Socio-Demographic and Economic Survey

Gender

Provinces of Kabul, Bamiyan, Daykundi, Ghor, Kapisa and Parwan
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Acknowledgments

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Credits

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Foreword

Five years ago, the Socio-Demographic and Economic Survey (SDES) began as a major collaborative effort to create a snapshot of the situation of Afghanistan’s population today, down to the level of individual villages. Starting in Bamiyan province in 2011, the survey has completed this detailed mapping for six provinces, with several more in process. Led by the Central Statistics Organization (CSO), with technical support from the United Nations Population Fund, and financial assistance from development partners, it is intended that by 2019 all 34 provinces of Afghanistan will have up-to-date data to influence policymaking and planning. Robust and technically sound data underpins effective and responsive policy, yet such data is largely lacking at sub-national level in Afghanistan. The SDES process fills this critical gap.

The Thematic Report on Gender provides important insights on women in the provinces covered by SDES. These insights will have implications for women’s and girls’ rights, as well as many other critical areas in policy and planning arena.

The Government of the Islamic Republic of Afghanistan is committed to achieving the vision of the National Action Plan for Women in Afghanistan by 2020. Knowing the percentage of unemployed and the number of women and other socio-economic groups participating in political and economic decision-making, for example, directs the work and expenditure of the Government towards that vision as well as international commitments it has made for improving the lives of women and men, including the Convention on the Elimination of All Forms of Discrimination Against Women. The Government recognizes that progress towards gender equality and women’s empowerment will spur national development. Accurate data is fundamental to arrive at policies that reflect actual needs and can work to truly empower women.

With technical assistance from UNFPA and financial assistance from development partners, the Central Statistics Organization conducted the Socio-Demographic and Economic Survey (SDES) to help inform the plans and programming needed to follow through on its commitments for national development. The survey indicators covered marital status, education, labour force participation, fertility and maternal and general mortality and thus provide a basis for useful comparisons. And those comparisons, along with the general analysis of the SDES findings, which are collected in SDES from Kabul, Bamyam, Ghor, Daikundi, Kapisa and Parwan Provinces, reflect new and valuable insights on the progress and gaps towards gender equality in Afghanistan.

The SDES, and the research based on it, emerges from a partnership extending across Afghan society and beyond. We extend our particular thanks to the donors who funded this challenging endeavor, and the provincial governments who, under the leadership of the governors, helped ensure that the SDES could be executed successfully in their areas. Finally, we thank the surveyors in the field and the residents of these six provinces who gave their time to participate in the survey.

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List of Acronyms

ASFR  age-specific fertility rates
GII  Gender Inequality Index
NAPWA  National Action Plan for the Women of Afghanistan
NRVA  National Risk and Vulnerability Analysis
SDES  Socio Demographic and Economic Survey
UNFPA  United Nations Population Fund
WHO  World Health Organization
Executive Summary
The disadvantages that Afghan women experience have attracted attention from myriad institutions and organizations around the world—and reducing them has become a priority agenda of the Government of the Islamic Republic of Afghanistan. The country is a signatory to the Convention on the Elimination of All Forms of Discrimination Against Women and is committed to achieving the vision of the National Action Plan for Women in Afghanistan by 2020. The Afghan Government recognizes that progress towards gender equality and women’s empowerment is a critical requisite for national development.

The objective of this report is to describe variations by gender on socio-economic and demographic indicators and the plausible factors associated with the patterns of inequality in six Afghan provinces. The analysis is based on data from Socio-Demographic and Economic Surveys (SDES) carried out in the provinces of Bamiyan, Daykundi, Ghor, Kabul, Kapisa and Parwan. The six provincial surveys were conducted over a three-year period; the survey was first conducted in Bamiyan in 2011, then in Daykundi and Ghor in 2012 and finally in Kabul, Kapisa and Parwan in 2014.

Drawing on previous thematic reports and empirical literature on gender inequality, this report analyses the gender imbalance in Afghanistan based on:

- the breakdown by sex of the SDES indicators;
- spousal age and education differentials in the household; and
- recent changes in the access to schooling and mean years of schooling among females and males aged 6–25 years.

Using these three groups of analyses enables gender comparisons within the public and private spheres of women’s lives as well as the impact of recent changes in access to education among girls and boys (including female and male adolescents). The empirical results are presented separately for each of the six provinces so that comparisons between them and with the national reality can be made. Additionally, comparisons are made between the national reality and selected countries with similar cultural values to Afghanistan.

Main research findings

GENDER INEQUALITY INDEX

1 The Gender Inequality Index score for 2012 varied from 0.657 in Kapisa to 0.778 in Ghor. Kabul and Afghanistan overall had similar scores, at 0.691 and 0.705, respectively.

MARRIAGE PATTERNS AND SPOUSAL DIFFERENTIALS

1 Young Afghan females are entering marriage at later ages than older cohorts, at least in five of the six Afghan provinces analyzed in this report. With the exception of Ghor, the SDES results suggest that early marriage is not as prevalent as previously reported.

2 Spousal age differentials are reducing among the younger cohorts in the six Afghan provinces. Thus, the younger the cohort, the larger the proportion of reduced age spousal differentials. This finding suggests that wives of younger cohorts may achieve more equality and have greater empowerment than wives from older cohorts.

3 Kabul, Kapisa and Parwan provinces stand out with a high percentage of wives (roughly 20 percent) having far fewer years of schooling than their husbands, with little variation by age.
4 Intergenerational findings suggest that husbands have benefited more from the expansion of the education system in Afghanistan than their wives.

FERTILITY

1 The total fertility rates for the six provinces are high, varying from 6.1 children per woman in Kabul to 8.3 children in Bamiyan.

2 Four of the six provinces have relatively low adolescent fertility when compared with Daykundi and Ghor provinces and the whole country.

EDUCATION

1 The six provinces reflect poor education indicators and important sex differentials regarding the mean years of schooling and literacy rates.

EDUCATION AMONG MALES AND FEMALES AGED 6–25 YEARS

1 The proportions of young women and men with no education substantially decrease among the younger adolescent cohorts.

2 The differences in the proportions of young women and men who have no education substantially decrease among the younger ages.

3 The mean years of education decreases after a certain age, reflecting recent expansion in access to education, so younger cohorts are reaching higher levels of education than older cohorts.

4 The difference in the mean number of schooling years between young women and men greatly decreases at the youngest ages.

LABOUR FORCE PARTICIPATION

1 Sex differentials in labour force participation are remarkable across all age groups; from adolescence until the oldest ages, Afghan men participate substantially more in labour market activities than Afghan women.

2 Even when analysing only well-educated persons, a significantly higher percentage of educated men participate in the labour market than educated women.

3 Men with more years of education (10 or more years of education) have a labour force participation rate of roughly 100 percent at age 30 or older.

MATERNAL MORTALITY

1 With the exception of Kabul and Kapisa, the provincial maternal mortality ratios are substantially higher than the ratio for the whole country. These results are associated with limited access to antenatal care in the provinces of Daykundi and Ghor.

2 Beginning at age 25 and enduring through the last age group (75–79 years, women in Ghor Province have higher mortality rates than men. It is likely that the high maternal mortality in Ghor has an important role in the sex-mortality differences.
POLICY IMPLICATIONS

Government policies and resources have especially targeted girls and have had an impact on female education. The SDES results presented in this report show that in Kabul, for example, female adolescents aged 19 years had, on average, six years of schooling in 2014. It is not only an important achievement to them but also reveals an enormous change in access to education: women aged 25 years had, on average that same year in Kabul, only three years of schooling.

