

# Gender-responsive budgeting and breastfeeding

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# Budgets matter for breastfeeding policy and programs

- Through the budget, commitments, plans and policies to protect, promote, support and monitoring breastfeeding are resourced and made real.
- The budget reflects, in financial terms, what is valued (and what is not).
- Assumptions about what are economic or productive activities, paid and unpaid work, that underpin economic policy influences how breastfeeding is talked about in policy debates.
- Governments can be made responsive and accountable for their commitments and plans through their budgets. Women's groups and groups committed to breastfeeding can play an important role in keeping attention on the issue and pressing for changes.

*Gender-responsive budgeting (GRB) has the fundamental goal of promoting **gender equality**.*

# What approach to gender equality?

- Substantive equality: UN Women (2015, 35)

“the concept of substantive equality has been advanced in key human rights treaties to capture this broader understanding: that inequality can be structural and discrimination indirect; that equality has to be understood in relation to outcomes as well as opportunities; and that ‘different treatment’ might be required to achieve equality in practice”

“The specific policy package to achieve substantive equality will differ from context to context. Ultimately, the aim is to create a virtuous cycle through the generation of decent work, gender-responsive social protection and social services, alongside enabling macroeconomic policies that prioritize investment in human beings and the fulfilment of social objectives.”

- Women should be **like men?** Women and men are **equal but different?**

- **We need to avoid old debates about “difference” - risk of essentialising**

- “Separate spheres”: Home and Work?
    - Biological or genetic differences?
    - Breastfeeding as work that can only be done by women?
    - Infant care as work that women choose more than men do?

- Instead: transform work, care for women and men: **“the transformation of the institutions and structures...”**

# Capabilities approach

- ‘the true measure of human development is that a person has the “capabilities” necessary to leading the kind of life they value and have reason to value’; thus, ‘capabilities allow an individual to fully function in society; they are ‘substantive freedoms’ (Sen 1999: 17).
- ‘a good society must arrange to provide care for those in a condition of extreme dependency, *without exploiting women as they have traditionally been exploited, and thus depriving them of other important capabilities.* This huge problem will rightly shape the way states think about all the other capabilities.’ Martha Nussbaum (2009)
- A “capabilities” approach enables us to think about capability of both mother and child in the breastfeeding relationship
  - Focus on the **individual** (who is a mother): It is her individual capabilities that, equally with those of others in society, including the infant, should be developed and respected
  - Examine the individual **lifecycle**: lifecourse (dynamic) wellbeing for each individual over their life
  - Equal distribution of the **cost and burden of care**
  - Specific capabilities for **material wellbeing** of women: time, income, work, health on an equal basis
- What are the most important **capabilities** to emphasise in gender responsive budgeting for breastfeeding and infant nutrition?

# Getting Started

Gender responsive budgeting is a tool to analyse the potential gender impact of economic policies in order to develop policies that will promote equality between women and men.

Women throughout the world still experience structural inequality

## Policies impact differently on women & men

Women are more likely than men to have **responsibility for unpaid work** which reduces their time available for paid work and other things



**Women** on average are more likely to be living in poverty

Women **earn less** than men so don't benefit from cuts to income tax

Women **have lower incomes** over a lifetime therefore can't afford private provisions when public services are cut

Women accumulate **lower levels of wealth** so don't benefit from business tax cuts

Household income rises

**Income may not be shared equally within households**

Women & girls may not benefit as much as men

**Women continue to be under-represented** in public life

**Government policies** don't take women's needs and priorities into account

This leads to **policies that fail to meet the needs of women** or have unintended consequences



Source: Women's Budget Group, UK, <https://womenscount.wbg.org.uk/gender-responsive-budgeting>

# Budgets usually fail to consider unpaid economy

- Unpaid work makes up a large proportion of the total economy. ABS 2014: value of household production was \$416 billion to \$586 billion or between 41.6% to 58.7% of GDP
- Unpaid work supports the paid economy as well as families.
- Unpaid work responds to budget decisions (eg. paid parental leave can affect breastfeeding).

