights, and recommendations with the team to enhance the quality and relevance of this work. Those informants include representatives from the Présidence de la République; Ministère de la Planification du Développement et de la Coopération; Ministère du Développement du Développement et de la Coopération; Ministère de l’Action Sociale, de la Promotion de la Femme et de l’Alphabétisation; Ministère de la Santé, de l’Hygiène Publique et de l’Accès Universel aux Soins; Ministère de de l’Agriculture, de l’Élevage et du Développement Rurale; Ministère du Développement à la Base, de la Jeunesse et de l’Emploi des Jeunes; Ministère des Enseignements Primaire, Secondaire, Technique et de l’Artisanat, Chargé de l’Enseignement Technique et de l’Artisanat; Assemblée Nationale ; Institut National de la Statistique et des Etudes Economiques et Démographiques; GIZ Bureau de Lomé; United Nations Population Fund; United Nations Children’s Fund; United Nations Development Programme; Projet d’Appui à l’Emploabilité et à l’Insertion des Jeunes dans les Secteurs-Porteurs; Fonds d’Appui aux Initiatives Économiques des Jeunes; Faitière des Communes du Togo; Agence Nationale d’Appui au Développement à la Base; ONG Partage et Action en Synergie pour le Développement; Fédération des Entrepreneurs et Femmes d’Affaires du Togo; Fédération des Organisations Non Gouvernementales au Togo; ONG Femme de Demain; Cadre National de Concertation de la Mutualité au Togo; Université de Lomé; and Université Catholique de l’Afrique de l’Ouest – Unité Universitaire du Togo.
EXECUTIVE SUMMARY

Gender gaps in Togo cut across many dimensions. Inequality starts in childhood, when girls are disadvantaged in access to schooling because of prevalent social norms and gender roles. It continues into adolescence, when a larger share of girls starts dropping out of school (with fewer than one in two completing secondary education), unable to continue education because of a number of factors, including child marriage, adolescent pregnancy, and time use patterns shaped by gender norms. In adolescence and adulthood, women face the constraints of limited education and economic opportunities, restrictive gender roles that leave women little time for participation in the labor force, financial inequities, high levels of acceptance of violence against women, health risks, and a lack of agency and decision-making capacity.

High prevalence rates of child marriage (with 1 in 4 women ages 20–24 in Togo married by age 18) and adolescent fertility (88.3 per 1,000 women ages 15–19 in 2019) not only increase health risks for women but also reduce the amount of time they have to fully participate in education and in economic opportunities. Women (ages 24–44 years) spend about five times more hours weekly than men in unpaid domestic work, affecting the quality of their labor force participation. Women’s disadvantages in access to quality jobs—indicated by disproportionate levels of informality, vulnerable, and self-employment—limited land ownership, and challenges in accessing finance and productive assets further trap them in poverty: only 9.2 percent of women own land (compared to 39.7 percent of men), and 25.21 percent of women have a bank account (according to data from the 2018/2019 Enquête Harmonisée sur les Conditions de Vie des Menages, EHCVM). Different forms of gender-based violence (GBV) are widespread (affecting more than a third of Togolese women), and social, religious, cultural, and geographical factors further amplify gender inequities in specific contexts. As a result, women in Togo, and rural women in particular, have severely limited agency and decision-making capacity both outside and within the household. For instance, only 30 percent of Togolese women can make their own decisions regarding sexual and reproductive health and rights. Additionally, inability to
afford the costs of maternal health care, insufficient coverage of health care facilities, and lack of decision-making power strongly compromise the health of Togolese women, resulting in high rates of maternal mortality (396 deaths per 1,000 living births as of 2017) and high unmet contraception needs. The prevalence data presented in this paper predate the COVID-19 pandemic, and – given the global evidence – it is likely that the crisis will further amplify the existing gender gaps in the country.

Importantly, gender disparities intersect with other social variables, such as location of residence, age, religion, and marriage status. For instance, religion, social norms, and opportunities vary with region. Overall, rural women are largely disadvantaged across all dimensions observed (endowments, economic opportunities, and agency). Polygamous women seem to be more vulnerable along a number of aspects according to key informant interviews. In addition, it is noteworthy that several gender disparities observed occur during adolescence. In addition, those observed gender issues that occur during adolescence have high costs: they bring with them severe negative consequences later in life.

In many dimensions of gender equality, Togo performs better than its regional peers. On average, Togo displays better outcomes in women’s human capital (health and education) than Chad, Côte d’Ivoire, Guinea, and Mali, but worse than Benin, Burkina Faso, and Senegal. Moreover, women in Togo have significantly more decision-making power with respect to reproductive health than women in Benin, Burkina Faso, Guinea, Mali, and Senegal; and the prevalence rates of child marriage in Togo are far below those for Chad, the Central African Republic, and Guinea—yet still very elevated. Likewise, Togo displays one of the lowest levels of acceptance of intimate-partner violence (IPV) when compared to regional peers. In addition, the country has achieved much progress recently with regard to women’s political representation. Currently, the share of seats held by women in the Togolese parliament is substantially higher than in all regional peer countries except Mali and Senegal. At the same time, Togo performs worse than its peers in terms of economic opportunities, access to finance, and property ownership. For example, the share of women
who own a mobile bank account in Togo is lower than in Burkina Faso, Côte d’Ivoire, Mali, and Senegal, but higher than in Benin, Chad, and Guinea. Although such comparisons with regional peers may look favorable for Togo, those peers are among the world’s worst performers in many of the dimensions related to gender equality. The registered gaps in Togo are, therefore, still significant and critical, and continuing efforts are required to increase women’s access to finance, property ownership, and productive assets.

This background paper to the Poverty and Gender Assessment Togo (2022) highlights the importance of addressing gender disparities to achieve continued poverty reduction in Togo. Gender inequality matters in its own right, and it negatively affects economic development and poverty reduction (Aguirre et al. 2012; World Bank 2018). In the past decade, Togo has recorded significant progress in poverty reduction, mainly due to economic growth in the services and agriculture sectors (Christiaensen, Demery, and Kuhl 2011; Ivanic and Martin 2018; Ligon and Sadoulet 2018). Global evidence indicates that addressing specific gender gaps can promote further growth. Togo’s score of 0.43 on the World Bank’s Human Capital Index, a measure of the health and education of children born today, means that the country is only at 43 percent of its potential. Investing in girls’ education and health could boost the score and hence the country’s economic prospects. Also, according to the International Monetary Fund, promoting gender equality is associated with a variety of positive macroeconomic impacts, including higher gross domestic product (Elborgh-Woytek et al. 2013). For instance, Aguirre and others (2012) state that raising the female labor force participation rate to country-specific male levels would raise gross domestic product in the United States by 5 percent, in Japan by 9 percent, in the United Arab Emirates by 12 percent, and in the Arab Republic of Egypt by 34 percent. Other studies show that women’s economic empowerment is associated with an increased variety of goods that countries produce and export (Kazandjian et al. 2016). Moreover, studies show that eliminating the barriers women face in certain sectors and occupations—and increasing women’s participation and labor productivity through better allocation of their skills and talent—could reduce the productivity
gap between male and female workers by up to one-half (Cuberes & Teignier 2011; World Bank 2012). Furthermore, closing gender gaps in agricultural productivity would mean an increase in agricultural output in developing countries of as much as 2.5 to 4.0 percent (World Bank 2012).

**Togo has made several positive legal reforms in recent years, yet systemic challenges to gender equality persist.** Most recently, the country adopted a new Gender Equality Law (Loi N° 2022- 017, 018 and 019) amending several other pieces of legislation and hence, addressing gender discrimination and strengthen women’s rights. The amendments of the penal code through the Gender Equality Law now address domestic violence (Law no. 2022-018, Art. 237 bis) expanding and clarifying the definition of what it entails and defining and strengthening the penalizing measures. Other amendments include revisions to the family code (equalizing rights to divorce and remarry) as well as several non-discrimination measures regarding the labor market. Discrimination in access to credit on the basis of gender is now also prohibited by law. The new Penal Code (2015) strengthens protections against some forms of GBV and discrimination based on gender, ethnicity, religion, and other factors (Isbell and Akinocho 2018). The new Land Code (Law no. 2018-005 of June 14, 2018) contains special provisions on equal access of men and women to land ownership and emphasizes gender equality as a guiding principle for land rights formalization (Kakpo 2018; Korolakina 2016; Lomechrono 2018). Yet a major concern raised by key informants consulted for this report is the gap between de jure and de facto legislation, as a combination of customary law and religious and social norms as well as insufficient knowledge of legislation tends to undermine progress in achieving gender equality.
Closing gender gaps in Togo will bring substantive benefits for economic growth and society overall. On the basis of the findings presented in this paper—particularly the importance of addressing the challenges faced by adolescent girls and rural women—proposed policies to close gender gaps in Togo entail the following:

- Assisting girls in completing primary and secondary school and providing second chance education for girls who have dropped out of school.
- Increasing access to family planning and enhancing sexual and reproductive health education.
- Reducing prevalence rates of child and early marriage.
- Preventing different forms of GBV and addressing their consequences.
- Closing gender gaps in decision-making and political participation.
- Improving women's access to quality employment.
- Enhancing the productivity of self-employed women.
- Supporting female farmers in building and sustaining their businesses—including through support of women's land ownership.
Gender disparities in human capital, agency, and economic opportunities persist in Togo, operating as constraints for inclusive growth and poverty reduction. Although gender equality matters on its own, it also has strong instrumental value for societies and economies. The analytical framework put forward in de Paz and Muller (2021) indicates that gender inequality and poverty are closely related. Opportunities to accumulate human capital, to exercise agency, and to be economically productive represent fundamental nonmonetary dimensions of poverty. Furthermore, gender gaps in endowments (education and health) and limited women’s agency shape differences in economic opportunities (labor market inclusion, access to assets, and entrepreneurship) between men and women, and hence women’s (in)ability to generate an income and to move out of poverty.

Closing gender gaps brings substantive benefits for societies at large and reduces intergenerational poverty transmission. Improved women’s agency and bargaining power are positively associated with better investments in children’s human capital with the potential to reduce the probability of intergenerational poverty transmission (Allendorf 2007; Andrabi, Das, and Khwaja 2011; Dumas and Lambert 2011). Similarly, prevention of different forms of gender-based violence (GBV) and intimate-partner violence (IPV) increases chances of healthy cognitive and physical development of children (Forke et al. 2019). Moreover, improved access to education triggers a sequence of improvements in reproductive health, such as an increase in access to contraception, antenatal care, and healthcare facilities (Kabeer 2005; LeVine & Rowe 2009). The promotion of equal employment opportunities are found to result in macroeconomic gains (Woetzel et al. 2015). Finally, equal involvement of both partners in childcare creates protective and positive effects on social, educational, behavioral, and psychological outcomes of their children (Carlson and Magnuson 2011; Knox et al. 2011; Panter-Brick et al. 2014).
In Togo, significant disparities in poverty incidence exist by gender, region, and age group. According to the EH-CVM 2018/2019, poverty incidence is significantly higher in rural areas (58.7 percent) than in urban areas (34.3 percent). As a result, the distribution of the poor by area of residence is strongly skewed, with rural areas accounting for 76.1 percent of the poor but only 59 percent of the total population. At the regional level, the highest incidence of poverty is recorded in Savanes, which at 65.1 percent is almost 20 percentage points higher than the national average, followed by Kara (56.0 percent) and Maritime (54.1 percent). Gender-based differences in poverty incidence among the adult population are also high. In particular, poverty rates among women ages 20–34 are significantly above those of men in the same age group, and the gap extends to an impressive 13.8 percentage points among persons ages 25–29 (EH-CVM 2018/2019/2019). The gap reappears later in life: women above 55 years of age are consistently poorer than their male counterparts (figure 1). Women are therefore likelier than men to be poor during the core productive and reproductive stages of life.

![Figure 1. The incidence of poverty in Togo, by age group (%)](source: EHCVM 2018/2019.)

The gender gap identified in Togo (13.8 percentage points for 25-to-29-year-olds) is larger than the average found in Sub-Saharan Africa (7.1 percentage points for 20-to-34-year-olds) by Muñoz et al. (2018). According to the analysis, this pattern suggests that care responsibilities for children combined with constraints in economic opportunities may pose major vulnerability factors for women. In addition, the findings by Muñoz et al. (2018) reveal substantial differences in poverty incidence across age groups. Children—those under 15 years—display a much higher poverty incidence than older population subgroups. Interestingly, poverty incidence among children under 5 tends to be similar for males and females. Differences emerge at higher ages, especially among those 15 years or older. When comparing different types of household compositions, only-female-earner households make up the largest share of poor households in Sub-Saharan Africa, and one-adult-female households with children are also overrepresented among the poor (Muñoz et al. 2018).
Similar results are recorded in Togo, which show that households composed of only one female adult with children are the poorest among all household compositions. Individuals from one-adult-female households display a strikingly higher poverty incidence (45.3 percent) compared to their counterparts from households with one adult male (19.7 percent) (figure 2). Notably, 9.7 percent of the poor reside in one-adult-female households, while only 1.8 percent of the poor belong to one-adult-male households (figure 3). Poverty rates are highest among households with two adults (45.5 percent) and multiple adults with children (41.5 percent). Poverty incidence is particularly worrisome among households with one adult female and children, which represent 10 percent of the poor population (in contrast to 1.5 percent of households with one male adult and children) (figure 4). Even with children, the poverty rate of households with one male adult is about 5 percentage points lower than the female equivalent (45.5 percent and 50.9 percent respectively). When distinguishing households by presence of children, it is noteworthy that the one-female-adult households with children, two-adult households with children, and multiple-adult households with children all make up a larger share among the poor relative to their share among the overall population (figure 5). Therefore, gender, household composition, and poverty incidence seem to be fundamentally interconnected.