One of the main findings emphasized in this report concerns the postponement of the age at marriage among Afghan women in five of the six provinces analysed. It is a remarkable social and cultural change. Delays in marriage are associated with a longer school attendance for young girls. Those changes also reduce the time exposure to childbearing in a context in which virtually all births occur within marriage. The decline of fertility in places where it has been high usually brings positive consequences to women’s lives. Among others, there is broad agreement that a decline in fertility transforms gender systems and empowers women. For instance, the decline of fertility has been associated with increases in female participation in the labour market and school enrolment as well as with changes in the normative meaning of marriage and family life. Another positive consequence of a fertility decline is the reduction in maternal mortality, which would have an important impact on reducing gender inequality in Afghanistan.

Recent surveys have been inconclusive on the level of fertility in Afghanistan, although there are indications that the fertility rate has been declining. The SDES results demonstrate that fertility is still high in the Afghan provinces (even the findings from Kabul reveal a high fertility rate, about 6.1 children per women). Still, without a conclusive exact level, the rise in the average number of schooling years among female adolescents, the delay of the age at marriage, or the substantial decrease in the proportion of ever-married female adolescents and the use of contraception in the country (even when the prevalence rate is still very low) suggest a significant impact on the fertility level.

Policies and future strategies need to take into account the important socio-cultural and structural transformations that have taken place in some parts of Afghanistan. These changes will further contribute to reducing fertility and gender inequality. It is important to emphasize that empirical research indicates that men and women want to have more information on family planning and increased access to modern female contraceptive methods. Some socio-cultural barriers still tend to limit the use of contraception in Afghanistan, including barriers to acquiring knowledge, lack of trust in doctors and medicines and gender inequalities on reproductive decisions because men are the primary decision makers (Haider and others, 2009). The Afghan Government needs to promote mechanisms that contribute towards overcoming those barriers and other obstacles and guarantee that female and male Afghans can exercise their reproductive choices and preferences.
Introduction
Women endure multiple forms of discrimination in Afghanistan. In a patriarchal environment such as the Afghan society, women's participation in the private and public spheres is greatly influenced by religious beliefs and cultural norms. These values often inhibit female activities outside the home as well as impose domestic burdens on women, including household chores and child care. Although the gender-imbalanced context exposes women to harmful disadvantages, Afghan women and men typically share the same cultural values, including their definition of gender roles (World Bank, 2005).

In addition to the strong influence of Islamic and conservative values on gender roles, the Taliban regime that ruled Afghanistan from 1996 until 2001 denied or limited the majority of women's rights. Some restrictions included the ban on education, minimum participation in economic activities and lack of freedom of movement. Since the overthrow of the Taliban regime, the exercise of women's rights has gradually improved. In parts of the country under government control, major progress has been achieved (UNFPA, 2012).

Nonetheless, the vulnerability of women's basic rights is still observed in different spheres of their lives, confirming the multidimensional nature of gender inequality. Discrimination against women includes but is not limited to reduced access to health care services, a high level of mortality (especially maternal death), high exposure to different types of violence and abuse, diminished access to education and work activities and restricted participation in public and political activity. Many women, particularly those of disadvantaged social groups, are at risk of discrimination on multiple levels, suffering simultaneously several forms of challenges and abuse. Combined, these restrictions interact with each other to reinforce women's vulnerability and strengthen the many systematic disadvantages for women in Afghanistan.

The disadvantages that Afghan women experience have attracted attention from various institutions and organizations around the world. Reducing them has become a priority agenda of the Government of the Islamic Republic of Afghanistan. The country is a signatory to the Convention on the Elimination of All Forms of Discrimination Against Women, and the Government is committed to achieving the vision of the National Action Plan for Women in Afghanistan by 2020. Notably, the Government has recognized that progress towards gender equality and women's empowerment is a critical requisite for national development.

Policies and resources have especially targeted girls. It is important to emphasize that Afghanistan is in the early stages of fertility decline (UNFPA, 2012). It has experienced high fertility levels over the past 40 years, but in 2000, the fertility rate began a downward trend. Consequently, the population is young, reflected in a low median age of 15.6 years (in 2010).¹ And young women (including adolescents) represent the majority of the Afghan female population. Yet, they also face significantly more and qualitatively different challenges than their male peers. A large proportion of them, for instance, has experienced forced sexual relations, early marriage and high adolescent fertility.

After decades of conflict and political disorder that led to heavy destruction, the Afghan education system began rebuilding in 2001. This has included special attention by the Government to provide education to Afghan girls and women. Further investments in the human capital of Afghan young women and adolescents would generate multiple benefits. For example, the degree of gender inequality would reduce because girls would have better opportunities for education and in the labour market. Greater female participation in the labour market with higher productivity through investments in education would generate a 'gender equity dividend' in addition to a probable demographic dividend. These investments would strongly affect the level of fertility and the future population age structure (and population growth) and have a positive impact on the country's development and social stability.

1.1 Gender and women’s empowerment

Afghan women have been exposed to high levels of inequality. In 2013, the Afghanistan Gender Inequality Index (GII)\(^2\) score was 0.705, ranking 149th among 187 countries. In the same year, Slovenia scored the best, at 0.021. Even when compared with countries that share similar cultural values, the Afghan score is still high. In 2013, for example, the Pakistan and the Islamic Republic of Iran GII scores were 0.563 and 0.510, respectively.

The definition of gender roles has crucial importance in Afghan culture, and any attempt to promote changes regarding gender issues requires consent not only within the household but also among the community (World Bank, 2005). This idea corresponds to the concept of gender that “refers to the expectations and norms shared within a society about appropriate male and female behaviour, characteristics, and roles” (Blanc, 2001, p. 190). As observed in Afghanistan, gender inequalities often operate within the context of power imbalances among men and women (Hirschkind and Mahmood, 2002).

The promotion of gender equality and women’s empowerment are expected to make a significant contribution to Afghanistan’s long-term development (UNFPA, 2012). The empowerment of women would provide them with the ability to protect or improve their well-being through a set of multiple interrelated domains; these would include decision-making authority and economic, social, emotional and physical autonomy as well as access to and use of services (Blanc, 2001). Improvements in women’s empowerment would certainly enable them to contribute more productively to Afghan society.

Data and Methodology
The objective of this report is to describe variations by gender on socio-economic and demographic indicators and the plausible factors associated with the patterns of inequality in six Afghan provinces. The analysis is based on data from Socio-Demographic and Economic Surveys (SDES) carried out in the provinces of Bamiyan, Daykundi, Ghor, Kabul, Kapisa and Parwan. The six provincial surveys were conducted over a three-year period: The first survey took place in Bamiyan in 2011, in Daykundi and Ghor in 2012, Kabul 2013, and in Kapisa and Parwan in 2014.

The SDES does not incorporate specific questions on gender issues, however. Thus, the analysis is based on comparisons of the SDES indicators by sex. Given the multidimensional nature of gender inequality, this report incorporates several SDES variables, such as marital status, education, labour force participation, fertility and maternal and general mortality.

Using results from other thematic documents involving SDES data, other empirical evidence and a review of literature on gender inequality, this report provides analyses on the gender imbalances based on: (i) the breakdown by sex of the SDES indicators; (ii) spousal age and education differentials in the household; and (iii) recent changes in access to schooling and mean years of education among females and males aged 6–25 years. Using these three perspectives enabled gender comparisons in the public and private spheres of women’s lives as well as an investigation of recent changes in access to education among girls and boys in Afghanistan.

As noted, the report presents estimates from other thematic reports, such as for fertility and mortality rates and the Gender Inequality Index (GII) score (which the United Nations Development Programme introduced in its 2010 Human Development Report).