Julie Smith (and an anonymous letter write) recently said: [“women are not babysitters for the economy”](http://www.broadagenda.com.au/home/women-are-not-babysitters-for-the-economy/) (<http://www.broadagenda.com.au/home/women-are-not-babysitters-for-the-economy/>)

- Both men and women work in the unpaid economy, but tend to do different tasks, and women typically do more (Covid 19 is shining some light).

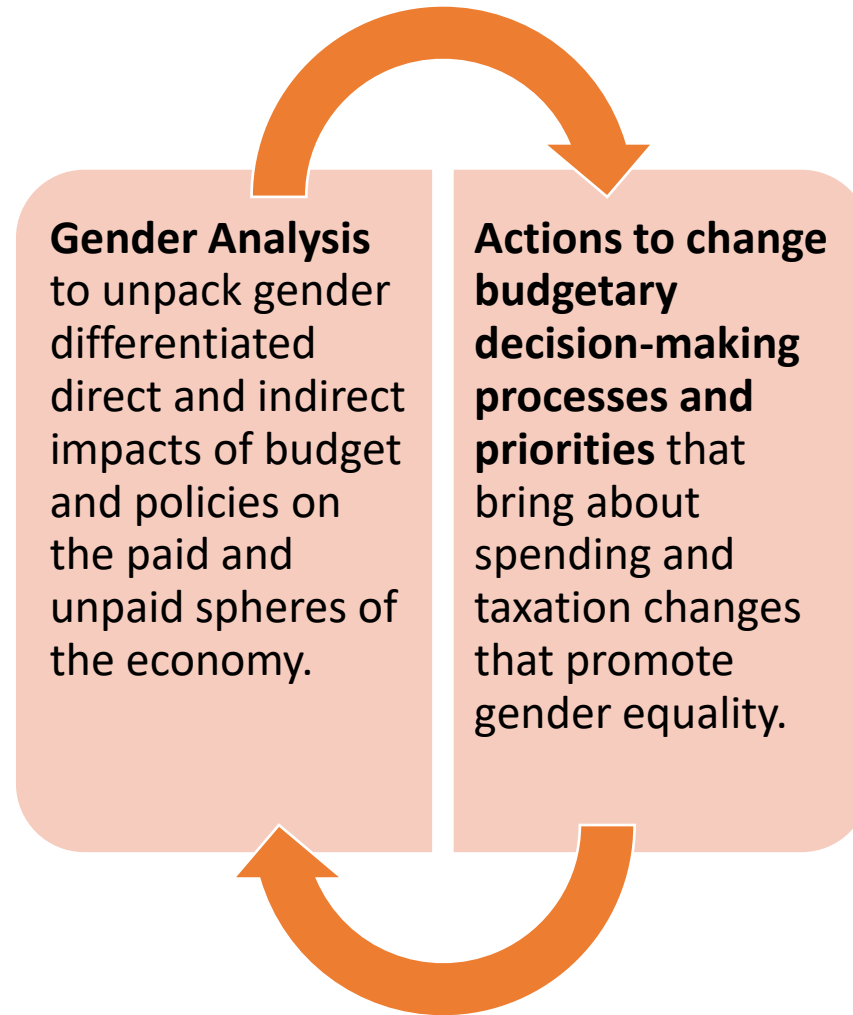
## Total Productive System of an Industrial Society (Three-Layer Cake with Icing)



PLATE 1-5

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# Gender responsive budgeting is a tool that involves:



Source: Sharp (2017) GRB with special reference to the unpaid economy, University of South Australia



# Example: Linking GRB analysis and politics for change

- **South Lombok, Indonesia:** Poverty, limited services and cultural beliefs contributed to maternal mortality rates. Expenditure was at the time focused on salaries, buildings and ambulances. Analysis suggested that resources would be better placed for salaries for midwives, the purchase and maintenance of motorbikes and mobile sterilization materials. Advocacy resulted in an increase in the budget allocation to maternal services, from 2% in to 4.7%, over a period of three to four years.