"Poverty is linked to gender inequality, since in society women are limited in their access to production factors such as land, credit, etc."
The majority of key informants also made an obvious link between poverty and gender inequality. Particularly in rural areas, this link seems to be more obvious to the informants. Here, poverty forces families to prioritize investments selectively. In those cases, girls are at disadvantage when it comes to education, as are women when it comes to investments in health. Although both education and health are crucial investments that enable one to move out of poverty, in patrilineal societies (such as in Togo), investments made in girls and women are less relevant, according to informants, because girls will leave the family to move on to another family later in life.

In addition, key informants highlighted the impact of poverty on women’s ability to live a life free of violence. Economic stress brings out aggressive behavior, which sometimes takes the form of violence (physical, psychological), according to the interviewees. Gender inequality in access to productive assets—land was highlighted most
prominently—to credit, and to economic opportunities more broadly traps women further in poverty, keeping them financially dependent. By contrast, men are in a more promising position to move out of poverty thanks to their enhanced access to those means and opportunities. Women are raised to be dependent (psychologically, economically, socially) on men, further limiting their agency and autonomy to advance in life and society.

This paper provides an overview of the existing gender disparities in endowments, agency, and economic opportunities in Togo and proposes policy options for their elimination. The report is based on quantitative analysis, mostly using data from the EHCVM 2018/2019, the Togo Demographic and Health Survey (DHS) 2013/2014, Multiple Indicator Cluster Surveys (MICS) 2017, and the World Development Indicators (WDI). In addition, a thorough literature review was conducted on gender equality issues in Togo. The report also reflects on government policy priorities as expressed in the sectoral action plans and development strategies. Where appropriate and feasible, the assessment includes benchmarking analysis to position Togo relative to its regional peers, specifically the West African Economic and Monetary Union countries.

Finally, key informant interviews were conducted with approximately 20 stakeholders from government, development partners, nongovernmental organizations, academia around (1) drivers of gender equality in Togo, (2) explanation of quantitative findings, and (3) interconnections between poverty and gender in Togo. Participants were selected given their experience and expertise working on gender issues in Togo from different perspectives and in different sectors. Interviews were transcribed and coded before the analysis. Boxes in gray throughout the text capture citations from those interviews in an anonymous manner. The qualitative data help explain or interpret some of the quantitative data findings. However, it is important to stress the limitations inherent in qualitative research. Findings from those interviews should not be generalized, and they also cannot serve as a basis to identify causalities but rather to explore themes and correlates or deepen possible explanations. When interpreting the results presented in this report, it is important to take into account that the information gathered during this phase was uniquely based on key informant interviews. Key informants do not directly portray the lived experience of women themselves. Moreover, key informants have their own biased views with respect to several of the challenges and issues discussed during interviews, often influenced by their own area of work.
Investments in human endowments including education and health are important in and of their own right, enabling women and girls to function productively and reach their potential in society, yet they are also crucial to enable individuals to take up economic opportunities and to make decisions for themselves. Promoting girls’ education determines their ability to earn higher wages and to own and operate productive businesses later in life (World Bank 2012). Moreover, women’s education increases the well-being of their children, thus alleviating the probability of intergenerational poverty transmission (Kabeer 2005; Klugman et al. 2014). Similarly, improvements in reproductive and maternal health outcomes increase the rate of women’s labor force participation (Albanesi and Olivetti 2016).

According to the Human Capital Index (HCI) report, the HCI in Togo is 0.43, indicating that a Togolese girl born today will be able to reach 43 percent of her potential when she is an adult. Although this score is relatively low, compared to regional peers such as Ghana (0.45), it puts Togo in a slightly better position compared to the sub-Saharan African average, which is estimated at 0.38. According to UNDP, Togo’s Gender Development Index stands at 0.822, which is lower than the world average of 0.943. In Togo, differences in educational outcomes are particularly stark, and the health of Togolese women is seriously compromised by a high risk of maternal mortality, unmet contraception needs, and early pregnancy.

Gender gaps in education

Disproportionally more women than men ages 15+ have no education, yet the extent of the gap varies when comparing different age groups, regions, and income levels. When looking at place of residence, the gender gap in educational attainment is wider among the rural population: 56 percent of women and 30 percent of men have no education in rural areas, compared to 24.3 percent of women and 7.3 percent of men in urban areas. There is also a correlation between wealth quintile and educational attainment: as income levels increase, the share of those with no education goes down (figure 6). Among older age cohorts, the gap between women and
men is significantly larger compared to younger cohorts. The smallest gender gap in this regard is observed among individuals ages 15–19, still with more women (9.3 percent) than men (5.5 percent) having no education (figure 7).

**Figure 6.** Share of Togolese population ages 15+ with no education, by place of residence, region, and wealth quintile (%)

<table>
<thead>
<tr>
<th>Wealth quintile</th>
<th>Region</th>
<th>Residence</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1</td>
<td>Maritime</td>
<td>Urban</td>
<td>40.18</td>
</tr>
<tr>
<td>Q2</td>
<td>Plateaux</td>
<td>Rural</td>
<td>44.84</td>
</tr>
<tr>
<td>Q3</td>
<td>Centrale</td>
<td></td>
<td>53.21</td>
</tr>
<tr>
<td>Q4</td>
<td>Kara</td>
<td></td>
<td>59.09</td>
</tr>
<tr>
<td>Q5</td>
<td>Savanes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


**Figure 7.** Share of Togolese population ages 15+ with no education, by age group, 2018 (%)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-19</td>
<td>9.33</td>
<td>5.52</td>
</tr>
<tr>
<td>20-24</td>
<td>14.99</td>
<td>14.00</td>
</tr>
<tr>
<td>25-29</td>
<td>22.44</td>
<td>20.98</td>
</tr>
<tr>
<td>30-34</td>
<td>44.11</td>
<td>43.55</td>
</tr>
<tr>
<td>35-39</td>
<td>59.09</td>
<td>53.21</td>
</tr>
<tr>
<td>40-44</td>
<td>66.44</td>
<td>59.51</td>
</tr>
<tr>
<td>45-49</td>
<td>73.27</td>
<td>66.44</td>
</tr>
</tbody>
</table>


**Figure 8.** Share of Togolese population ages 15+ who have completed secondary education, by age group, 2018 (%)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-19</td>
<td>44.45</td>
<td>44.52</td>
</tr>
<tr>
<td>20-24</td>
<td>46.11</td>
<td>43.55</td>
</tr>
<tr>
<td>25-29</td>
<td>37.66</td>
<td>36.07</td>
</tr>
<tr>
<td>30-34</td>
<td>30.23</td>
<td>25.28</td>
</tr>
<tr>
<td>35-39</td>
<td>19.04</td>
<td>17.94</td>
</tr>
<tr>
<td>40-44</td>
<td>9.65</td>
<td>9.65</td>
</tr>
</tbody>
</table>

Although girls outnumber boys in primary school, the gender gap in enrollment favors boys in each subsequent educational level, and the chances of girls to complete secondary school are much lower than those of boys—and this is true for all regions and all income levels (figure 8). According to EHCVM (2018), more girls (84.7 percent) than boys (83.9 percent) are enrolled in primary school. However, the trends reverse in secondary education and the gender gap is particularly pronounced at the upper-secondary level (the net enrollment rate stands at 17.6 percent for girls and 20.6 percent for boys). Despite overall positive changes with respect to education enrollment rates, girls are still 6.6 percentage points less likely than boys to complete primary school, and 15.8 percentage points less likely to complete lower-secondary school on average (MICS 2017). The gap in secondary education completion is stark in both rural areas (39.1 percent of men and 19.0 percent of women) and urban areas (56.7 of men and 41.7 percent of women). Among the poorest wealth quintile, the gap is widest at 36.3 percent for men and 14.3 percent for women. Moreover, some regions score particularly low in terms of secondary educational attainment. In Savanes region, only 25.7 percent of girls complete secondary school compared to 38.4 percent of boys (total for the region is 32.3 percent); in the Central region, the shares are 34.0 percent of girls and 47.8 percent of boys; and, in the Plateaux region, they are 35.3 percent of girls and 50.9 percent of boys (according to data from the Ministère des Enseignements Primaire, Secondaire et de la Formation Professionnelle 2018). Girls are also less likely than boys to complete secondary school, likely because of gender social norms, early marriage, and pregnancy.

Recently, lower-secondary school enrollment rates increased for girls and boys. Total enrollment rates increased from 67.3 percent in 2011 to 75.8 percent in 2018, corresponding to an average annual growth rate of 5 percentage points (Republique Togolaise 2020). Importantly, the increase was more pronounced among girls: in 2017 girls constituted 44.8 percent of all enrolled students, up from 38.8 percent in 2011. This positive trend is also reflected in the fact that younger cohorts are significantly more likely than older generations to have secondary education. By age, gender disparities in secondary education completion rates are highest among individuals ages 45–49 (9.7 percent of women versus 36.1 percent of men) and lowest among those ages 15–19 (66.4 percent of women versus 73.3 percent of men) (EHCVM 2018/2019).

The number of out-of-school children is high and particularly concerning among girls. According to UNESCO estimations, 25,663 girls of the relevant age group were out of primary school in 2019, compared to 14,408 of boys. Although the number is very high, huge progress was recorded in the reduction of the number of out-of-school girls in the past years: it fell from 62,871 in 2012 to 25,663 in 2019. At the same time, the majority of children who are out of secondary school are girls. In 2019, 97,601 of girls and 54,275 of boys of relevant age group are out of secondary school, as UNESCO indicates.

Despite stark gender disparities in school enrolment and completion rates, there are no visible differences in the test scores among female and male students. The Education Systems Analysis Program (PASEC) 2015 reveals that in Togo, girls and boys achieve similar early primary language performance and late primary reading performance outcomes. The mathematics performance gap between girls and boys in primary school stands at 8.0 percentage points, favoring boys over girls. However, this value is non-significant.
Reasons for not attending primary or secondary school differ between girls and boys—likely related to social norms and ingrained gender roles. When asked about the reasons for not attending primary school, girls are more likely to report refusal by family, distance to school, lack of financial resources, and “being a girl.” Boys are more likely to report preference for work. Marriage and pregnancy appear as reasons for not attending school at the upper-secondary level (accounting for 4.15 and 3.3 percent of girls, respectively) (EHCVM 2018/2019). In 2016, out of 1,337 cases of pregnancy, only 208 pregnant girls completed the school year (Republique du Togo, n.d.). Lack of female teachers was also identified by key informants as one of the factors preventing girls from continuing their education in Togo and highlighted in a qualitative study by UNICEF (2019) on the factors of girls’ nonenrolment in Togo. Other issues referred to by key informants as reasons for girls’ increased difficulties in attending school, particularly at the secondary level, include (1) girls’ early involvement in unpaid domestic work; (2) lack of supportive structures, at the family or community levels; (3) socio-cultural reasons, such as the acceptance or expectation that girls will marry earlier than boys and have children; and (4) gender-based violence in the school environment.

The COVID-19 pandemic has amplified girls’ vulnerability to drop out of school due to multiple factors. Although there is limited data on the impact of COVID-19 on schooling outcomes in Togo, it is estimated that around 1.6 billion students will be left out of school globally (Azevedo et al. 2020). It is further projected that around 11 million girls will not return to school when the crisis is over, especially in low- and lower-middle income countries. Girls aged 12-17 are at particular risk of dropping out permanently, because of the pandemic (Azevedo et al., 2020). Girls out of school are also vulnerable to child marriage and early pregnancy, making it less likely that they continue pursuing their education ever again (Male & Wodon 2018). These risks are further amplified when girls engage in transactional sex or marry early to cope with the economic shock inflicted by the crisis (Jacobson et al. 2020). Taking into account limited access to digital technologies, preferences in some communities to educate sons when resources are limited and high burden of domestic work and care, it is possible to assume that more Togolese girls will be deprived of education during and in the aftermath of the pandemic.