Empirical results are presented separately for each of the six provinces so that they can be interpreted in comparison with each other and with the national reality. To make such comparisons, this report also relied upon published findings from: the National Risk and Vulnerability Assessment (NRVA) for 2007/2008 and 2011/2012; the 2010 Afghanistan Mortality Survey; and the Afghanistan Multiple Indicator Cluster Survey for 2003 and 2010/2011. Finally, a few comparisons are made between the SDES findings and the socio-economic and demographic indicators of selected countries that share cultural values with Afghanistan.
Results
3.1 Gender Inequality Index

The GII reflects gender-based disadvantage in three dimensions—reproductive health, empowerment and economic status. It uses the five measures of human development described in the box below. The GII score ranges between 0 and 1, with 0 representing no inequality, and 1 representing 100 percent inequality. The analysis for Afghanistan indicates that women fare very poorly in comparison with men.

### Definition of the five aspects of human development used to calculate the Gender Inequality Index score

<table>
<thead>
<tr>
<th>Measure</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal mortality ratio (MMR)*</td>
<td>Number of deaths during pregnancy, when giving birth or within six weeks of delivery, per 100,000 live births.</td>
</tr>
<tr>
<td>Adolescent fertility rate**</td>
<td>Number of births among females aged 15–19 years, per 1,000 women in that age group.</td>
</tr>
<tr>
<td>Share of seats in the national Parliament</td>
<td>Proportion of seats held by women in the lower (single) Parliament house, expressed as a percentage of total seats.</td>
</tr>
<tr>
<td>Population with at least some secondary education</td>
<td>Percentage of the population aged 25 years or older who has acquired at least 10 years of education.</td>
</tr>
<tr>
<td>Labour force participation rate</td>
<td>Proportion of the working-age population (aged 15 or older) who engages in the labour market, either by working or actively looking for work, expressed as a percentage of the working-age population.</td>
</tr>
</tbody>
</table>

**Note:** * The maternal mortality ratio was calculated using indirect demographic techniques. The Thematic Report on Maternal Mortality presents detailed description on how those techniques were used.

**The** adolescent fertility rate was calculated using indirect demographic techniques. The Thematic Report on Fertility presents detailed description on how those techniques were used.

**Source:** See detail description of these aspects in [http://hdr.undp.org/en/content/gender-inequality-index-gii](http://hdr.undp.org/en/content/gender-inequality-index-gii).

Table 1 presents the GII score for each of the six surveyed provinces, based on the outcomes of the five measures used to calculate the index. The scores, based on SDES data, vary from 0.657 in Kapisa to 0.778 in Ghor. As mentioned previously, the Afghanistan GII score in 2013 was 0.705, which was most similar to the Kabul score (at 0.691).

The highest GII scores are those for Daykundi and Ghor. They are so high that if the scores were compared with an international level, these two provinces would rank as having the most gender inequality in the world. The extraordinarily high GII score found in both Daykundi and Ghor are strongly affected by their respective high maternal mortality ratio and high adolescent fertility rate.

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Additionally, the ratio of fully immunized girls to boys (aged 12–23 months) for Ghor suggests that even very young girls experience a high level of discrimination in this province. According to the 2007/2008 NRVA, while the ratio of immunized girls to boys was 0.50 in Ghor, it was 0.95 in the whole country (World Bank, 2011).

**TABLE 1**

**Gender Inequality Index, by province and the five measures used to calculate the score, 2011–2014**

<table>
<thead>
<tr>
<th>Province</th>
<th>Sex</th>
<th>Maternal mortality rate (per 1,000 live births)</th>
<th>Adolescent fertility rate (per 1,000 females aged 15–19)</th>
<th>Share of seats in Parliament (%)</th>
<th>Secondary education (%)</th>
<th>Labour force participation rate (%)</th>
<th>GII score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kabul</td>
<td>Female</td>
<td>294</td>
<td>0.28</td>
<td>0.13</td>
<td>0.06</td>
<td>0.691</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Male</td>
<td>0.72</td>
<td>0.39</td>
<td>0.69</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bamiyan</td>
<td>Female</td>
<td>937</td>
<td>0.28</td>
<td>0.01</td>
<td>0.25</td>
<td>0.687</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Male</td>
<td>0.72</td>
<td>0.06</td>
<td>0.70</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Daykundi</td>
<td>Female</td>
<td>1,260</td>
<td>0.28</td>
<td>0.01</td>
<td>0.15</td>
<td>0.753</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Male</td>
<td>0.72</td>
<td>0.05</td>
<td>0.68</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ghor</td>
<td>Female</td>
<td>1,882</td>
<td>0.28</td>
<td>0.01</td>
<td>0.23</td>
<td>0.778</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Male</td>
<td>0.72</td>
<td>0.05</td>
<td>0.82</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kapisa</td>
<td>Female</td>
<td>235</td>
<td>0.28</td>
<td>0.04</td>
<td>0.11</td>
<td>0.657</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Male</td>
<td>0.72</td>
<td>0.30</td>
<td>0.56</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parwan</td>
<td>Female</td>
<td>464</td>
<td>0.28</td>
<td>0.03</td>
<td>0.06</td>
<td>0.739</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Male</td>
<td>0.72</td>
<td>0.24</td>
<td>0.57</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


**3.2 Marriage patterns and spousal differentials**

Normative meanings of marriage and family life are based on cultural and social values that are central to the shaping of gender systems (Malhotra, 2012). Women living in a gender-imbalanced context, such as in Afghanistan, are often exposed to social norms that may have harmful consequences in their lives. Examples include the early age at marriage (including child marriage) and childbearing, polygamous unions, high levels of fertility, seclusion within the home from public places and high exposure to domestic violence.

All of these norms have been associated with limited access to education and reduced labour market participation as well as with women's limited decision-making power in the household in Afghanistan. Additionally, certain normative practices and behaviours have been related to the high risk of adverse reproductive outcomes and other health consequences. For instance, married young women have frequently entered motherhood early, which increased their risk of maternal and child mortality (Singh and Samara, 1996).

Marriage is virtually a universal event in Afghanistan. According to the 2011/2012 NRVA, less than 1 percent of the female population aged 35 or older had never married. For the vast majority of women in Afghanistan, marriage takes place early and only once in their lifetime. Regarding the timing
of marriage, the 2007/2008 NRVA results showed that the female mean age at first marriage in Afghanistan nearly a decade ago was 17.9 years, confirming that Afghan women have married at an early age. Yet the findings from the 2010 Afghanistan Mortality Survey and the 2011/2012 NRVA revealed a significant change in the Afghan marriage pattern. The 2011/2012 NRVA survey findings, for example, indicated that the share among younger cohorts (starting at 25–29 years) who were married by a specific age had substantially declined. Data from the SDES confirmed that women are marrying later, at least in five of the six provinces analysed in this report. Table 2 shows the mean age at marriage (calculated using the singulate mean age at marriage, or SMAM, method) by sex for the six provinces. With the exception of Ghor Province, the female mean age at marriage was substantially older than the 17.9 female mean age for the whole country reported in the 2007/2008 NRVA findings.