# Expenditure Categories

## Category 1

**Specifically targeted expenditures by government agencies to women or men, boys or girls**

e.g. women's ministries, women's employment programs, domestic violence counseling for men (typically less than 1 percent of total expenditure)

## Category 2

**Equal employment opportunity expenditure by government agencies on their employees**

e.g. child care for public sector, training for senior women

## Category 3

**General or mainstream expenditures by government agencies that are not gender targeted but often have significant gender impacts**

e.g. water infrastructure, hospitals, public transport, social protection and income transfers

Combined 100 percent of total Expenditure

# Level of Government

In a federal system, revenues, expenditures and authority across different levels of government, hence:

- COAG [National Breastfeeding Strategy](#)
- But this makes budget analysis more complex...

## Federal/national (Commonwealth)

**"Mass" population levers; most tax and transfers; standardised health and education policies; family law; child support; some labour regulation**

## State or Territory

**Direct health, education, safety, household, service delivery; maternal-child; hospitals; midwives; home care; work leave; labour conditions;**

## Council/local

**Local services; family day care; maternal-child visits; babycare groups; street scape; public facilities eg playgrounds, toilets, breastfeeding rooms**

# Budgets have different impacts on men and women

## **direct impacts:**

- Income transfers
- Baby-friendly hospitals
- Maternity leave
- Breastfeeding childcare