Gender disparities in health accumulation

The maternal mortality rate in Togo is high, although it decreased in the past decade from 480 deaths per 100,000 live births (2007) to 396 deaths (2017) (figure 9).¹ This rate is higher than in neighboring countries (Burkina Faso, 320; Ghana, 308; Rwanda, 248; and Senegal, 315) but lower than in Côte d’Ivoire (617), the Gambia (597), Guinea (576), Mali (562), Niger (509), and the Sub-Saharan Africa average (534) (WDI). Poverty is stated to be one of the main underlying causes behind negative maternal health outcomes according to key informants: women often cannot afford the direct or indirect costs of accessing services, and often they or their families do not prioritize maternal health services over other competing necessary expenses.

¹ Please note that this section is mostly based on DHS data (2013/2014), the next DHS is planned for 2023.
Other contributing factors include inadequate quality of health care and lack of health care facilities. This is particularly true for rural women: 40.9 percent (compared to 16.1 percent of urban women ages 14–49) mention that the distance to the nearest health facility is the main reason why they do not use maternal health care (DHS 2013/2014). Some evidence suggests that the reduction in the number of maternal and reproductive health services during the COVID-19 pandemic led to the increase in maternal deaths. This was, for example, the case in the region of Kara, where the maternal mortality rate increased from 129.4 to 174.8 deaths per 100,000 live births between 2019 and 2020. The main causes of maternal deaths in Kara were severe bleeding, infections, pre-eclampsia and eclampsia, and complications from delivery. Unsafe abortion\(^2\) alone resulted in 9.8 percent of total maternal deaths in 2020 (Ajavon et al. 2022). Finally, high maternal mortality rates can be also partially attributed to high adolescent fertility. The WHO estimates that complications during pregnancy and childbirth are the leading cause of death of girls ages 15-19 globally (WHO 2020).

![Figure 9: Maternal mortality ratio in Togo and regional peers, modeled estimate, 2000–17 (per 100,000 live births)](image)

Source: World Development Indicators.

Although access to skilled birth attendance has increased significantly in the past decades, huge disparities persist by place of residence, wealth quintile, and level of education. In 2017, 69.4 percent of births were attended by skilled health staff—an increase from 45.7 percent in 1985 (figure 10). In this regard, Togo performs better than Chad (24.3 percent in 2015), Guinea (55.3 percent in 2018), and Mali (67.3 percent in 2018), but worse than Benin (78.1 percent in 2018), Burkina Faso (79.8 percent in 2015), Côte d'Ivoire (73.6 percent in 2016), and Senegal (74.5 percent in 2019) (figure 11). At the same time, the rural-urban divide is very large: only 41.3 percent of rural women have access to facility-based delivery, in contrast to 91 percent among their urban counterparts. By income level, women

\(^2\) According to Law no. 2007-005 from January 10, 2007, abortion is allowed in three cases: (1) when “the continuation of the pregnancy endangers the life and health of the pregnant woman;” (2) when the pregnancy is the “consequence of a rape or an incestuous relationship;” or (3) when there is a “strong likelihood that the unborn child will suffer from a particularly serious health condition.”
from the richest wealth quintile are much more likely than those from the poorest one to receive at least four antenatal visits (78.5 percent versus 47.2 percent). Similarly, in 2013, 96.91 percent of women from the wealthiest quintile and 43.13 percent of women from the poorest one had a facility-based delivery (DHS 2013/2014). Women with secondary or higher education are more likely to have a facility-based delivery (93.6 percent), compared to women with only primary education (79.1 percent) and no education (55.0 percent) (DHS 2013/2014). Access to maternal health care services is strongly constrained by low coverage rates for essential preventive and curative care. Key informants pointed to poverty as one of the main underlying causes behind negative maternal health outcomes. Also, in some cases, social norms require that a woman seek her husband’s permission to go to hospital.

“But being in poverty can influence the quality of care that is given to women, it can direct the choice of which institution to visit, for example, those who are well off access more quickly private institutions where sometimes the care is much better compared to some public institutions.”

In Togo, the total fertility rate is still high—at 4.26 births per woman in 2019—but has fallen from one of the highest levels among peer neighboring countries to the lowest. Wanted fertility dropped earlier in the twentieth century from 5 births per woman but remained stagnant between 1998 and 2014 (4.2 versus 4.1 respectively) (figure 12). A large discrepancy in wanted fertility exists between rural and urban populations (4.9 versus 3.1 children per woman). Such discrepancies (and higher levels of wanted fertility among rural women) are in line with the findings by Lerch (2019), which indicate this pattern in all developing regions, using individual-level data on
the number of children ever born (that is, parity) and birth histories of women ages 30–49, drawn from 278 World Fertility Surveys (WFS), DHS, MICS, and Integrated Public Use Samples from 60 developing countries. The desire to have fewer children can be more effectively implemented in urban areas because of the expansion of postsecondary education, enhanced delivery of modern methods of family planning, and higher dependence on the monetization of society (including financial and opportunity costs of childbearing and upbringing), according to Lerch (2019). Moreover, cultural differences also matter for the diffusion of the small family ideal. Cultural change happens faster in urban environments because of more intense social interactions when compared to dispersed rural population (Caldwell 2006 Lerch 2019). Furthermore, according to the 2013/2014 DHS, wanted fertility decreases significantly with increased education, varying from 5.3 children wanted (no education) to 2.2 (higher education). Importantly, the gap between wanted and actual fertility rates has decreased significantly between 1988 and 2014 from 1.5 children to 0.5 children on average. It is further notable that the gap between wanted and actual fertility decreases with level of education: women with no education have a gap of 0.8 children, compared to merely 0.4 children among women with higher education (figure 13).

**Figure 12.** Wanted fertility rate, actual fertility rate, and gap over time in Togo, 1988, 1998, and 2014 (births per woman)

<table>
<thead>
<tr>
<th>Year</th>
<th>Wanted Fertility Rate</th>
<th>Fertility Rate</th>
<th>Gap: Actual minus Wanted</th>
</tr>
</thead>
<tbody>
<tr>
<td>1988</td>
<td>1</td>
<td>1.6</td>
<td>0.6</td>
</tr>
<tr>
<td>1998</td>
<td>1.6</td>
<td>2.0</td>
<td>0.4</td>
</tr>
<tr>
<td>2014</td>
<td>2.0</td>
<td>2.5</td>
<td>0.5</td>
</tr>
</tbody>
</table>

**Source:** DHS 2013/2014.

**Figure 13.** Wanted fertility rate, actual fertility rate, and gap over time in Togo, by level of education (births per woman)

<table>
<thead>
<tr>
<th>Education Level</th>
<th>1988</th>
<th>1998</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>4.0</td>
<td>4.6</td>
<td>5.0</td>
</tr>
<tr>
<td>No education</td>
<td>5.0</td>
<td>5.4</td>
<td>5.7</td>
</tr>
<tr>
<td>Primary</td>
<td>4.4</td>
<td>4.8</td>
<td>5.0</td>
</tr>
<tr>
<td>Secondary</td>
<td>4.0</td>
<td>4.2</td>
<td>4.4</td>
</tr>
<tr>
<td>Higher</td>
<td>3.8</td>
<td>4.0</td>
<td>4.2</td>
</tr>
</tbody>
</table>

**Source:** DHS 2013/2014.

**Contraceptive use is very low, yet it increased significantly over the past two decades, doubling from roughly 13.9 percent in 1998 to 24.0 percent in 2013/14.** At the same time, the use of modern contraception methods increased even more—from as little as 7 percent in 1998 to 21.5 in 2017 (figure 14). The use of contraception among married women increases with the level of education attained: only 14.3 percent of women with no education use contraception compared to 22.3 percent of those with primary education, 25.3 percent with secondary education, and 31.2 percent with tertiary education attainment (figure 15). Contraception use is also slightly more common among urban (22 percent) than rural (18.5 percent) married women. According to key informants, access to contraception is constrained by financial, cultural, and geographic factors, including supply-side problems causing
inconsistent availability of contraceptives. Key informants also referred to men’s exercise of control over contraceptive choices of their wives, which means that women’s limited agency is one of the reasons for nonuse.

**Figure 14.** Contraceptive prevalence and unmet need for contraception in Togo, 1988–2017 (%)

<table>
<thead>
<tr>
<th>Year</th>
<th>Total</th>
<th>Higher</th>
<th>Secondary</th>
<th>Primary</th>
<th>No education</th>
</tr>
</thead>
<tbody>
<tr>
<td>1988</td>
<td>50</td>
<td>40</td>
<td>30</td>
<td>20</td>
<td>10</td>
</tr>
<tr>
<td>1998</td>
<td>45</td>
<td>35</td>
<td>30</td>
<td>25</td>
<td>15</td>
</tr>
<tr>
<td>2010</td>
<td>40</td>
<td>30</td>
<td>25</td>
<td>20</td>
<td>15</td>
</tr>
<tr>
<td>2014</td>
<td>35</td>
<td>30</td>
<td>25</td>
<td>20</td>
<td>15</td>
</tr>
<tr>
<td>2017</td>
<td>30</td>
<td>25</td>
<td>20</td>
<td>15</td>
<td>10</td>
</tr>
</tbody>
</table>

- Contraceptive prevalence, any methods (% women ages 15-49)
- Unmet need for contraception (% married women ages 15-49)

**Source:** World Development Indicators.

When it comes to gendered disparities in other health dimensions the World Health Organization (WHO) estimates the risk of premature mortality from non-communicable diseases (NCD) differs only slightly among men and women ages 30-70: it stands at 24 and 23 percent, correspondingly. However, the prevalence of HIV among women ages 15-24 was twice as high as that of men of the same age (1 percent vs. 0.5 percent in 2020, respectively, WDI).

The adolescent fertility rate in Togo dropped significantly from 140.8 births per 1,000 women ages 15–19 in 1980 to 88.3 births in 2019; notably, it has almost stagnated since 2000. These figures are higher than in neighboring countries, like Benin (82.0) and Senegal (68.7), but below those in Burkina Faso (99.8), Chad (154.7), Côte d’Ivoire (114.7), Guinea (131.4), and Mali (164.6) (figure 16).

“Some service providers do not look favorably on pregnant teenagers who come to seek family planning assistance, for example, because the provider does not see the teenager as someone who needs it. But he sees the teen as his child, his own child, according to his own cultural considerations. It can be religious, cultural, and financial.”
Early pregnancy reduces girls’ years of schooling, and teenage mothers are less likely than adult mothers to finish secondary education (and in some cases primary education) (Berthelon and Kruger 2011; Wodon et al. 2017). Furthermore, it is estimated that in the African region each year earlier that a girl marries reduces her probability of literacy by 5.7 percentage points, and her probability of having at least some secondary schooling by 5.6 points (Nguyen and Wodon 2014). Consequently, adolescent fertility is directly linked to limitations with respect to job opportunities and quality employment later in life (WHO 2020). Moreover, adolescent mothers face higher risks than older women of suffering from various health complications due to pregnancy and child labor (WHO 2020). By contrast, delaying early pregnancy and childbearing offers positive flow-on effects to women, securing higher lifetime earnings for women, guaranteeing better health outcomes for their children, and making women less susceptible to IPV (Bergstrom and Özler 2021; Malhotra and Elnakib 2021). According to key informants, in Togo (like other countries) high adolescent fertility rates can be partially explained by poverty. Another driver of adolescent fertility raised prominently was the lack of sexual and reproductive education. Besides the absence of such education from the school curriculum, a particular concern was raised about the taboo of the topic among parents who refuse to discuss sexuality with their children. Key informants also referred to sexual violence as one of the causes of early pregnancy.

“Poverty, poverty. ....Makes it so that when the girl sees her colleagues, for example, dressed up, having an advantage or a watch, they also tend to have the same thing, so they are easier to be taken advantage of by older men who have the means and therefore they can get pregnant.”
The COVID-19 crisis is expected to worsen human capital accumulations in health, particularly for women and girls. Global evidence suggests that overwhelmed health systems, confinement measures, and fear of getting infected make it harder for people to access and use healthcare services (De Paz, Gaddis & Muller 2021). For example, in many countries there was a significant decrease in the number of attended childbirths: a decline by 2 percentage points in DRC (March 2020), 5 percentage points in Liberia (April 2020), and between 5-11 percentage points in Nigeria and Mali (GFF 2020). Globally, this trend can be attributed to the concerns over COVID-19 contagion, governmental advice to stay at home, and limited access to transport and childcare during lockdowns (Goyal et al. 2020; Justman et al. 2020). The challenge is particularly pressing for girls and women, who have unique health needs and face gender-specific challenges in accessing quality health services.
GENDER DISPARITIES AND POVERTY
A Background Paper for the Togo Poverty and Gender Assessment 2022
Women’s agency is decisive for women’s ability to build human capital, access economic opportunities, ensure their children’s welfare, and exercise voice and choice within their families and communities. In Togo, patriarchal value systems and gender social norms constrain women’s agency and limit their capacity to make decisions and to participate in public life. This section discusses GBV, child marriage as an expression of the absence of agency, and women’s decision-making in private and public spheres.