### TABLE 2

**Singulate mean age at marriage, by sex and province, 2011–2014**

<table>
<thead>
<tr>
<th>Marriage indicator</th>
<th>Province</th>
<th>Kabul</th>
<th>Bamiyan</th>
<th>Daykundi</th>
<th>Ghor</th>
<th>Kapisa</th>
<th>Parwan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td></td>
<td>25.9</td>
<td>25.1</td>
<td>24.4</td>
<td>22.7</td>
<td>25.6</td>
<td>25.2</td>
</tr>
<tr>
<td>Female</td>
<td></td>
<td>22.6</td>
<td>21.2</td>
<td>21.3</td>
<td>18.7</td>
<td>22.6</td>
<td>22.2</td>
</tr>
<tr>
<td>Difference between sexes</td>
<td></td>
<td>3.3</td>
<td>3.8</td>
<td>3.1</td>
<td>4.0</td>
<td>3.0</td>
<td>3.0</td>
</tr>
</tbody>
</table>

**Note:** *=For never married nor engaged and never married but engaged (in years).

**Source:** CSO Afghanistan, SDES (2011–2014).

According to the 2010/2011 Afghanistan Multiple Indicator Cluster Survey, more than 46 percent of Afghan women were married before they were 18, and more than 15 percent before the age of 15 years. Using data from the SDES, Figure 1 reflects the proportion of ever-married women and men by young age group. The proportion of ever-married women in the 20–24 age group was substantially greater than among men. In Bamiyan Province, for instance, 65.4 percent of females aged 20–24 have married at the time of the survey, while this proportion was 29.6 percent among males. With the exception of women living in Ghor Province, the proportions of ever-married women and men aged 15–19 were considerably smaller when compared with the proportions among the 20–24 age group. Overall, the findings presented in Figure 1 suggest that early marriage is not as prevalent in these provinces as previously thought (at least in five of the six provinces).

Regarding polygamous marriages, the 2011/2012 NRVA found that 7.6 percent of ever-married Afghan women (more than 260,000) were living in such a relationship. The results from the six SDES, however, indicate percentages smaller than 7.6 percent in all six provinces. In Bamiyan and Ghor, for instance, 5.2 percent and 5.1 percent, respectively, of married women were in a union with a husband who had more than one wife, while this share was 3.7 percent in Kapisa and 2.3 percent in Kabul. In Daykundi and Parwan, no married women reported living in a polygamous marriage.

### 3.3 Spousal age and education differentials

The results presented in Table 2 and Figure 1 confirm that Afghan women often marry older men. The age differential between spouses tends to intensify gender inequalities within the private sphere and

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5 This table is from the Thematic Report on Nuptiality.
6 The report on nuptiality offers more details on this method.

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is usually associated with a wife’s dependency in Afghanistan (UNFPA, 2012). Previous research has shown, for instance, that the greater the difference in age between an older husband and his wife, the lower will be her participation in household decision-making, including decisions on family planning and the marriage and education of children (Mumtaz and Salway, 2009; Morgan and others, 2002; Mason and Smith, 2000).

This report examines gender inequality between wives and husbands using information on spousal age and education differentials from ever-married women and their husbands. Based on the relationship to the household head, five combinations of couples were singled out: (i) the household head and his wife; (ii) daughter and son-in-law of the household head; (iii) son and daughter-in-law of the household head; (iv) mother and father of the household head; and in case of polygamous households, (v) the household head and his second wife. Around 5 percent of the sample could not be identified because of the type of relationship one or both spouses reported with the household head; for example, some men and women identified as ‘other relative’.

**SPOUSAL AGE DIFFERENTIAL**

To make provincial comparisons of the spousal age differential of all ever-married women (Figure 2), five age-difference intervals were constructed: the wife is older than her husband, the husband is same age or up to three years older; the husband is four to five years older; the husband is six to nine years older; and the husband is 10 or more years older than his wife. Among the six provinces, Bamiyan and Ghor reported the largest proportions of couples in which husbands were 10 or more years older than their wives. On the other end, Parwan, Daykundi and Kapisa reported the larger proportions of couples in which husbands and wives were of the same age or the husband was only slightly older (one to three years).

Figure 3 presents a comparison by province and by age-group of the spousal age differential for ever-married women. Only wives aged 20–24, 30–34, 40–44 and 50–54 years are considered in these analyses, because: First, the majority of women have ever married and are still married by these
RESULTS

FIGURE 2
Percent distribution of spousal age differential, by age-difference intervals and by province, 2011–2014

Note: <0=Wife is older than her husband.


ages in Afghanistan. Second, the analysis becomes clear and easier if a few representative age groups are examined. The findings, portrayed in Figure 3, are similar across the six provinces and clearly show that the largest spousal age differentials (10 years or more) are more frequent among older women (aged 50–54 years). In Kabul, for example, 43.2 percent of ever-married women aged 50–54 years had a husband who was 10 or more years older, while it was true for only 11 percent of ever-married women aged 20–24 years.

Thus, the younger the cohort, the larger is the proportion of smaller age differences. In Parwan Province, for example, 22.3 percent of ever-married women aged 50–54 years had a husband who was the same age or up to three years older. This percentage gradually increased in younger cohorts, to 54.9 percent among ever-married women aged 20–24 years. When comparing across the provinces, Ghor and Daykundi reported the smallest percentages of ever-married young women with little age difference with their husband. Of particular interest is the group of women—albeit small, at 5 percent—who were older than their husband in all provinces, with no important difference according to the women’s ages.

Overall, Figure 3 illustrates a reducing spousal age differential among the younger cohorts in the six provinces. This finding suggests that younger wives may have greater empowerment than wives among the older age cohorts. Because women experience discrimination in different contexts and spheres of their lives, it is important to emphasize that the spousal age differential helps to understand gender inequality in the private context (within the household).
FIGURE 3
Percent distribution of spousal age differentials, by wives’ age group and by province, 2011–2014

FIGURE 4

Percent distribution of spousal education differential, by education-difference intervals and by province, 2011–2014


SPOUSAL EDUCATION DIFFERENTIAL

Figure 4 reflects the differences in educational achievement between husbands and wives in each province, for which five intervals were constructed: the wife has more years of education than her husband; each has the same level of education; the husband has one to six more years of education than his wife; the husband has seven to eleven more years of education than his wife; and the husband has twelve or more years of education. According to the SDES findings, couples typically had the same level of education in each province. For the majority of them, however, both the wife and husband had no education, especially among the older cohorts. In each province as well, a small proportion of women were more educated than their husband.

As in Figure 3, Figure 5 makes a similar comparison of spousal education differences between age groups in each province among ever-married women aged 20–54 years. According to the SDES findings, the younger age cohorts (starting with 20–24 years) revealed a smaller share of wives with the same level of education as their husband in four of the six provinces (Bamiyan, Daykundi, Kapisa and Parwan). This decreasing percentage, from older to younger cohorts, is explained by the larger proportion of younger wives with a lower level of education than their husband. In those four provinces, the proportion of younger women married to a husband who has up to 11 more years of education was larger than among the older age cohorts. These intergenerational differences suggest that husbands have benefited more from the expansion of education in Afghanistan than their wives.

The SDES results in Figure 5 also show that the percentage of couples in which husbands had a much higher level of education than his wife (12 years or more) did not vary across age cohorts in three of the six provinces (Daykundi, Ghor and Kapisa). Finally, the findings from Kabul, Kapisa and Parwan provinces call attention to the high percentage of wives with a much lower level of schooling than their husband (12 years or more), with little variation by age group. Such divergence was reported by approximately 20 percent of the couples in each age group. This result may be associated with the relatively higher total level of education reported in those provinces.
FIGURE 5
Percent distribution of spousal education differential, by wives’ age group and province, 2011–2014

3.4 Fertility

There is broad agreement that in societies with high fertility levels, a decline in fertility transforms gender systems and empowers women. Among other reasons, raising many children almost always means that motherhood will be the only (or the most important) life perspective to girls and women (World Bank, 2005).