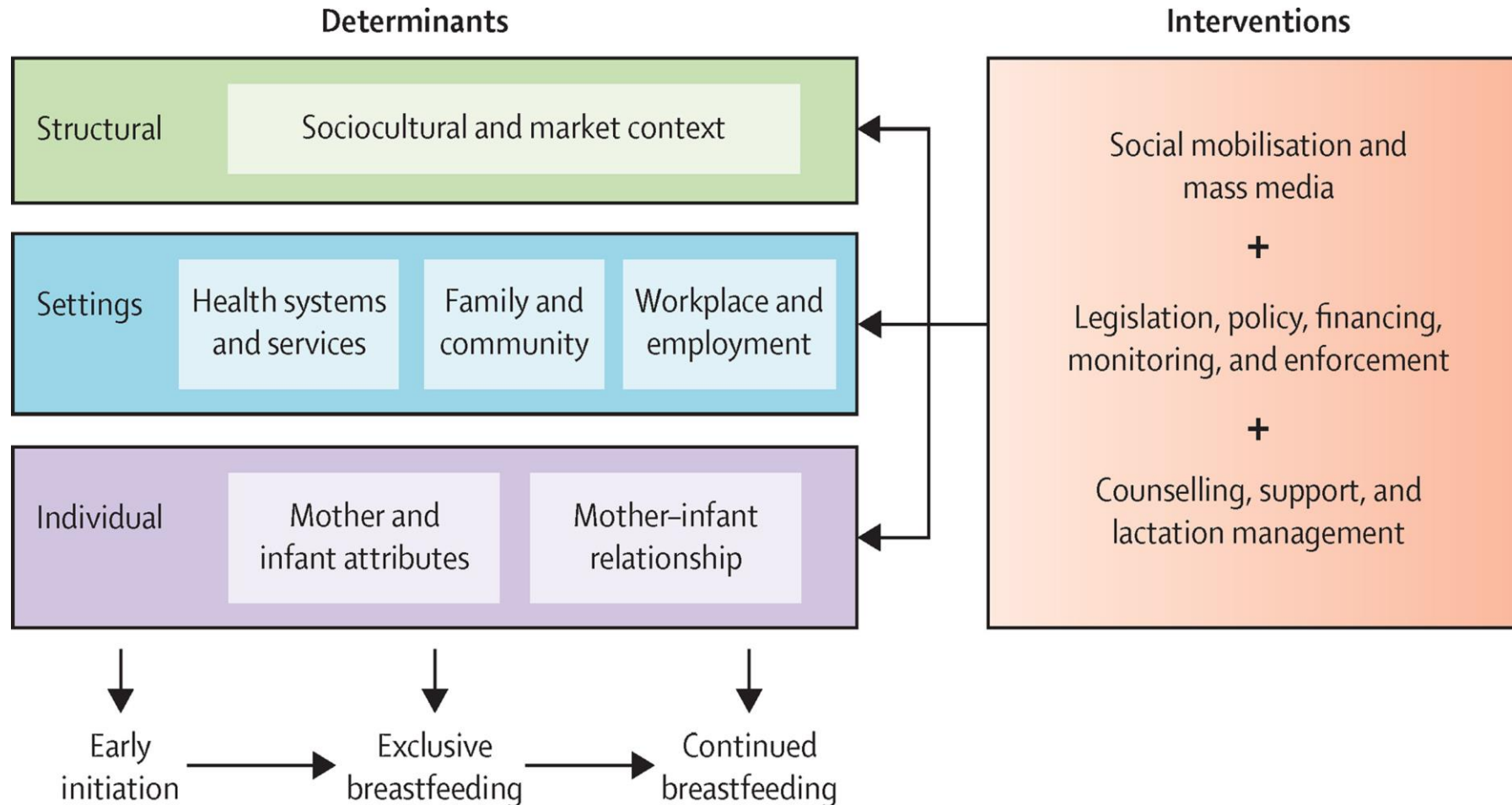
## **indirect effects:**

- Impact on the private sector through contracts to supply the public sector
- Workplace policy regulation
- Expenditure on public space
- Macroeconomic impacts of the budget on aggregate demand in the economy and ... thus on job creation and economic growth.

# What Australian government policies intersect to affect breastfeeding, at what level?

- Direct/targeted policies that affect breastfeeding
  - Identify level of government, and goal /metrics of policy, time period, etc
  - Identify budget allocation (and revenues needed)
  - Ensure budget execution is done properly, tracked, monitored
  - Evaluation and renewal/retargeting
- Indirect/general policies that affect breastfeeding
  - Require mass/systemic change
  - Engaging both market/care economy
  - Engaging federal/mass policy, tax, transfer, work systems

# Link components of enabling environment for breastfeeding, to revenue/expenditure/policy levels of Government?



# GRB in times of crisis: Opportunity for change

- Can you identify gendered dimensions of the COVID19 crisis (economic, social)?
  - Covid 19 is highlighting issues re vulnerability of women working in care industry, added unpaid care work for women, loss of jobs, isolation of the elderly, violence?
- What is the impact of 'emergency' measures on:
  - gender equality, unpaid and care work
  - supporting/undermine breastfeeding?
- How to make resources available to protect and promote breastfeeding (targeting expenditure):
  - Protect obstetric and reproductive health services?
  - Protect breastfeeding among those sick?
  - Ensure that communications and data collection include breastfeeding?
  - Essential workers have breastfeeding protected?

- Thanks!

- Questions?

- EXTRA SLIDES



# Some examples of “mainstream” government policies that indirectly affect breastfeeding

- Income (social security) support, tax
  - Paid parental leave
  - Family and child payments (cash benefits)
  - Childcare policy and flexibility incl. infant care
  - Retirement savings policy/age pensions
- Family law
  - Divorce and child custody; parental location laws
  - Shared parenting laws
- Workplace policies
  - Leave and flexible work
  - Facilities, infrastructure, time at work
  - Leave, rights to return to work, anti-discrimination
- Health and nutrition policies
  - Basic medical care
  - Hygiene
- Commercial, advertising, pricing, consumer protection
  - infant formula and advertising about what “good” mothers do
- Supermarket and trade policies
- “sharing economy”; milk bank regulation

# Brief history of more than 3 decades of GRB

## Australia:

- 1984/85 women budget pilot and publication of the Women's Budget Program (Australia, Federal level)
- 2013 Australian federal government ceases publishing a Women's Budget Statement
- 2014 National Foundation of Australian Women begins analysis of the budget
- Victoria and the ACT governments have initiated GRB initiatives.

## Globally:

- 1987 Women's Budget Group (UK, civil society)
- 1995 *Beijing Platform of Action* calls for GRB and 2000 *UN General Assembly* called upon government to undertake GRB
- Researched and encouraged by UN, OECD (2016 survey) , World Bank and IMF (2016 survey).
- 17 OECD governments undertook GRB and 2 are on the way (2019 OECD).