**Gender-based violence**

Tackling GBV matters on its own as a fundamental human right, ensuring that everyone in the society is entitled to a life free of violence and discrimination. GBV has devastating effects on individuals and societies. At the individual level, the experience of GBV has severe impacts on individuals’ health, well-being, and agency (Knight and Hester 2016; Oram, Khalifeh, and Howard 2017). Incidents of physical and sexual GBV increase the risks of miscarriages and mortality (Morland et al. 2008). Women who encounter IPV during pregnancy tend to have fewer antenatal and postnatal care visits, which might be one of the reasons for maternal and infant mortality and lower health status of newborns (Flach et al. 2011). Children of abused women are also more likely to be deprived of essential care, access to education, and adequate socialization compared to children of nonabused women (Flach et al. 2011).

At the societal level, domestic abuse affects the human capital potential of survivors, reducing their labor market participation and engagement in civic activities (Iqbal, Bardwell, and Hammond 2021).

Key informants highlighted that violence has increased with the pandemic because of increased levels of (economic and psychological stress). It is important to remember that the prevalence data presented in this paper predate the COVID-19 pandemic. Although no quantitative data are available for Togo to show hard numbers for an increase, this claim is in line with global evidence on this issue (de Paz, Gaddis, and Muller 2021).
High prevalence and acceptance rates of GBV produce huge economic and social losses and trigger negative outcomes in different dimensions of social life. First, GBV negatively affects women’s participation in education, employment, and civic life, thus hindering progress in poverty reduction. Abused women are more likely than nonabused ones to suffer from isolation, inability to work, loss of income, job instability, and higher expenses for medical care (IWPR 2017; WHO 2017). In Peru, studies estimating the cost of domestic violence find that the economic costs reach $6.7 billion, equivalent to a 3.7 percent loss in gross domestic product resulting from decreased productivity (Díaz and Miranda 2010). Moreover, on average, female survivors of GBV lose between 43 and 47 productive days of work in a year (Varna-Horna 2015). Moreover, children who witness IPV at home are also likely to suffer from a range of negative outcomes. Studies show negative links between exposure to violence and school outcomes (IWPR 2017). Individuals, who witnessed IPV in childhood are likely to become perpetrators or victims of violence as adults (WHO 2017).

IPV is widespread in Togo, with 35.7 percent of women having ever experienced at least one of its forms (physical, emotional, or sexual) (figure 17). Emotional violence is listed as the most common form of IPV, affecting 29.7 percent of Togolese women ages 15–49, followed by physical (20.2 percent) and sexual IPV (7.5 percent). Divorced and separated women are most vulnerable to all forms of IPV, compared to married and single women. Moreover, incidence of IPV is higher in rural than urban areas: 33.4 percent of rural and 24.3 percent of urban women have ever experienced emotional IPV; 21.4 percent and 18.5 percent, respectively, have experienced physical IPV; and 8.1 percent and 6.6 percent, respectively, have experienced sexual IPV (DHS 2013/2014). Incidence of IPV increases with the number of children in the household but decreases with every next level of educational attainment and wealth quintile (DHS 2013/2014).

Figure 17. Sexual, physical, and emotional intimate-partner violence against women ages 15–49 in Togo (%)
Physical violence against women in Togo is widespread, with about one in three women ages 15–49 (29.2 percent) having encountered at least one episode of physical violence during her lifetime. The incidence rate of physical violence against women differs only slightly by place of residence: 28.6 percent in urban areas versus 29.6 in rural ones. By region, the incidents of physical GBV are most common in Centrale (encountered by 45.6 percent of women ages 15–49), followed by Savanes (40.4 percent), Kara (31.0 percent), Maritime (23.9 percent), and Lomé Commune (23.1 percent). There is also a clear association between level of education attained and exposure to physical violence: women with no education (32.7 percent) are more vulnerable than those with primary (30.0 percent) and secondary or higher (25.2 percent). Likewise, women from the poorest wealth quintile are more likely to have experienced physical GBV than those in the highest wealth quintile (37.5 percent versus 26.3 percent). Most cases of physical GBV are perpetrated by a husband or current partner (44.0 percent). At the same time, 11.5 percent of women reported having encountered physical violence from a teacher, and 3.0 percent from an employer or someone in the workplace (DHS 2013/2014).

Notably, there are stark regional differences in the reporting of intimate-partner violence by women ages 15–49. For example, the highest proportion of women ages 15–49 who have ever experienced physical or sexual IPV is recorded in Savanes (32 percent) and Centrale (29 percent), but lowest in Maritime (18 percent), Plateaux (19 percent) and Lomé commune (19 percent) (DHS 2013/2014).

The proportion of women who have experienced sexual violence is highest among divorcees and separated women (19.6 percent), compared to 11.3 percent of women in a union and 6.1 percent of single women. The share of women who have experienced sexual GBV increases with age, from 5.6 percent among those ages 15–19 to 12.9 percent among women ages 30–39 years, although it decreases slightly among women ages 40–49 (11.1 percent). The risk of encountering sexual GBV also tends to increase with the number of children in the household (from 7.7 percent among women with no children to 12.6 percent among those with five or more children). Level of educational attainment is negatively correlated with the experience of sexual GBV. The share of women who have experienced sexual GBV differs only slightly by place of residence and wealth quintile (DHS 2013/2014). In most cases, sexual GBV is perpetrated either by an current (44.0 percent) or former partner (21.2 percent). Concerningly, 9.5 percent of women were sexually abused by a stranger: 1.9 percent by a teacher and 0.7 by an employer.

The acceptance rates of IPV in Togo are also high, with nearly one-third of all women ages 15–49 (28.7 percent) justifying domestic abuse under certain circumstances. The proportion of women who justify IPV in Togo is, however, lower than in neighboring countries, including Benin (31.8 percent), Senegal (39.1 percent), Burkina Faso (43.5 percent), Côte d’Ivoire (47.9 percent), Guinea (67.2 percent), Chad (73.5 percent), and Mali (79.4 percent) (figure 18). The most common reason given as justification for a husband to beat his wife is when she argues with him (19.5 percent of women ages 15–49). Other reasons include when the wife neglects the children (18.9 percent), when she goes out without her husband's permission (17.8 percent), when she burns the food (11.2 percent), and when she refuses to have sex with him (9.6 percent) (figure 18). The acceptance of IPV decreases as wealth quintile and level of educational attainment increase (figure 19).

Somewhat more than one-third of survivors (36.8 percent) have sought help to stop physical or sexual violence, according to the DHS 2013/2014. Although it represents only a limited share of survivors, this share is above similar figures for Benin (34.7 percent), Chad (31.2 percent), Mali (19.4 percent), and Senegal (25.7 percent) (figure 20). To effectively tackle and eradicate GBV, negative social norms need to be addressed and zero tolerance of violence against women should be promoted, as repeatedly emphasized by
key informants. Costs and financial implications were also mentioned as unsurmountable barriers for several survivors preventing them from searching for medical help.

**GBV can be prosecuted under current law, although there is no stand-alone legislation to address violence against women.** Different forms of GBV are punishable through provisions in the Penal Code, the Labor Code (2006), the Reproductive Health Law (2007), the Child Code (2007), the National Strategy to Combat All Forms of Violence Against Women validated in 2008. Recent amendments of the Penal Code through the Gender Equality Law (Law no. 2022-018, Art. 237 bis) now expand and clarify the definition of what is entailed in the definition of domestic violence and strengthen punitive measures. Moreover, female genital mutilation/cutting is illegal and punishable under Law No. 98-016, dated November 17, 1998. One of the recent related reforms is the amendment to the Penal Code adopted in November 2015 that strengthen protections against GBV and discrimination based on gender, ethnicity, religion, and other factors (Isbell and Akinnocho 2018). A noteworthy recent evolvement is the adoption of a new law on protecting learners against sexual violence (LOI No.2022-020 DU 2 DECEMBRE 2022). This law criminalizes school-based GBV (including harassment, unsolicited touching, rape, attempt for sexual favors, sexual intercourse based on consent if with a student younger than 16 years of age, cyber harassment). It also defines prevention procedures, including school staff training and codes of conduct and the inclusion of sexual education in school curricula, as well as victim support measures (‘centres d’écoute’, free medical-legal certificates). While there is no standalone legislation on GBV, the government has recently made significant progress in defining domestic violence, strengthening punitive measures and protecting school children from sexual violence (Loi N° 2022-017, 018 and 019, and Loi N° 2022-020). As a next step, and to meet urgent needs of victims, the it will be important to establish a multisectoral protocol to provide holistic support to GBV survivors, defining the mechanisms and referral pathways for an integrated support system for survivors, defining the rights of survivors and the role of each actor from the first contact (police, health staff, social workers, justice system).

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**Figure 18.** Women who believe a husband is justified in beating his wife, by wealth quintile, in Togo and regional peers (%)

![Figure 18: Women who believe a husband is justified in beating his wife, by wealth quintile, in Togo and regional peers (%)](image)

*Source: DHS*

*Note: The five reasons are: 1) when she argues with him, 2) when she burns the food, 3) when she goes out without telling him, 4) when she neglects the children, 5) when she refuses sex with him.*
Figure 19. Justification of intimate partner violence in Togo, by education level (%)

Figure 20. Proportion of women ages 15–49 who have sought help to stop physical or sexual violence, Togo and regional peers (%)

“Cultural and socio-cultural beliefs that the girl who goes too far, who pushes her studies too far, will eventually not find a husband. And that there is a certain age to get married. And if you go beyond that age because you’re in school, you might not find a husband ....”

Key informants highlighted that violence has increased with the pandemic because of increased levels of (economic and psychological stress). It is important to remember that the prevalence data presented in this paper predate the COVID-19 pandemic. Although no quantitative data are available for Togo to show hard numbers for an increase, this claim is in line with global evidence on this issue (de Paz, Gaddis, and Muller 2021).

Almost one in four young women in Togo was married by age 18. Among women ages 20–24, 6.4 percent first married by age 15 and 24.8 percent married by age 18 (MICS 2017). Togo’s neighboring countries have higher shares of women married as children, yet several countries in the region figure among those at the top of the worldwide ranking: Chad (24 percent of women ages 20–24 marry by age 15 and 61 percent by age 18; MICS 2019), Central African Republic (26 percent and 61 percent; MICS 2018/19), and Guinea (17 percent and 47 percent; DHS 2018) (figure 21).

Overall, the mean age at first marriage is higher for men than for women (25.6 and 21.1 years correspondingly) (EHCVM 2018/2019). The mean age at first marriage is higher in urban areas for both women and men, compared to their rural counterparts (figure 22; figure 23). On average, most urban women marry at ages 20–24 (41.4 percent), followed by those ages 16–19 (25.6 percent) and 25–29 (23.4 percent). The situation is drastically different for urban men, most of whom marry at ages 25–29 (39.5 percent), followed
by those ages 30–34 (21.7 percent), 35+ (11.1 percent), and 16–19 (3.3 percent) (figure 22). In rural areas, the majority of women marry on average at ages 16–19 (42.3 percent), with the share constantly decreasing for each following age group. Rural men, on the contrary, marry mainly at ages 20–24 (40.5 percent) (figure 23). Notably, 2.1 percent of urban and 5.0 percent of rural women marry under age 15. The same value stands at 0.1 percent for urban and 0.6 percent for rural men.

**Figure 21.** Percentage of women ages 20–24 years old who were first married before the ages of 15 and 18, Togo and regional peers

![Graph showing marital age distribution in Togo and regional peers.](image)

*Source: Gender Statistics.*

**Figure 22.** Share of Togo’s urban population, by age of first marriage (%)

![Graph showing marital age distribution in Togo’s urban population.](image)


**Figure 23.** Share of Togo’s rural population, by age of first marriage (%)

![Graph showing marital age distribution in Togo’s rural population.](image)

Poverty is among the main drivers of child marriages globally (Wodon et al. 2017), and it was referred to as key driver in Togo by key informants. According to a qualitative study by Crivello and Mann (2020), 65.2 percent of respondents in Togo believe that poverty is the main reason behind girls’ early marriage (in contrast to 41.7 percent in Mali and 13.9 percent in Niger). Moreover, difficulty finding a decent job was listed as another factor driving early marriage by 39.8 percent of Togolese respondents, in line with the responses from Niger (32.2 percent) (table 1). Notably, school dropout was not mentioned as a driver of early marriage in Togo at all, although it was recognized as the prominent cause in Mali (76.0 percent) and Niger (17.6 percent). Other economic reasons behind early marriage in Togo include the exchange of goods, money, and services (18.8 percent); the desire to reduce the financial burden on families (12 percent); and repayment of debts incurred by the girl’s parents (11.8 percent) (Crivello and Mann 2020). Many impoverished families arrange marriages for their daughters as a coping mechanism in response to poverty and financial insecurity. Financial stress often forces parents to marry their daughters as soon as possible to ease the financial strain. The practice of arranging marriages for girls with strangers is a common practice under the circumstances of poverty (Borgen Project 2020).