Recent surveys have been inconclusive on the level of fertility in Afghanistan (UNFPA, 2012). Nonetheless, there is agreement that the country is in the early stage of a fertility transition: Having had high fertility levels for decades, Afghanistan began showing signs of fertility decline at the start of this century. According to the Population Reference Bureau, the total fertility rate in Afghanistan was 6.8 children per woman in 2005, coming down to 5.7 children in 2010; the most recent data indicate a total fertility rate of 5.1 children per woman in 2013. Such rates demonstrate a rapid declining trend in the country’s fertility level. Other sources have found more conservative declines in the fertility rates, which are often calculated by indirect demographic techniques. For example, indirect estimations from the 2007/2008 NRVA led to a total fertility rate of 6.3 children per woman (UNFPA, 2012). A more recent estimate, based on the 2010 Afghanistan Mortality Survey findings, put the total fertility rate at 5.1 children (APHl/ MOPH, CSO, ICF Macro, IIIMR and WHO/EMRO, 2011).

As shown in Table 3 and based on the SDES findings, the total fertility rate for the six provinces varied from 6.1 children per woman in Kabul to 8.3 children in Bamiyan. The high levels are usually reported in populations that have not begun the fertility transition yet or have just started. In addition, the age-specific fertility rates (ASFR) reflect an age pattern that would be expected in populations in which fertility is not yet declining—the ASFR increases at early ages, when the share of married women starts to expand, then the increase peaks, where most women are already married (25–29 years) and, finally the ASFR falls due to the increase of widowhood and decrease in biological fecundity.

In addition to a high total fertility rate, a high adolescent fertility rate is also a strong indicator of gender inequality, because it is frequently associated with early marriage, limited access to education and limited participation in economic activities as well as poor reproductive health outcomes. Table 3 illustrates that four of the six provinces had a lower adolescent fertility rate, in comparison with Daykundi and Ghor provinces and to the whole country, and a reduced relative contribution of births to the total fertility rate in the adolescent period. The adolescent rates in Daykundi and Ghor were remarkably high, with more than 10 percent of females aged 15–19 years having had a live birth during the 12 months prior to the SDES.

Table 4 displays comparisons of Afghanistan’s adolescent fertility rates with selected countries with similar cultural values. The differences are large: The rate varies from 11.6 in Saudi Arabia to 117.5 in Afghanistan. Additionally, the adolescent fertility rate found in Kabul, Kapisa and Parwan provinces (Table 3) are similar to the rates reported in Egypt, Indonesia and Syria Arab Republic (Table 4).


8 This table also appears in the Thematic Report on Fertility.

9 The total fertility rate was adjusted through the Brass P/F indirect technique. More details are available in the Thematic Report on Fertility.
### TABLE 3

**Total fertility rate, age-specific fertility rates (per thousand), adjustment factor, relative distribution and mean age of fertility, by province, 2011–2014**

<table>
<thead>
<tr>
<th>Fertility measures and age groups</th>
<th>Province</th>
<th>Kabul</th>
<th>Parwan</th>
<th>Kapisa</th>
<th>Ghor</th>
<th>Daykundi*</th>
<th>Bamiyan</th>
<th>Afghanistan (2005–2010)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total fertility rate:</td>
<td></td>
<td>6.1</td>
<td>7.1</td>
<td>7.2</td>
<td>7.3</td>
<td>7.6</td>
<td>8.3</td>
<td>6.3</td>
</tr>
<tr>
<td>15-19</td>
<td></td>
<td>41.5</td>
<td>41.5</td>
<td>42.9</td>
<td>105.4</td>
<td>109.0</td>
<td>58.6</td>
<td>117.5</td>
</tr>
<tr>
<td>20-24</td>
<td></td>
<td>260.7</td>
<td>286.1</td>
<td>286.8</td>
<td>307.6</td>
<td>303.1</td>
<td>297.4</td>
<td>289.7</td>
</tr>
<tr>
<td>25-29</td>
<td></td>
<td>337.7</td>
<td>378.1</td>
<td>378.3</td>
<td>324.3</td>
<td>388.1</td>
<td>382.2</td>
<td>307.0</td>
</tr>
<tr>
<td>30-34</td>
<td></td>
<td>284.1</td>
<td>313.6</td>
<td>347.0</td>
<td>274.7</td>
<td>392.8</td>
<td>374.0</td>
<td>256.7</td>
</tr>
<tr>
<td>35-39</td>
<td></td>
<td>185.9</td>
<td>223.5</td>
<td>217.2</td>
<td>226.0</td>
<td>342.6</td>
<td>282.1</td>
<td>177.2</td>
</tr>
<tr>
<td>40-44</td>
<td></td>
<td>75.9</td>
<td>112.6</td>
<td>127.6</td>
<td>134.2</td>
<td>195.0</td>
<td>172.5</td>
<td>90.6</td>
</tr>
<tr>
<td>45-49</td>
<td></td>
<td>34.5</td>
<td>56.5</td>
<td>48.7</td>
<td>96.4</td>
<td>33.8</td>
<td>86.9</td>
<td>27.9</td>
</tr>
<tr>
<td>Adjustment factor*</td>
<td></td>
<td>1.88</td>
<td>1.56</td>
<td>1.54</td>
<td>1.91</td>
<td>1.94</td>
<td>2.20</td>
<td>--</td>
</tr>
<tr>
<td>Relative contribution of selected age groups to the total fertility rate (%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15–19</td>
<td></td>
<td>3.4</td>
<td>2.9</td>
<td>3.0</td>
<td>7.2</td>
<td>7.2</td>
<td>3.5</td>
<td>9.3</td>
</tr>
<tr>
<td>20–34</td>
<td></td>
<td>72.3</td>
<td>68.9</td>
<td>70.3</td>
<td>62.1</td>
<td>71.3</td>
<td>63.5</td>
<td>67.7</td>
</tr>
<tr>
<td>35 or older</td>
<td></td>
<td>24.3</td>
<td>27.6</td>
<td>27.3</td>
<td>31.3</td>
<td>37.6</td>
<td>32.8</td>
<td>23.5</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
<td>9.3</td>
</tr>
<tr>
<td>Mean age (years)</td>
<td></td>
<td>30.3</td>
<td>30.7</td>
<td>31.1</td>
<td>31.1</td>
<td>36.1</td>
<td>31.6</td>
<td>29.5</td>
</tr>
</tbody>
</table>

**Note:** * Estimated applying the Brass P/F ratio method. This method presented, in general terms, more consistent results in these six provinces. Although alternative methods are available, as the Gompertz Relational Model (GRM), due to similarity in the results, the Brass method was adopted.

**Source:** CSO Afghanistan, SDES (2011–2014); the Afghanistan estimates are from United Nations Department of Economic and Social Affairs, Population Division (2013); World Population Prospects: The 2012 Revision, DVD edition. New York.

### TABLE 4

**Adolescent fertility rates (births per 1,000 women) in Afghanistan, Egypt, Indonesia, Iran, Iraq, Pakistan, Saudi Arabia and Syrian Arab Republic, 2005–2010**

<table>
<thead>
<tr>
<th>Afghanistan</th>
<th>Egypt</th>
<th>Indonesia</th>
<th>Iran</th>
<th>Iraq</th>
<th>Pakistan</th>
<th>Saudi Arabia</th>
<th>Syria</th>
</tr>
</thead>
<tbody>
<tr>
<td>117.5</td>
<td>48.7</td>
<td>51.5</td>
<td>31.5</td>
<td>74.1</td>
<td>30.9</td>
<td>11.6</td>
<td>44.6</td>
</tr>
</tbody>
</table>

The prevalence of contraception use is the most important determinant of fertility. The 2010 Afghanistan Mortality Survey collected information on knowledge of contraceptive methods as well as contraception use. The findings indicated that 91.8 percent of the then currently married women aged 15–49 years had heard of at least one contraceptive method. This share increased to 98 percent in urban areas. Knowledge of contraceptive methods thus appears widespread among married women. Yet, only 22.5 percent of married women reported using contraception. Among women with no schooling, this share was 20 percent; among women with a higher level education, it was 45 percent.