Additionally, early marriage in Togo derives from cultural traditions, negative gender roles, and social norms. According to Crivello and Mann (2020), 22.9 percent of respondents in Togo agree with the statement that negative gender norms are the key driver of early marriage, alongside with 23.5 percent of respondents in Niger and 41.7 percent in Mali (table 1). The practice of early marriage is maintained by beliefs anchored in age-old, traditional practices such as the appearance of signs of puberty (body size), according to 64 percent of respondents; breast development (63.8 percent); start of menstruation (59.1 percent); and the importance attached to virginity. In some areas of Togo, there are strong religious taboos concerning female sexuality, and a girl who loses her virginity or becomes pregnant outside of marriage brings bad luck and dishonors her family (Crivello and Mann 2020). In some cases, if the fact of extramarital sexual relations becomes known, girls may be subjected to violence from their parents and community members. Therefore, early marriage is seen as one way to keep women “pure” and prevent cases of extramarital sexual relations. Furthermore, in some religious communities, the marriage of a girl who is a virgin is regarded as sacred and essential for the success of the marriage (Crivello & Mann 2020). Thus, addressing the issue of child marriage in Togo should also focus on the facilitation of a positive behavioral and social norm change.

### Table 1. Drivers of girls’ early marriage in Togo

<table>
<thead>
<tr>
<th>Respondents were asked about the drivers of early marriage, which fell into four main categories</th>
<th>Mali</th>
<th>Niger</th>
<th>Togo</th>
</tr>
</thead>
<tbody>
<tr>
<td>School dropout</td>
<td>76.0</td>
<td>17.6</td>
<td>NA</td>
</tr>
<tr>
<td>Poverty</td>
<td>41.7</td>
<td>13.9</td>
<td>65.2</td>
</tr>
<tr>
<td>Difficulties accessing decent work</td>
<td>NA</td>
<td>32.2</td>
<td>39.8</td>
</tr>
<tr>
<td>Negative gender norms</td>
<td>41.7</td>
<td>23.5</td>
<td>22.9</td>
</tr>
</tbody>
</table>

Source: Crivello and Mann 2020, 133.

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3 Data were collected through eight focus groups and 35 individual interviews in Togo with parents, religious and community leaders, and young people. Data were collected between August and December 2016.
Beyond being rooted in poverty, child marriage reinforces poverty at the transgenerational level (Borgen Project 2020). Child marriage is negatively correlated with girls' school enrollment and attainment, leading to higher risks of school dropout and, consequently, limited employment opportunities for women later in life. Marrying at 15–17 years of age strongly affects girls' completion of secondary education; marrying before the age of 15 can prevent girls from completing primary school (Nguyen and Wodon 2014). Consequently, jobs available for girls and young women married by the age of 18 are often informal and poorly paid, hindering their possibilities of reaching economic and financial stability. Moreover, early marriage and subsequent early pregnancy and childbearing increase the risks of maternal mortality among adolescent girls (Raj and Boehmer 2013) and have negative impacts on their reproductive health (Nour 2006). According to the World Health Organization, pregnancy and childbirth complications are the leading cause of deaths globally among girls ages 15–19 years (WHO 2020). Children born to teenage mothers have increased risks of mortality under the age of five (Raj 2010). It is therefore important to address this issue not only as one of the key gender-differentiated negative symptoms of poverty but also as one of the key factors reproducing poverty for the girl herself and her children. Finally, it is worth mentioning that evidence shows that the risks of early pregnancy, early marriage, and school abandonment are closely interlinked and often overlap. According to an analysis done by Camber Collective and commissioned by UNFPA and the World Bank in the context of the SWEDD project, there are 530,683 girls in Togo between ages 10-19, who are vulnerable to these combined risks.

Decision-making in the private and the public spheres

Women's ability to make and implement decisions is fundamental to ensuring that women can build their human capital, make use of services, and take on economic opportunities. Only 30 percent of Togolese women can make their own decisions regarding sexual and reproductive health and rights. The proportion of Togolese women who report that they can say no to sex is 75 percent, much higher than in some of the neighboring countries: Benin (62 percent), Burkina Faso (62 percent), Guinea (55 percent), Mali (31 percent), Senegal (19 percent) (figure 24). Only 47.2 percent of women participate in decision-making about major household purchases, 42.1 participate in decisions about their own health, and 64.6 percent decide about visits to family, relatives, and friends. Nevertheless, these values are significantly higher than, for instance, Chad, Côte d’Ivoire, Guinea, Mali, and Senegal (of peer countries, only women in Benin have similar levels of decision-making capacity). Key informants referred to poverty and, specifically, women's economic dependence on men as major drivers of women's lack of power within the household. At the same time, they stressed that there are large and significant differences in terms of women's decision-making abilities within and outside the household when comparing rural and urban women, and women from different social groups, including those belonging to different religions.

"Poverty means that sometimes women, even if they are in need, wait for their husbands to give permission before going to the hospital and this has an impact on their health. Because they don’t have the means and can’t make decisions."

“Poverty means that sometimes women, even if they are in need, wait for their husbands to give permission before going to the hospital and this has an impact on their health. Because they don’t have the means and can’t make decisions.”
Women are still underrepresented in politics, although significant progress has been observed in the past decades. The share of seats held by women in the national parliament has increased substantially—from 11.1 percent in 2007 to 18.7 percent in 2020. In these terms, Togo performs better than Benin (7.2 percent), Burkina Faso (6.3 percent), Chad (15.4 percent), and Côte d’Ivoire (11.4 percent), but worse than Mali (27.9 percent) and significantly behind Senegal, where women hold 43 percent of all seats in parliament (WDI 2020) (figure 25).
The increase in Togo is likely to be the outcome of the amendments to the Electoral Law of 2013, requiring that candidate lists include equal numbers of men and women. According to the 2013 Law on Political Party and Electoral Campaign Funding, the funding for political parties is linked to the share of female candidacies: 20 percent of funding is determined by the number of women elected for the party in the previous legislative elections and 10 percent by the number of women elected for the party in the last local elections. With respect to ministerial positions, Togo leads the ranking of peer countries: as of 2020, 30 percent of the 33 ministerial positions are held by women, in contrast to just 10 percent in 2008.
GENDER GAPS IN ECONOMIC OPPORTUNITIES

Addressing gender inequalities in economic opportunities and securing access to quality employment and productive assets are vital for women, their families, and communities as means to escape poverty and boost productivity. Low accumulation of endowments among Togolese girls and women, combined with their limited agency, translates into much poorer labor market outcomes, lower lifetime incomes, and heightened risk to fall into or remain in poverty. In addition to lower rates of participation, the quality of employment available to women is poorer than that available to men. Women’s role as mothers and caregivers and their engagement in unpaid domestic work contribute to monetary and time poverty. Similarly, women face particular challenges in becoming entrepreneurs, including limited access to finance and productive assets.

Women’s labor force participation (LFP)—and its quality—matter for their ability to generate incomes and move out of poverty. In Togo, female LFP increases with income group, and the gender gap in LFP is largest among the poorest income quintiles. According to the 2018 EHCVM, female LFP stands at 53.0 percent, much lower than that for males at 70.8 percent (figure 26). The gender gap in LFP is larger in rural areas than in urban areas (23.8 percentage points versus 10.1 percentage points); the larger gap is driven by large gaps in the share of rural family workers. Indeed, 23.4 percent of rural women (4.5 percent in urban areas) are engaged in unpaid work for another household member. Despite being workers, these women are not included in the labor force, which accounts only for paid work and unemployment. There are also potentially other inconsistencies with measuring female LFP. For example, Idowu & Owoeye (2019) argue that particularly in Sub Saharan Africa, a substantial share of the population – many of whom are women – is primarily involved in food

“Because sometimes, if she’s young and she’s getting married and she’s going to get pregnant and so she’s going to have to quit the job and the company is going to have to pay while she’s on maternity leave, so some private companies are reluctant.”
production mainly for own use. Depending on how exactly the concept of FLP is defined, it could lead to significant data variations in female labor force participation rates in Sub-Saharan Africa. LFP among youth (ages 15–24) is notably higher among women than men (27.7 percent versus 23.7 percent) (WDI 2018). As such, LFP among youth in Togo is in line with the trends in Benin (33.9 percent for women and 31.5 percent for men in 2018) and Guinea (26.8 percent for women and 26.1 percent for men in 2019) (WDI). However, more young men than young women ages 15–24 are engaged in the labor force in Burkina Faso (23.9 of women and 27.7 of men in 2018), Chad (35.5 percent of women and 42.5 percent of men in 2018), Côte d’Ivoire (27.1 of women and 31.4 of men in 2017), Mali (40.2 percent of women and 56.8 of men in 2018), and Senegal (19.2 percent of women and 41.3 of men in 2019) (WDI).

Figure 26. Labor force participation of males and females ages 15+ in Togo, by place of residence, region, and income quintile (%)

![Figure 26](image)


“And then women don’t make as much money and since they are in small industries and then small income generating activities, their income is limited to the daily income that they have […] that’s her first concern when the woman goes into business, her first concern is to be able to feed her family whereas the man may not have the same concern.”

However, it is important to note that gender disparities in LFP can be partially attributed to the difficulties in measuring different types of women’s economic engagement. In general, the evidence indicates that women are more likely than men to be involved in informal or irregular activities for profit, which remain strongly undercounted, particularly in rural domains (Muller and Sousa 2020). Thus, the measure of women’s LFP in Togo might be inaccurate because it fails to consider a broader engagement of women in various economic activities.

In Togo, widowed, separated, or divorced women show higher participation rates (66.7 percent) compared to single women (26.3 percent) and women in monogamous...
Men, on the contrary, show higher participation rates when in monogamous (92.0 percent) or polygamous (88.9 percent) marriage, and lower rates when single (42.0 percent) (figure 27). Having children and the number of children are also associated with differences in LFP rates. For example, for men LFP increases with the number of children: from 51.1 percent among men with no children to 93.6 percent among men with four or more children. For women, LFP increases significantly but reverts slightly when women have more than four children (figure 28). Overall, the gender gap in LFP is larger among those with children: 90 percent for men compared to 60 percent for women. Time use patterns are likely drivers of the increase or decrease.

**Figure 27.** Labor force participation of males and females ages 15+ in Togo, by marital status, 2018 (%)

**Figure 28.** Labor force participation of males and females ages 15+ in Togo, by presence and number of children, 2018 (%)

Overall, women and men have low rates of unemployment: 3.1 percent and 3.2 percent, respectively. The overall gender gap is minimal but is slightly higher in rural (0.8 percentage point) than in urban areas (0.6 percentage point). Unemployment is, however, more common among youth ages 15–24, with more men (9.7 percent) than women (7.4 percent) being unemployed. Women (both adult women and those ages 15–24) are more likely to be unemployed when in the richest quintile—likely because poorer women cannot afford to be unemployed. As expected in low-income countries, high levels of educational attainment are significantly correlated with unemployment risks for both men and women. Less than 1 percent of women with no education are unemployed, compared to 1.8 percent among women with primary education, 4.8 percent with secondary education, and 24.1 percent with postsecondary education (figure 29). Women’s unemployment rate also decreases with the number of children in the household: from 5.7 percent among women with no children to 1.7 percent among women with four or more children. For men, unemployment decreases significantly, but reverts slightly when men have more than two to three children.
**Figure 29.** Unemployment rate of males and females ages 15+ in Togo, by area of residence, region, and income quintile (%)

<table>
<thead>
<tr>
<th>Region</th>
<th>Wealth quintile</th>
<th>Residence</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Togo</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td>Q1</td>
<td>Male</td>
<td>7</td>
</tr>
<tr>
<td>Rural</td>
<td>Q2</td>
<td>Male</td>
<td>6</td>
</tr>
<tr>
<td>Maritime</td>
<td>Q3</td>
<td>Male</td>
<td>5</td>
</tr>
<tr>
<td>Plateaux</td>
<td>Q4</td>
<td>Male</td>
<td>4</td>
</tr>
<tr>
<td>Gnadda</td>
<td>Q5</td>
<td>Male</td>
<td>3</td>
</tr>
<tr>
<td>Lome commune</td>
<td></td>
<td>Male</td>
<td>2</td>
</tr>
<tr>
<td>Savanes</td>
<td></td>
<td>Male</td>
<td>1</td>
</tr>
<tr>
<td>Centrale</td>
<td></td>
<td>Female</td>
<td>0</td>
</tr>
<tr>
<td>Plateaux</td>
<td></td>
<td>Female</td>
<td>0</td>
</tr>
<tr>
<td>Savanes</td>
<td></td>
<td>Female</td>
<td>0</td>
</tr>
<tr>
<td>Lome commune</td>
<td>Q1</td>
<td>Female</td>
<td>0</td>
</tr>
<tr>
<td>Q2</td>
<td>Female</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q3</td>
<td>Female</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q4</td>
<td>Female</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q5</td>
<td>Female</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


There are also significant gender differences in the share of youth not in education, employment, or training (NEET). As of 2017, 31.5 percent of women were NEET, compared to just 18.3 percent of men (WDI). Various dimensions such as gender, age, educational attainment, and migration status affect the risk of becoming NEET. Although there is only limited data on contributing factors for becoming NEET in Togo, the global evidence supports the fact that women are more likely than men to be out of education, employment, or training (OECD 2021). Several reasons account for inactivity among women, including pregnancy, childcare responsibilities, and high burden of unpaid domestic work. For men, on the contrary, the most common reason to be NEET is health-related issues (OECD 2016). Globally, although women are more likely to be NEET, the reasons for being so are not the same as for men: in almost all OECD and partner countries, most NEET women are inactive while most NEET men are unemployed (OECD 2021). Being NEET can be a temporary condition for some young people, whereby it can also demotivate them from further job or training opportunity search, making it more difficult to alleviate poverty.