Comparisons with other surveys carried out in Afghanistan at the beginning of the century suggest that the knowledge and use of contraception have increased over the past decade. The 2003 Afghanistan Multiple Indicator Cluster Survey findings, for example, indicated that 28 percent of then currently married women younger than 50 had heard of any contraceptive method. The same survey found that only 10 percent of married women reported using any contraceptive method. The 2010 Afghanistan Mortality Survey revealed that 91.6 percent of women knew of any contraceptive method, and 22 percent were using some form of contraception. Although the utilization is relatively minor when compared with other countries, it represents a significant increase in a few years’ time for Afghanistan.

Finally, Table 5 presents the proportion of married women aged 15–49 who were using contraception in 2004 and 2014, as well as the total fertility rate in Afghanistan in 2013 and in selected countries with similar cultural values. Table 5 confirms that the use of contraception has substantially increased in Afghanistan in a short period, but it is still low when compared with other countries.

**TABLE 5**

Percentage of married women aged 15–49 years using contraception in 2004 and 2014 and total fertility rate in 2013, in Afghanistan, Egypt, Indonesia, Iran, Iraq, Pakistan and Syrian Arab Republic

<table>
<thead>
<tr>
<th>Countries</th>
<th>2004</th>
<th>2014</th>
<th>2013*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>All methods</td>
<td>Modern methods</td>
<td>All methods</td>
</tr>
<tr>
<td>Afghanistan</td>
<td>5</td>
<td>4</td>
<td>21</td>
</tr>
<tr>
<td>Egypt</td>
<td>60</td>
<td>57</td>
<td>60</td>
</tr>
<tr>
<td>Indonesia</td>
<td>60</td>
<td>57</td>
<td>62</td>
</tr>
<tr>
<td>Iran</td>
<td>74</td>
<td>56</td>
<td>82</td>
</tr>
<tr>
<td>Iraq</td>
<td>-</td>
<td>-</td>
<td>53</td>
</tr>
<tr>
<td>Pakistan</td>
<td>28</td>
<td>20</td>
<td>35</td>
</tr>
<tr>
<td>Syria</td>
<td>49</td>
<td>32</td>
<td>54</td>
</tr>
</tbody>
</table>

**Note:** *The most recent data available.

**Source:** Population Reference Bureau (2004 and 2014). See the World Population Data Sheet.
3.5 Education

Afghanistan’s education indicators are among the worst in the world, especially among girls and women. A huge portion of females, for example, cannot read or write (World Bank, 2005). Table 6 shows the adult literacy rate by sex for the population aged 15 or older for Afghanistan and selected countries with similar cultural values. Among all the countries, Afghanistan reflects the lowest female rate: Only 17.7 percent of Afghan females aged 15 or older were literate in 2012. This rate is so low that even the second-lowest female literacy rate (Pakistan) is more than twice that of Afghanistan. Table 6 also presents the ratio between male and female literacy rates. Again, Afghanistan displays the highest ratio, confirming that the female disadvantage (when compared with males) in the Afghan education system is greatest among the selected countries. Once the total literacy rate rises, this ratio will decrease.

As illustrated in Table 7, all six provinces present poor indicators for women and men and important sex differentials for the mean years of schooling and literacy rates. The SDES results from Ghor Province, for example, indicated the mean for years of schooling for females was 0.6 years while their literacy rate was 8.1 percent. Parwan Province stands out because of its large sex differentials for both years of schooling and the literacy rate. On the other side, Kabul and Kapisa had the better results for both educational indicators.
## TABLE 6

Adult literacy rate for the population aged 15 or older, by sex and the ratio between male and female rates (%) in Afghanistan, Egypt, Indonesia, Iran, Iraq, Pakistan, Saudi Arabia and Syrian Arab Republic, 2012

<table>
<thead>
<tr>
<th>Country</th>
<th>Women</th>
<th>Men</th>
<th>M/W ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afghanistan</td>
<td>17.7</td>
<td>45.4</td>
<td>2.56</td>
</tr>
<tr>
<td>Egypt</td>
<td>65.8</td>
<td>81.7</td>
<td>1.24</td>
</tr>
<tr>
<td>Indonesia</td>
<td>90.1</td>
<td>95.6</td>
<td>1.06</td>
</tr>
<tr>
<td>Iran</td>
<td>79.2</td>
<td>89.4</td>
<td>1.13</td>
</tr>
<tr>
<td>Iraq</td>
<td>72.2</td>
<td>85.8</td>
<td>1.19</td>
</tr>
<tr>
<td>Pakistan</td>
<td>42.0</td>
<td>67.0</td>
<td>1.60</td>
</tr>
<tr>
<td>Saudi Arabia</td>
<td>91.4</td>
<td>96.5</td>
<td>1.06</td>
</tr>
<tr>
<td>Syrian Arab Republic</td>
<td>79.2</td>
<td>90.8</td>
<td>1.15</td>
</tr>
</tbody>
</table>


## TABLE 7

Mean years of schooling, by sex, adult literacy rate for the population aged 15 or older by sex, the ratio between the means and rates and by province, 2012

<table>
<thead>
<tr>
<th>Provinces</th>
<th>Mean years of schooling</th>
<th>Literacy rate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Men</td>
<td>Women</td>
</tr>
<tr>
<td>Bamiyan</td>
<td>2.4</td>
<td>1.3</td>
</tr>
<tr>
<td>Daykundi</td>
<td>2.5</td>
<td>1.6</td>
</tr>
<tr>
<td>Ghor</td>
<td>1.5</td>
<td>0.6</td>
</tr>
<tr>
<td>Kabul</td>
<td>5.5</td>
<td>3.0</td>
</tr>
<tr>
<td>Kapisa</td>
<td>5.0</td>
<td>1.9</td>
</tr>
<tr>
<td>Parwan</td>
<td>4.3</td>
<td>1.3</td>
</tr>
</tbody>
</table>

**Source:** CSO Afghanistan, SDES (2011–2014).

## EDUCATION AMONG MALES AND FEMALES AGED 6–25 YEARS

Policies to promote Afghanistan’s economic growth consist mostly of investments in human capital, especially targeting young people (UNFPA, 2012). Over a short period of time, major achievements in access to education have been observed. The 2011/2012 NRVA findings, for instance, showed important improvements in primary and secondary school completion for adolescents and youth. The SDES findings also revealed progress in access to education for these groups. The SDES data suggested that Afghan youth have benefited from the new national laws and policies on education.
FIGURE 6

Percentage of males and females (aged 6–25 years) with no schooling and the difference between them, by single year of age and by province, 2011–2014

FIGURE 7
Mean years of schooling for females and males (aged 6–25 years) and the difference between them, by single years, 2011–2014

Figure 6 illustrates the percentage of children and youth aged 6–25 years in each province who had had no schooling at the time of the survey. The results are presented by sex, with a green line plotted that represents the difference between the percentage of males and females with no schooling by single year of age. For all six provinces, the curves for both sexes display a U-shaped format that represents a decrease in the percentage of people with no education up to a certain age (about 11 years), and then an increasing trend in this percentage as age increases. The descending part of the curve at younger ages suggests how the entry path into school has occurred. Comparisons by sex indicate that boys start school earlier than girls.

The rising part of the curves beyond a certain age represents an increase in the percentage of females and males with no education, associated with the older generations’ more limited access to education. In Kabul, this increase begins at age 11 for males and age 13 for females. The ascending part of the curve illustrates the significant expansion in access to school in recent years in the six provinces, with the higher percentages at older ages revealing more restricted access in the past. In Kabul, for instance, 70 percent of women aged 25 years had no education, while this percentage was 24 percent among girls aged 11 years. The graphs in Figure 6 also demonstrate that the differences in the percentage of females and males with no education have considerably decreased among the younger cohorts. Kapisa and Parwan provinces reflect the largest sex differentials. Along with Kabul, these provinces also had the lowest percentage of men with no education at each age. In addition, Ghor Province reported small sex differentials across ages; however, the percentage of children and young people with no schooling was significantly higher there. Bamiyan and Daykundi provinces exhibit the lowest gender inequality regarding the percentage of children and youth who had at least one year of schooling.

All provinces in Figure 7 reflect remarkable differences in the mean years of schooling of children and youth aged 6–25 years, by sex and age. The plotted green line illustrates the difference between the male and female mean years of schooling by single year of age. At each age, the male mean is higher than the female mean; however, this disadvantage is lower among young children and adolescents.
and virtually disappears at ages younger than 11 years in Bamiyan, Daykundi and Kabul, indicating progress towards equality.

Kapisa, Parwan and Kabul provinces had the highest mean years of education for males at age 21 years, with a range from nine to ten years. The mean declined fast and substantially in these provinces, however, falling to six, seven and eight years of education, respectively, by age 25. Among males, Bamiyan and Daykundi provinces reflect the highest mean years at age 19 and Ghor at age 16. In these provinces, the mean years of education for women started to decline even earlier: at age 16 in Bamiyan and Daykundi and at age 14 in Ghor.

Overall, the results depicted in Figures 6 and 7 reflect recent and important positive changes in access to education among children and youth in the six provinces. This trend is particularly evident among girls (including female adolescents).

3.6 Labour market participation

Indicators of labour market participation are important tools for gender analysis (ILO, 2010). Low participation and poor labour conditions among women are often observed in contexts with high levels of gender disparities and discrimination against women (CSO, 2014). In gender-imbalanced contexts, women's participation in the labour market is greatly influenced by religious and cultural norms, which often constrain female activities outside the household as well as enforce heavy domestic burdens on women.

It is important to take into account differences in the labour market participation by area of residence as well as the occupational groups in which women are engaged. For instance, previous reports of SDES analyses have highlighted that women's participation in economic activities was more limited in urban areas and subject to more severe restrictions when comparing with rural areas (Pain and Mallett, 2014; World Bank, 2005). For example, only 11.1 percent of women who had access to paid employment in Afghanistan in the 2011/2012 NRVA findings worked in a non-agriculture sector. According to a 2014 Central Statistics Organization report on the labour market, the female participation rates were higher in rural areas because agricultural activities favour family work. The participation rates in the rural areas are independent of the level of schooling achieved, and women contribute most of their labour time as unpaid family workers (CSO, 2014). Thus, the positive relationship often observed between education, labour force participation and income in urban and more developed areas (that may increase women's autonomy and gender equality) most likely does not apply to rural Afghan areas. In other words, moderate or higher female participation rates observed in provinces such as Ghor do not mean that women are living in a context with a low level of gender inequality.

A comparison by sex of the 2011/2012 NRVA findings reveals that 19 percent of the working-age females were then currently active in the labour market, compared with 80 per cent of males. Figure 8 shows the labour force participation rate\(^{10}\) (total and by sex), based on the SDES data for the six provinces and the 2011/2012 NRVA findings for the whole country. Ghor Province comes closest to the national level (by sex and total labour force participation rate). Among all six provinces, Kabul presents the lowest rate of female participation in the labour force. Yet, 99 percent of Ghor's population reside in rural areas, while this share is only 17 percent in Kabul (World Bank, 2011).

As illustrated in Figure 9, the findings on female labour force participation rates show little variance with age in all six provinces. But the sex differentials are remarkable in all age groups. From adolescence until the oldest ages, Afghan men participate substantially more in labour market activities than Afghan women.

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\(^{10}\) This rate represents the share of the working-age population (aged 15 or older) who engage in the labour market, either by working or actively looking for work, expressed as a percentage of the working-age population.
FIGURE 9
Labour force participation rate among males and females aged 15–59 years, by province, 2011–2014 (%)

FIGURE 10
Labour force participation, by sex and age among males and females aged 15–49 years with 10 years or more of schooling, by province, 2011–2014 (%)

Kabul, Kapisa and Parwan provinces have the lowest female participation rate in economic activities; and as would be expected, they display the highest sex differentials. Bamiyan and Ghor provinces exhibit greater female participation in economic activities when compared with the other provinces (although it is still low) and smaller differentials by sex. In five of the six provinces, the majority of women who do work are engaged in the agriculture and fisheries sectors. Kabul is an exception, with female occupation predominantly in the educational system, especially as primary school teachers.

**LABOUR FORCE PARTICIPATION AMONG MORE-EDUCATED WOMEN AND MEN**

Female labour force participation is extremely low in Afghanistan. Nonetheless, there are important differences according to the level of female education. Nationwide, women with a tertiary education have a labour force participation rate of roughly 78 percent, according to the 2011/2012 NRVA findings. Figure 10 highlights the labour force participation rate of each of the six provinces among females and males aged 15–49 years who have 10 or more years of schooling. The findings on female rates show large variances with age; as expected, it increases as age rises.

Overall, Figure 10 shows that even when analysing only better-educated persons, a significantly higher percentage of educated males than educated females participate in the labour market. The provinces with the lowest sex differentials were Bamiyan and Ghor, which is, in part, a consequence of the extremely low level of education reported for men and women in those provinces (World Bank, 2011). Figure 10 also indicates that men with a high level of education have a labour force participation rate of roughly 100 percent at age 30 or older.

### 3.7 Maternal mortality

The maternal mortality ratio is a general indicator of a population’s health as well as of gender inequalities. According to the World Health Organization, maternal mortality is the death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management but not from accidental or incidental causes (see the Thematic Report on Maternal Mortality). The Afghan maternal mortality ratio is among the highest ratios in the world, with Table 8 reflecting a startling comparison with selected countries that are culturally similar: Afghanistan’s ratio is more than double the rate of the second-highest ratio (for Indonesia).

**TABLE 8**

**Maternal mortality ratio (per 100,000 live births) in Afghanistan, Egypt, Indonesia, Iran, Iraq, Pakistan, Saudi Arabia and Syrian Arab Republic, 2013**

<table>
<thead>
<tr>
<th>Country</th>
<th>Afghanistan</th>
<th>Egypt</th>
<th>Indonesia</th>
<th>Iran</th>
<th>Iraq</th>
<th>Pakistan</th>
<th>Saudi Arabia</th>
<th>Syria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afghanistan</td>
<td>400</td>
<td>45</td>
<td>190</td>
<td>23</td>
<td>67</td>
<td>170</td>
<td>16</td>
<td>49</td>
</tr>
</tbody>
</table>

**Source:** Global Health Observatory Data Repository

Table 9 presents the maternal mortality ratio calculated for the six provinces.\(^{11}\) With the exception of Kabul and Kapisa, the maternal mortality ratios are substantially higher than the ratio for the whole

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\(^{11}\) The results are also presented in the Thematic Report on Maternal Mortality.
country. In part, the high mortality ratios found in Bamiyan, Daykundi and Ghor could be explained by their high levels of fertility, as shown in Table 3. Nevertheless, many other issues are taking place because Kabul, Kapisa and Parwan also reflect high total fertility rates but, as described in Table 9, they have greatly lower maternal mortality ratios.