**Some employment sectors in Togo are dominated by men.** For example, men constitute the majority of employees in the sectors of transportation and communication (99.1 percent) and construction (97.0 percent). Likewise, most employees in the sectors of education and health and livestock and fishing are male (72.9 percent and 72.4 percent, respectively). Women constitute the majority of workers in the fields of mining and manufacturing4 (67.8 percent) and commerce (74.9 percent). Women make up about half of the workers in agriculture (50.4 percent) (figure 30).

**Although most women are engaged in the labor force, the quality of jobs they undertake remains poor.** For example, according to the 2018 EHCVM, 40 percent of employed women are contributing family workers (also known

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4 This includes activities such as street foods and so on.
as unpaid family workers), compared to 24.4 percent of male workers. Men are more likely than women to be skilled or unskilled workers. Of total female employment, 87.5 percent can be categorized as vulnerable (that is, contributing family workers and own-account workers as a percentage of total employment), whereas the share of vulnerable employment among men has always been lower and stood at 62.1 percent in 2019 (figure 31). Moreover, 94.3 percent of female employees are engaged in informal activities (that is, economic activities that have market value but are not formally registered), compared to 73.9 percent for men. Women and girls are often exploited in domestic work and have limited options outside the informal economy. Informal work poses challenges for women’s economic and financial autonomy, because it is associated with lower wages and lack of social security. Regional evidence also indicates that informal employment increases the risks of encountering sexual harassment and other forms of GBV at the workplace (Groggel, Sow, and Gnimagou 2020). Informal employment can further amplify women’s vulnerability to poverty and reduce their resilience to shocks and crises, like the COVID-19 pandemic (Webb, McQuaid, and Rand 2020).

**Women are likelier to work in self-employment, and the share of self-employed women has remained almost constant over the past decades.** For men, this share dropped significantly after 2006 (from 84.5 percent in 1994 to 64.2 percent in 2019), and women are now likelier than men to be self-employed (60 percent of women versus 58 percent of men). Self-employment entails multiple subcategories: self-employed workers with employees (employers), self-employed workers without employees (own-account workers), members of producer cooperatives, and contributing family workers (also known as unpaid family workers). Interestingly the gender gap in self-employment differs when comparing urban and rural populations: in urban areas 67 percent of female workers and 43 percent of male workers are self-employed whereas in rural areas the trend reverses, with 70.4 percent of men and 54.9 percent of women workers being self-employed.

**Figure 30.** Gender balance in Togo, by employment sector (%)

**Figure 31.** Vulnerable employment in Togo, by sex, 1991–2019 (% of total employment)

Source: Gender Statistics.
COVID-19 has had a large and negative effect on women's economic opportunities in Togo, according to key informants. Although no quantitative data exist to support this claim for Togo, it is in line with the global evidence on the effects of COVID-19 on gender equality in economic opportunities (de Paz, Gaddis, and Muller 2021). Women's low-quality participation in the labor market (through high levels of informality, vulnerability, and self-employment, as discussed previously)—as well as their overrepresentation as market vendors, service providers, and staff in sectors most affected by containment measures—explains their disproportionate vulnerability to the pandemic’s consequences.

**Access to finance and assets**

Besides time use, social norms, and human capital constraints, further constraints to women's ability to be economically active include their limited access to finance, bank accounts, and assets. Women in Togo are about half as likely as men to have access to mobile banking (11.7 percent versus 21.13 percent) (EHCVM 2018/2019). The gender gap is even larger in rural areas, driven by the particularly low access among women there (6.7 percent for women compared to 16.9 percent for men) (EHCVM 2018/2019). In fact, one female adult only households are more disadvantaged across all forms of asset ownership compared to two adult or one male adult only households. Access to mobile banking increases with income quintile—but with a persistent gender gap across all income groups (figure 32). In terms of access to a bank account (not necessarily mobile), women are still disadvantaged, but their access is greater (figure 33). About 25.21 percent of women versus 38.3 percent of men have access to a bank account (EHCVM 2018/2019). Overall access is much higher in urban than in rural areas and is proportional to income level.

**Access to mobile money accounts increased tremendously between 2014 and 2017 in Togo (Demirgüç-Kunt et al 2018).** However, that increase was uneven when comparing men and women. From almost no access to mobile money accounts in 2014, now 26.98 percent of men and 15.98 percent of women have a mobile money account. These numbers are lower than in some of Togo’s structural peers (Burkina Faso, Côte d’Ivoire, Mali, and Senegal) but higher than in Benin, Chad, and Guinea (Demirgüç-Kunt et al. 2018). There is also evidence that women-owned enterprises in Togo are more likely to finance their activities using bank loans (5.4 for women vs 3.4 for men), and especially so in urban areas (EHCVM 2018).

“Even in urban areas, you will see that it is women who are in the majority in these markets. But when you have closure of the places of these markets, when there are restrictive measures, women are durably impacted, so their activity. However, it is their meager work that allows them to survive, given that most men, take very little within their home, their household. So the disparity that already exists naturally, socially and economically. So the pandemic has reinforced that further.”
Gender disparities are much more severe in rural areas whereas opportunities in the city are much more obvious to women and girls, according to the informants. One of the key factors limiting women’s ability to take up opportunities. “It’s only in the city that girls are emerging, but in the villages, they really lag behind.”
and achieve the same outcomes as their male peers in rural areas is inequality with respect to land ownership.

“... preventing women’s empowerment is land. The new land title gives access to women, but enforcement has yet to follow.”

**Formalization of land ownership strongly contributes to women’s economic empowerment and has potential to reduce their vulnerability to poverty.** Secured land ownership can alleviate poverty among female-headed households and enable women to sustain their living in the event of widowhood and divorce (Salcedo-La Viña 2020). For instance, formalized land rights increase the likelihood of finding supplementary wage employment, enhance bargaining power with employers, and assist in launching rural nonfarm enterprises (Agarwal 2003). With secure land tenure, women farmers can also use their land as collateral to access credit or as mortgageable or saleable assets in the events of crisis. Women with the land certificate may also obtain additional income from lending their land plots (Akpalu and Bezabih 2015; Holden, Deininger, and Ghebru 2011). In addition, securing land rights allows women to access extension and agricultural support programs, which are commonly not available for unauthorized land users (OHCHR 2017). Access to and use of such programs influence women farmer's income and savings.

Moreover, women's land ownership is associated with positive outcomes in endowments and agency, including improved maternal and reproductive health outcomes, enhanced decision-making capacities, strengthened voice within communities, and resistance to GBV. Secured land rights are proven to positively affect women's sexual and reproductive health, mainly through economic empowerment and changes in women's decision-making patterns (Behrman 2017; Muchomba, Wang, and Agosta 2014). Evidence shows that women's land ownership positively affects maternal health outcomes, particularly the use of antenatal care and decisions for planned pregnancy (Nyakato, Rwabukwali, and Kools 2020). Furthermore, global evidence indicates that women's land ownership is positively and significantly correlated with speaking in community meetings and in household decision-making (Goldman, Davis, and Little 2016; Grabe 2015; Selhausen 2016). It increases a woman's power and control within her marriage and reduces her exposure to IPV (Grabe, Grose, and Dutt 2015). According to evidence from India, women's land and property status are significant predictors of long-term physical and psychological violence, regardless of socio-demographic characteristics, like wealth quintile, place of residence, age, marital status, educational level, number of children, and employment (Agarwal and Panda 2007). The study concludes that women who own land are eight times less likely to experience physical and psychological domestic violence, compared to women who do not own land. Furthermore, land ownership positively influences women's ability to commit to and participate in collective action, such as political meetings and village councils (Goldman, Davis, and Little 2016; Grabe 2015; Selhausen 2016).

Women's land rights are also associated with multiple benefits for their families and households, such as improved food security and better investments in children's human capital. Women's secured land rights and actual land ownership positively affect food security and children's nutrition (Allendorf 2007; Meinzen-Dick et al. 2019;
Rehman, Ping, and Razzaq 2019). In addition, women’s land and property rights are associated with lower rates of infant and child mortality (Burroway 2015). A study from Vietnam shows that land-use rights held by women only decreased the incidence of illness among children, increased health insurance coverage for children, raised school enrollment, and reallocated household expenditures toward food and away from alcohol and tobacco (Menon, Ven der Meulen Rodgers, and Nguyen 2014). A positive association between women’s land rights and children’s schooling has been observed in Ethiopia (Kumar and Quisumbing 2015). The overall positive effect of women’s land rights and land ownership on children’s human capital may eventually alleviate intergenerational transmission of poverty by positively affecting the incomes of the next generation.

Finally, women’s land rights provide benefits for society at large by boosting agricultural transformation, amplifying economic growth, and strengthening resilience of rural farm households. In many cases, lack of land certificates poses challenges for farmers to consider short- and long-term agricultural investments, whereas the formalization of land ownership promotes the adoption of technology and natural resource management (Dillon and Voena 2017; Goldstein et al. 2018). Indeed, land tenure security is associated with greater investment in land: for example, in Burkina Faso, households that report owning their land are twice as likely to invest in anti-erosion measures as those who report having the land on loan. Experimental evidence from Benin suggests that land rights formalization increases land investments, with female-headed households in particular boosting their fallowing investments in land (Goldstein et al. 2018). In Zambian communities where widows inherited land, households were more likely to invest through fertilizer use and fallowing (Dillon and Voena 2017). Secure land rights create incentives for long-term investments, such as soil conservation. Such investment results in increased productivity and makes the land and households more resilient to climate change (Salcedo-La Viña 2020). Emerging evidence also suggests that stronger women’s land tenure security can mitigate the shocks of high temperatures on households’ consumption during the agricultural season (Asfaw and Maggio 2017). Overall, such positive effects of women’s formalized land rights and ownership show a potential to contribute to economic growth and reduce poverty.

Rural women are strongly disadvantaged with respect to ownership of (agricultural) land, which poses huge challenges not only to their own advancement in other dimensions of well-being but also to Togo’s economic growth and poverty reduction more broadly. Only 9.2 percent of rural women reported owning at least one parcel of land, compared to 39.7 percent of men. Among the bottom 40 percent of the rural income distribution, that gap is even wider: 8.9 percent of women versus 46.5 percent of men own at least one parcel of land. When looking at the rural population with no education, that gap increases even further: 11.0 percent of women versus 55.3 of men own at least one parcel of land. Of those working in agriculture, only 15.1 percent of women own land, whereas 52.3 percent of men do (figure 34).

“These are the areas in which there would be leverage. Much more on access to land. When women have access to land and when this idea has made into the heads of the people, it’s going to be a big effect on the empowerment of women themselves.”
Of all landowners in Togo (individuals who reported owning one parcel of land), women constitute only 16.9 percent at the country level (in contrast to 83.1 percent of men) (EHCVM 2018/2019). The proportion of women owning land in Togo is higher than in all regional peer countries and the average for the West African Economic and Monetary Union countries, which stands at 11.5 percent (figure 35). Notably, of all the parcels legally owned, only 22 percent are owned by women, in contrast to 78 percent owned by men.

Land ownership and the limitations women face in this regard were mentioned prominently as major problems in Togo in key informant interviews. Unequal land ownership was referred to as one of the main explanatory factors behind the links between gender inequality and poverty in Togo—especially in light of the outstanding overlapping disadvantages facing rural women. Relatedly, several interviewees in the qualitative data mentioned that women cannot access credit in the ways that men can—despite the recent emphasis made in the new Land Code 2018 (see the discussion in the next subsection). One important limitation here, however, is that this Land Code has yet to be translated.
into respective Implementation Decrees. Socially, secured land tenure is constrained by religious and geographical factors, which impede women’s access to productive assets and land. In some areas, it is believed that only men can be the head of the household, which does not align with the Family Code that allows women to be heads of households in equal ways. Transferring land plots to women is perceived to be economically disadvantageous, because women are expected to marry and join the families of their husbands. Apart from traditions and customs, women’s land ownership is challenged by weak law enforcement and high costs of accessing justice. According to the key informants, some Togolese women lack knowledge and finances to claim their legal rights over a land plot. The low level of literacy among adult women in Togo is yet another concern, because it prevents women from formalizing their land rights.

Closing the de jure–de facto legal gap in land ownership was mentioned as a policy priority by several interviewees. Key informants further indicate that formalization of women’s land rights would significantly contribute to women’s economic and social empowerment, resulting in shared prosperity and growth.

“The tradition tends to privilege men more than women, for example, in terms of land. For example, when it comes to access to land, it is said that the land belongs to the man […] because it is said that the woman is called to leave for the marriage.”
Togo has already started implementing specific measures to strengthen women’s land rights and ownership. The recent reform of the Land Code is a remarkable step toward ensuring women’s land rights. Unanimously passed on June 5, 2018, the new Land Code sets the foundation for a more progressive institutional land management framework in Togo. It aims to resolve land conflicts that have been pending in court for decades, tackle land speculation and expropriation, eliminate the possibility of registering land multiple times by different actors, and end the sell-off of rural lands by helping communities to secure customary land rights. The Code also repeatedly emphasizes the principle of gender equality to ensure equal access to land for traditionally marginalized populations such as the rural poor, youth, and indigenous and local community women (Kipalu and Essimi 2021). For example, Article 14 of the Code requires “ensuring that men and women enjoy all human rights on an equal basis, while recognizing the differences between women and men and taking, where necessary, specific measures to accelerate the achievement of equality in practice, the state must ensure that women and girls have equal rights to land, fisheries and forests, regardless of their marital status.”

Nevertheless, some of the challenges that obstruct women’s access to land remain unaddressed. For example, Article 629 of the Code provides that land holders are entitled to legally assert and recognize their ownership rights in case their land plots have been acquired in accordance with customary law. The article further specifies that the principle of gender equality is to be respected in these regards. However, because most land plots under customary law belong to men, women can hardly benefit from this innovation. The Code does not mention any specific implementation channels to guarantee women’s access to the registration of land previously held under customary law. Likewise, the law does not specify which special measures to ensure gender equality will be in place, which might cause misinterpretation of the law provisions.

In addition, conflicts exist between the new law provisions and prevalent traditions and customs in Togo. For example, the Code mentions the possibility of formalization of rights over communal lands, which include forests, pastures, and natural water sources. Although, according to the new law, women and men are expected to have equal access to such land resources, some Togolese traditions and customs claim that the communal lands cannot be shared with women (Land Portal 2020). Therefore, the implementation of the law would require a national awareness-raising effort to facilitate a positive social norm change.

Furthermore, women may be disadvantaged in seeking legal action against violations in land registration procedure. The newly established land registration offices are granted exclusive power and responsibility in land-related procedures (Art. 60). The Code specifies that the refusal to register the land to a woman is punishable with a fine and imprisonment, but this decision can be made only upon a court trial. Access to justice and land registration can be further constrained by the implied costs, overall low educational attainment levels, and limited access to information among the rural population, particularly women.

Unpaid domestic work

Women spend significantly more time than men in unpaid domestic work—16.9 hours for women versus 5.3 hours for men per week (EHCVM 2018/2019). The gender gap is even larger in rural areas (18.9 hours versus 6.2 hours) than in urban (14.2 hours versus 4.0 hours) (figure 36). Gender disparities in this area start early in life: girls ages 7–12 steadily spend more hours on unpaid domestic work than boys (8.1 hours versus 5.7 hours per week) (figure 37). Interestingly, boys across different levels of school enrollment spend almost exactly the same amount of time in domestic unpaid work. By contrast, even when enrolled girls work more hours than boys in unpaid work (9.22 hours versus 6.25 hours), but that amount increases to
15.9 for girls who are not enrolled. The gender gap in time use is largest in the core productive years (24–44) of life: 23.7 hours versus 4.8 hours per week. At this stage, women work the most hours in unpaid work whereas men invest less time than they did in earlier years of life. This disparity is due to traditional gender roles according to which women are expected to take care of the household and children, rather than to participate in income-generating activities. Conversely, men are more likely than women to spend time on work outside the home during that same life period (37.45 hours versus 34.10 hours). Women who marry as adolescents work even fewer hours outside the home compared to those who marry later in life—further limiting their (economic) autonomy. Finally, the disproportional engagement in unpaid domestic work deprives women of leisure time. Global evidence indicates that, on average, women spend fewer hours than men on leisure activities, and the trend prevails in most regions (OECD 2020). This leaves women with a total workload that is massively larger than that of men.

Figure 36. Average hours spent on unpaid domestic work per week in Togo, by area of residence and region 2018

Figure 37. Average hours spent on unpaid domestic work per week in Togo, by age group


Key informants highlight that the discrepancies in time use observed in pre-COVID-19 data have become more severe. Women, traditionally in charge of care and unpaid work, have also been responsible for additional care of the sick and children at home during the pandemic. School closures and overall mobility restrictions have had significant implications for women’s ability to generate incomes during the pandemic. This finding is in line with the review of global evidence by de Paz, Gaddis, and Muller (2021), which shows that the COVID-19 pandemic has increased the burden of domestic work on women, given their traditional assignment of caring for children (at home due to school closures) and the ill. The Rapid Gender Assessments, conducted by the UN Women in selected countries of American and the Caribbean, and Eastern and Southern Africa further confirm that women were more affected than men by increase in the hours spent on the unpaid domestic work and care.
In recent years, the Togolese government has introduced a number of reforms aiming to eliminate gender inequalities and enhance legal protection of women’s rights, yet a number of areas remain in which reforms would help advance gender equality in Togo. Most recently the Gender Equality Law advanced women’s rights in the penal, personal and family, and labor code (Loi N° 2022- 017, 018 and 019, November 2022, see earlier reference on this reform) and relatedly, the Law on protecting learners against sexual violence (Loi N° 2022-020, December 2022) strengthens prevention and protection, especially among younger women and girls. Reforms worth mentioning include the reform to the Personal and Family Code (2012), which provided widows and daughters with the same inheritance rights as men and introduced and established divorce by mutual consent (OECD 2018). According to that Code, women can now be heads of households in the same way as men, which has not only symbolic importance but also tax implications: women can claim to be in charge of their children, implying tax benefits over their income (which was exclusively applicable to fathers before that). The new Penal Code (2015) strengthens protections against some forms of GBV and discrimination based on gender, ethnicity, religion, and other factors (Isbell and Akinocho 2018). Land rights were also reformed (2018), now reconciling traditional and modern law in a statute promoting equality for women and men (Law no. 2018-005 from June 14, 2018). Key informants also referred positively to recent reforms in education, introducing free secondary education, school feedings, and Scolasure (a medical insurance for children in public schools). Efforts to enhance reproductive health include the promotion of free access to C-sections for all women as well as access for prenatal health care for pregnant women (WEZOU program). Novissi (a cash transfer program to mitigate the income disruption of anti-COVID-19 restrictions) was also emphasized as primarily benefiting poor women in the country. With respect to women’s agency, efforts have been put in place to promote women’s representation in politics (such as financial incentives for parties to nominate female candidates). Furthermore, the first one-stop center in Lomé recently opened its doors to survivors of violence against women. Finally, gender budgeting has been introduced in six-line ministries with the expectation of expansion to the entire government budget.
Nevertheless, more can be done to properly address existing gender gaps. More can be done to prevent GBV and protect the victims, also by defining referral pathways and issuing clear multi-sector protocols for survivor care. In general, women’s access to justice remains fragile because of poverty; lack of knowledge of basic legal rules; insufficient number of courts; insufficient gender-sensitive trainings of professionals, lawyers, and prosecutors; and the stigmatization of women who bring cases to court compelling access to justice for women (UNICEF 2019). Finally, enforcement of laws is highly constrained by customary law, religious and social norms, which might undermine the progress in achieving gender equality.

The suggested policies below are based on a review of the regional evidence on what works to close gender gaps in different dimensions. The policies are also in line with the Plan National de Development 2018–22, which acknowledges gender as a cross-cutting theme and a guiding principle.

Importantly, according to both quantitative data and key informant interviews, gender disparities intersect with other social variables, such as location of residence, age, religion, and marriage status. Depending on the region, certain religious beliefs are more practiced. Specific religions impose different rules and customs on their members—often with different implications for men and women. Similarly, specific customs differ when comparing different regions. Overall, rural women are largely disadvantaged across all dimensions observed (endowments, economic opportunities, and agency). For this reason, key informants sent a strong signal to prioritize rural women and their economic opportunities, agency, and human capital in any further policy measures taken to advance gender equality in Togo.

In addition, it is noteworthy that several gender disparities observed occur during adolescence. And those observed gender issues that occur during adolescence have high costs, bringing with them severe negative consequences later in life. Hence, the proposed policy reforms suggest prioritizing adolescent girls as well as rural women.

As seen throughout this assessment, multiple causes of gender inequality overlap and intersect, calling for well-crafted and coordinated multisector, multi-level solutions.

**Focus on adolescent girls**

<table>
<thead>
<tr>
<th>1. Assist girls in completing primary and secondary school</th>
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<tr>
<td>Improve availability and access to education through expanding school-relevant infrastructures</td>
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<tr>
<td>Lift financial constraints to facilitate access to primary and secondary schooling</td>
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<tr>
<td>Establish Safe Spaces for adolescent girls and mobilize communities to change social norms</td>
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<tr>
<td>Address gender-specific barriers (school-based GBV, lack of menstruation hygiene management)</td>
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<tr>
<td>Provide incentives to stay or return to school for girls who have dropped out</td>
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<tr>
<td>2. Increase access to family planning, and enhance reproductive and sexual health</td>
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<tr>
<td>Empower adolescent girls through targeted socio-economic interventions and socio-educative classes</td>
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<tr>
<td>Launch sexual and reproductive health education at school</td>
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<tr>
<td>Increase access to and use of family planning through provision of contraception</td>
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<tr>
<td>Enable girls to continue and complete their schooling</td>
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“Most importantly, at this moment the action needs to be taken on the level of rural areas.”
Focus on the adolescent girls

3. Reduce child and early marriage

| Promote a positive social norm change through community mobilization programs |
| Empower girls and their families economically through alternative livelihood programs |
| Enable girls to continue and complete their schooling ⁵ |

Assist girls in completing primary and secondary school

General interventions to enhance access to schooling deliver gains for girls that are comparable to girl-targeted interventions (Evans and Yuan 2019). Therefore, priority policy actions should focus on the expansion and improvement of schools and related infrastructure, such as water, sanitation, and hygiene facilities. Evidence from the region shows that construction of new schools increases girls enrollment rates (Dumitrescu et al. 2011), and provision of latrines and drinking water containers results in reduced absenteeism among girls (Freeman et al. 2012). Lifting financial constraints to facilitate access to primary and secondary schooling is particularly helpful to encourage girls’ schooling outcomes. The Togolese government has already moved in this direction by making lower-secondary school free for all and upper-secondary school free for girls, as outlined in the objectives of the Action Plan in the Educational Sector 2020–2030 and in the Feuille de Route Gouvernementale Togo 2025. Additionally, conditional cash transfers, school vouchers and scholarships, school subsidies for school managers and families, and school feeding programs have proven to be effective methods to increase girls’ enrollment rates (Koumassa, Olapade, and Wantchekon 2020). Explicitly addressing gender-specific barriers (school-based GBV, lack of menstruation hygiene management products), promoting positive attitudes toward girls’ education, and creating safe spaces for young women have proven successful in several cases in Sub-Saharan Africa (Benshaul-Tolonen et al. 2019; Erulkar and Muthenigi 2009). Finally, providing incentives to stay or return to school for girls who have dropped out is another promising strategy to consider. A financial and material aid for children out of school in Zimbabwe has significantly improved school retention and decreased the drop-out levels among program participants (Hallfors et al. 2015).

Increase access to family planning, and enhance reproductive and sexual health, particularly for adolescent girls

Policies to reduce adolescent fertility should empower young women economically, increase access to sexual and reproductive health education, and provide incentives for girls and their families to continue pursuing education. Growing evidence from the Sub-Saharan African region shows that adolescent empowerment interventions and socio-educative classes at school have a promising effect on the reduction of teenage fertility and early pregnancy (Bandiera et al. 2020; Magnani et al. 2005). Improved knowledge on and access to family planning and contraceptive use through sexual and reproductive health education at school, paired

⁵ The Learners Protection law declares the right of pregnant girls to continue school or –if need be- repeat the year.
with the provision of contraceptive methods and awareness-raising campaigns, has shown positive effects in several evaluated interventions (Ajuwon and Brieger 2007; Dupas 2011). Finally, programs that encourage girls’ education prove to be particularly effective in reducing the levels of adolescent fertility. For example, a cash transfer program in Malawi, with cash given on condition of keeping daughters at school, shows that participating adolescent girls were 12.6 percentage points less likely than nonparticipants to be married (Baird et al. 2014). Similarly, a school subsidy program in Kenya reduced primary school dropouts for girls and delayed the onset of girls’ fertility, with the adolescent pregnancy rate falling from 16 percent to 13 percent within three years (Duflo, Dupas, and Kremer 2015).