### TABLE 9

**Maternal mortality ratio per 100,000 live births by province, 2011–2014**

<table>
<thead>
<tr>
<th>Province</th>
<th>Maternal Mortality Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kabul</td>
<td>294</td>
</tr>
<tr>
<td>Bamiyan</td>
<td>937</td>
</tr>
<tr>
<td>Daykundi</td>
<td>1 260</td>
</tr>
<tr>
<td>Ghor</td>
<td>1 882</td>
</tr>
<tr>
<td>Kapisa</td>
<td>235</td>
</tr>
<tr>
<td>Parwan</td>
<td>464</td>
</tr>
</tbody>
</table>

*Source: CSO Afghanistan, SDES (2011–2014).*

The results presented in Table 9 strongly suggest that women living in certain provinces, such as Bamiyan, Daykundi and Ghor may have restricted access to health services, which also contributes towards the high level of gender inequality. Results from the 2007/2008 and 2011/2012 NRVA helped to elucidate this hypothesis. Based on the NRVA data, Table 10 presents percentages of women with access to skilled antenatal care during pregnancy in the six provinces and nationwide. The comparison indicates that women have limited access to antenatal care in Ghor (only 9 percent of them reported having access to skilled antenatal care during pregnancy in 2011/2012). Although the health system has considerably improved in Afghanistan, still women’s health services generally and maternal health
services especially are virtually non-existent in large parts of the country. Thus, a huge number of preventable maternal deaths occur every day in Afghanistan (UNFPA, 2012).

**TABLE 10**

Access to skilled antenatal care during pregnancy, by province, 2007/2008 and 2011/2012 (%)

<table>
<thead>
<tr>
<th>Province and nationwide</th>
<th>2007/2008 (%)</th>
<th>2011/2012 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kabul</td>
<td>71</td>
<td>78</td>
</tr>
<tr>
<td>Bamiyan</td>
<td>36</td>
<td>63</td>
</tr>
<tr>
<td>Daykundi</td>
<td>30</td>
<td>32</td>
</tr>
<tr>
<td>Ghor</td>
<td>7</td>
<td>9</td>
</tr>
<tr>
<td>Kapisa</td>
<td>35</td>
<td>54</td>
</tr>
<tr>
<td>Parwan</td>
<td>48</td>
<td>65</td>
</tr>
<tr>
<td>Afghanistan</td>
<td>37</td>
<td>51</td>
</tr>
</tbody>
</table>


Although low access to skilled antenatal care during pregnancy was reported in Daykundi Province, women in Bamiyan Province unexpectedly cited relatively better access (at 63 percent in 2011/2012). This finding indicates there could be other factors contributing to the high maternal mortality in these provinces, including the capacity of health services to solve emergency situations.

In developing countries, maternal under nutrition is one of the most important causes of maternal morbidity and mortality (Ali, Thaver and Khan, 2014). Taking into account aspects of food security, the situation in Bamiyan, Daykundi and Ghor provinces calls attention to the large share of the population with poor dietary diversity. According to the 2007/2008 NRVA, 62.8 percent, 45.1 percent and 43.3 percent of the population in these provinces, respectively, reflect inadequate dietary diversity (World Bank, 2011). Yet, the share nationwide is 20.1 percent, while the other three provinces report percentages lower than the national level. The high percentage of the population with inadequate dietary diversity in Bamiyan, Daykundi and Ghor provinces (and the high level of gender inequality found there) strongly suggests a high prevalence among women in the reproductive age.

The 2011/2012 NRVA found an overall sex ratio of 106 males per 100 females in Afghanistan. Contrary to countries with more equilitarian gender relations, the sex ratio favours men. Even though this evidence has been associated to female under-enumeration in the survey, it still strongly suggests that women’s health status may be poorer when compared with men. To illustrate the exceptional poor female health status in Ghor Province, Figure 11 displays the female and male age-specific death rates, with women having a higher mortality rate than men beginning at age 25 and enduring through the 75–79 age group. It is likely that the high maternal mortality in Ghor has an important role in explaining the sex-mortality differences there.

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Discussion and policy implications
The interventions required to improve the status of females in Afghanistan are strongly associated with the cultural and normative values that shape gender relations in the country. For example, the high value placed on marriage likely inhibits female aspirations in different life perspectives, which would demand investments in human capital and accepted participation in the labour market. At the same time, the high value given to children probably encourages early marriage and childbirth as well as high fertility. One of the main points that emerged in this report’s analysis suggests the delay of the age at marriage among the younger cohorts of Afghan women. This is a remarkable social and cultural change that diminishes the time of exposure to childbirth in a context in which virtually all births occur within marriage.

The decline of fertility in places where previously it was high usually brings positive consequences to women’s lives. For instance, there is broad agreement that a decline in fertility transforms the gender system and empowers women. The decline of fertility has been associated with increases in female participation in the labour market and school enrolment as well as with changes in the normative meaning of marriage and family life (Malhotra, 2012). Empirical research from elsewhere provides some examples of positive shifts in the gender system after widespread use of birth control in developing countries, including in those where gender inequality was high. Amin and Lloyd (2002), for instance, associate fertility decline in Bangladesh with improved life options for women, such as more access to credit and social networks. Another positive consequence of fertility decline is the reduction of maternal mortality. Such a reduction in Afghanistan would be an important step towards reducing gender inequality across the country.

Recent surveys have been inconclusive on the level of fertility currently in Afghanistan, where children are highly valued. Among other reasons, a successful marriage depends on the number of children, especially boys, a woman has. More specifically, a woman’s status in the family depends on the number of children she has, and failure to conceive is a legitimate reason for a husband to demand divorce (World Bank, 2005). In addition, children can be a guarantee of protection and family care for the elderly, given the lack of a welfare system in Afghanistan. Still, the use of contraception has quickly increased, suggesting that Afghan women have had better access to contraceptive methods and have changed their reproductive preferences towards lower fertility.

The SDES results do not indicate that fertility is declining (at least in a relevant way) in the six provinces (even the findings in Kabul demonstrate a continuing high rate, with the estimated total fertility rate at 6.1 children per woman). Nevertheless, as highlighted in this report, there are reasons to believe that fertility has reduced in Afghanistan: (i) delay in the age at marriage, with substantial decrease of ever-married female adolescents; (ii) the rise in the mean years of education among female adolescents and young women; and (iii) the increase in the use of contraception.

Because the postponement of marriage may bring important outcomes that increase women’s limited empowerment in Afghan society, it is crucial to determine which factors have contributed to it. The increasing number of girls and female adolescents going to school is probably having a major role. Investment in female human capital is a strong way to improve women’s empowerment because it tends to increase their autonomy and economic independence, creating new life perspectives, expectations and aspirations. Second, it may generate mechanisms for changing female traditional behaviours, transforming values regarding marriage and family, and help to diminish gender disparities. Lastly and substantially important, increasing access to education could make girls (and boys, too) rethink the conservative definitions of gender roles in Afghan society.

Female reproductive behaviour shows signs of change in Afghanistan. This important cultural and social change is likely related to several recent initiatives and strategies to improve women’s rights in the country. Recent policies to guarantee access to education and the female long-term attendance in schools may have a central role. In Kabul, for example, female adolescents aged 19 years had, on average, six years of schooling in 2014. It is not only an important achievement for them but also reveals an enormous change in access to education: In comparison, women aged 25 years in the same year in Kabul had, on average, only three years of schooling.
Finally, policies and future strategies need to take into account the important socio-cultural and structural transformations that at least part of Afghanistan has recently undergone. These changes will contribute towards reducing fertility and gender inequality. It is important to emphasize that previous empirical research had indicated that men and women desire more information on family planning and improvements in access to modern female contraceptive methods in Afghanistan (Haider and others, 2009). Clearly, there are socio-cultural barriers that limit the use of contraception in the country, including barriers to acquiring knowledge, lack of trust in doctors and medicines and gender inequalities on reproductive decisions because men are the primary decision makers (Haider and others, 2009). The Government needs to provide the mechanisms to overcome those and other obstacles and guarantee the freedom for female and male reproductive preferences and rights in Afghanistan. Culturally sensitive strategies would be very important to this end.
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