**Reduce child and early marriage**

Policies that aim to reduce prevalence rates of child marriage should target the drivers behind it, such as poverty and social norms. Interventions that aim at (1) promoting social norm change around child marriage; (2) empowering girls and their families economically through alternative livelihood programs, adolescent empowerment programs, conditional cash transfers, or other financial incentives; and (3) enabling girls to continue and complete their schooling have proven successful. Educating community members on the harms of early and child marriages and promoting positive social norms shows some promising results in reducing the incidence of child marriage, as for instance in the community-based TOSTAN intervention in Senegal (Diop et al. 2004). Moreover, one of the most promising strategies in reducing rates of child marriage is the encouragement of girls’ education, particularly completion of primary and secondary school. For example, the cash transfer program in Malawi, mentioned previously, has reduced the prevalence of early marriage by 48 percent among participants (Baird et al. 2014). Provision of financial and material aid for families of schoolgirls in Zimbabwe significantly increased girls’ school retention and reduced the likelihood of child marriage by 53 percentage points (Hallfors et al. 2015).

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**Support female farmers to build and sustain their businesses**

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<tr>
<th>1. Enable female farmers to adapt to climate change</th>
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<tr>
<td>Strengthen technical skills of women farmers through trainings and social networking</td>
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<tr>
<td>Provide women farmers with subsidies for inputs</td>
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<td>Enable women’s access to the extension services</td>
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<th>2. Assist in the formalization of land and asset ownership</th>
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<tr>
<td>Enforce the land reform with guaranteeing equal opportunity</td>
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<tr>
<td>Enact gender-specific policies to ensure equal access to land formalization and ownership</td>
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<tr>
<td>Implement gender sensitization and awareness-raising programs to promote positive social norms</td>
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**To enhance female farmers’ agricultural performance, productivity, and earnings, policies should (1) enable female farmers to adapt to climate change, and (2) assist in the formalization of land and asset ownership.** Programs that aim to strengthen technical and life skills of women farmers through trainings, social networking, or extension services demonstrate promising effects on their agricultural productivity and adaptation to climate change, as shown in the Rural Capacity Building Project in Ethiopia (Buehren et al. 2015).

“Access to material resources, especially land, is a priority area that the state must take into account in the implementation of its policies.”
et al. 2019). Furthermore, removing the obstacles that keep women from formally accessing and owning land is another promising strategy for closing gender gaps in agricultural productivity. The enforcement of laws on the equal access to land formalization is an important step toward the protection of women’s land rights. However, to maximize the effect, legal reforms should be accompanied with gender sensitization and awareness-raising programs in order to challenge negative attitudes about gender and land (World Bank 2015). For example, in Ghana title registration for parcels of land was supported by a public outreach campaign and dissemination of information on land registration and land laws. Although the project did not lead to increased agricultural productivity, it appeared to result in a considerable boost in business profits of women farmers (Agyei-Holmes et al. 2020). In Uganda, selected households were offered support with the land registration procedure, along with an educational video on the benefits of women’s land rights. The findings show that showing of the educational video raised the demand for co-titling by 25 percentage points (Cherchi et al. 2019). Furthermore, a large-scale land certification effort in Ethiopia allowed women to add their name and photo to the title and thus claim their land rights over a plot. The program has led to improvements in women’s decision-making in land-related issues such as land management practices and has enhanced their economic and social status (Gedefaw et al. 2020). Moreover, in Rwanda, locally trained surveyors demarcated and mapped land parcels strictly in the presence of landowners and neighbors. The program improved women’s land investment and increased rural households’ welfare by freeing up farm labor for more productive uses (Ali et al. 2015). A similar effect was achieved through the reamendment of legal discriminatory provisions on land ownership rights in Ghana, which led to a considerable boost in women farmers’ business profits (Agyei-Holmes et al. 2020).

Prevent GBV and address its consequences

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<th>Prevent and address the consequences of GBV</th>
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<td>1. Enable institutional service delivery and access to justice for survivors of GBV</td>
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<tr>
<td>Gender-sensitive training of professionals</td>
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<td>Awareness-raising campaigns</td>
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<tr>
<td>Service delivery (shelter, psychological counseling, legal aid, etc.)</td>
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<tr>
<td>2. Reduce women’s vulnerability through economic empowerment</td>
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<tr>
<td>Empower women economically through cash transfers, alternative livelihoods programs, etc.</td>
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<tr>
<td>3. Promote behavior and social norms change on gender-based violence</td>
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<tr>
<td>Mobilize communities to re-think harmful social norms and gender roles</td>
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Enabling institutional service delivery across different sectors as well as access to justice for survivors is key to protecting them. Togo has just recently inaugurated its first one-stop center for victims of GBV—a promising initiative that, if found effective, could be expanded. The establishment of all-women’s justice centers that mostly employ female officers, and where GBV survivors receive assistance in filing a complaint, has increased the rates of reporting of GBV, as shown in the experience of Argentina, Brazil, Ecuador, Ghana, India, Mexico, South Africa, and Uganda (Kavanaugh, Sviatschi, and Trako 2018). In general, it is crucial to pair protective measures and service delivery to survivors with comprehensive prevention efforts, including those targeted at adolescents such as the PREPARE intervention in South Africa (Matthews and Gould 2017). Overall,
Kerr-Wilson et al. (2020) assess the global evidence on what works to prevent GBV and find that interventions effective in reducing violence against women and girls included cash transfers or economic empowerment programs for women combined with group discussions on violence against women and girls and gender-transformative programming, couples’ interventions, parenting programs to prevent domestic violence and child maltreatment, community activism to shift harmful gender norms, and school-based intervention to prevent dating violence. Community mobilization programs that aim at challenging discriminatory gender roles and social norms lead to long-lasting positive impacts on the rates of GBV. For instance, the SASA! intervention in Uganda, which combines community mobilization activities with trainings of professionals, has led to a 64 percent reduction in children witnessing interpersonal violence in their homes and has improved parent-child relationships (Kyegombe et al. 2014). Key informants emphasized the need for a dedicated law on GBV as essential to help prevent GBV and protect victims adequately and effectively.

Policies that aim to empower women’s societal voice and decision-making should (1) eradicate extreme poverty in households with only females, (2) increase women’s societal voice through political and corporate gender quotas, and (3) prevent and address the consequences of GBV as described previously. Programs that aim to improve access to finance for women or to empower them economically tend to be promising in increasing their voice within the household. For instance, a cash transfer offered to ultra-poor households in northwest Nigeria had an immediate positive impact on women’s household consumption, employment, and well-being. Another widely cited intervention is the savings and gender dialogue program in Côte d’Ivoire, which significantly improved women's financial autonomy, gender equitable household decision-making, and gender attitudes among participants (Gupta et al. 2013a). Furthermore, the increase of women’s political representation has broad social positive effects for women's agency. For example, when women were elected to the local governments in India, those governments’ public investment decisions were more in line with female preferences (Chattopadhyay and Duflo 2004). Another study from India shows that areas with reserved political seats for women saw a substantial increase in the number of reports of crimes against women, with a corresponding increase in arrests (Iyer et al. 2010).

Close gender gaps in decision-making and women’s political participation

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<td>1. Eradicate extreme poverty in households with only females</td>
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<tr>
<td>2. Increase women’s societal voice through political and corporate gender quotas</td>
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<tr>
<td>3. Prevent and address the consequences of GBV</td>
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“… we often say that youth, women are vulnerable groups, so we put them together. You can’t put women with youth, it’s an age category, women have constraints that are different from youth, etc. So that’s kind of the problem that we have to address.”
Improve women’s economic opportunities through access to quality employment and enhanced productivity of self-employed women

**Policies that improve women’s economic empowerment and expand their access to quality employment should include supply and demand aspects of women’s participation in the labor market.** Policies should entail (1) creating more jobs in the formal sector for women through targeted job creation programs, (2) lifting women’s time constraints by expanding childcare provision capacity, and (3) facilitating women’s access to employment sectors traditionally dominated by men. Job creation programs offer significant potential for formal employment of young women, as proven by findings from the expanded public works program in South Africa (Omotoso 2020). Moreover, creating an enabling environment for parents of young children to access employment opportunities is another significant step toward expanding women’s labor force participation. Evidence from several countries shows that provision of affordable and appropriate childcare facilitates women’s employment outside the home and their participation in the income-generating activities (Clark et al. 2019). Furthermore, several strategies help to encourage women’s aspirations to undertake jobs in traditionally male-dominated employment sectors, such as mining, construction, and science, technology, engineering, and mathematics occupations. In Nigeria, classroom-based training with an assessment exam and subsequent certification in the field of information and communications technology has increased the share of women employed in this sector, which is generally considered male-dominated (Croke, Goldstein, and Holla 2017). In Kenya, young people were invited to apply to the Technical and Vocational Vouchers Program, receiving vouchers as a financial incentive. Women exposed to this intervention were almost 9 percentage points more likely to express a preference for a male-dominated course, and 5 percentage points more likely to actually enroll in one, in contrast to nonparticipants (Hicks et al. 2013).

To support self-employed women’s entrepreneurship efforts, productivity, and earnings, policies should help self-employed women to formalize their businesses, access formal financial services, and acquire entrepreneurship, managerial, and leadership skills. Business registration and formalization programs offer huge potential for women entrepreneurs to access formal financial services, adopt new business practices, and boost productivity and income. In Malawi, a program combining business registration assistance with a bank information intervention led not only to higher levels of women’s firms’ formalization (83 percent) but also to meaningful increases in the use of financial services (28 percent) and, ultimately,
firm sales and profits (20 percent) (Campos, Goldstein, and McKenzie 2019). Moreover, earnings and productivity of self-employed women can be boosted through combined social and economic empowerment interventions, such as the Empowerment and Livelihood for Adolescents program in Uganda (Bandiera et al. 2020) and Adolescent Girls Initiative in Rwanda (World Bank Group 2015). Finally, improving financial, information technology, and managerial inclusion of women entrepreneurs has large and significant impacts on the likelihood of their being engaged in income-generating self-employment (Brudevold-Newman et al. 2017) and on their adoption of new business practices (Bardasi et al. 2018).

Strategically address the root causes of observed outcomes

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<td>1. Mobilize communities to re-think harmful social norms and gender roles</td>
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<tr>
<td>2. Empower women economically and socially through combined empowerment programs</td>
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<tr>
<td>3. Initiate gender sensitization programs and awareness-raising campaigns</td>
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When asked about the main drivers of observed gender inequalities in Togo, key informants who provided insights to this report explained that, at the root of the observed discrepancies in well-being outcomes, women are not perceived to be of the same value as men and that social norms restrict women’s ability to participate on an equal footing with men in the economy, society, and communities. Consequently, key informants strongly advised not only focusing on addressing specific gender outcomes across the different dimensions of well-being but also strategically aiming at the root cause of the different observed outcomes: social norms limiting women’s access to opportunities, human capital, and ability to make decisions and act on them.

“We talk about formalization, the transition from the informal sector and therefore a policy aimed at the formalization of the informal can only contribute more to reducing inequalities between men and women.”

“We women do not have the same level of consideration as men; this is why there is a gap in the distribution of goods and in the elevation of social rank.”

“And in urban areas, there is a little more freedom, a little more change, it is in rural areas that tradition is slow to change.”

“...but in the villages, since I come from a rural environment, the mentality would like that it is the man who succeeds, it is that for a father of family, in the rural environments, he privileges the education of the boy, they can send him to the school, but the girl he does not encourage her.”
Because social norms are even more traditional and restrictive in rural areas, this offers another reason where interventions should be prioritized in those areas. Hence, sensitization measures should address communities, parents, and women themselves who often internalize norms that limit their own ability to participate more broadly in society.

With respect to more long-term, strategic investments, it will be important to address the social norms that drive most of the observed gender issues in the country – and may differ between Togo’s different regions and/or religions - as discussed throughout this report. Social norms change can be achieved through community-based mobilization initiatives (Bass et al. 2016; Diop et al. 2004; Gupta et al. 2013b), women’s social and economic empowerment programs (Aisingwire et al. 2019; Branson and Byker 2018), and gender sensitization and awareness-raising campaigns (Banerjee, La Ferrara, and Orozco-Olvera 2019; Dupas 2011).

In sum, addressing gender disparities in Togo requires both sustained strategic and near-term opportunistic efforts. In addition to strategically addressing social norms over time, as underlying drivers of inequality in outcomes, the observed discrepancies can be addressed immediately opportunistically, through relevant mainstreaming and targeted measures. As outlined in this section, closing gender gaps requires a set of policies that help girls stay in school, enhance girls’ and women’s reproductive health and access to health care, eliminate child marriage, eliminate violence against girls and women, and empower women economically. Those policies need to be front and center when pursuing inclusive and sustainable development for the country. Gender disparities often intersect across dimensions, manifesting themselves across various spheres and sectors. As such, to develop sustainable responses and effective policies to close gender gaps in Togo, there is a need for cross-sectoral solutions.

“The most important action to be taken now is in rural areas, (...) the woman herself does not consider herself, the rural woman herself does not consider herself. It is necessary to remove this character of non consideration at the level of the woman so that she can express herself clearly. So I believe that this is one of the main elements that must be emphasized to allow women to better develop.”
REFERENCES


