DSA Ireland Conference 2013

In partnership with Irish Forum for Global Health & Gender ARC

Summary Report

Health and gender equity in a period of global crisis

Galway Bay Hotel, Salthill, Galway, Ireland. 28-29 November 2013







Development Studies Association of Ireland 2013 Conference in partnership with the Irish Forum for Global Health and the Gender Advanced Research Consortium HEALTH AND GENDER EQUITY IN A PERIOD OF GLOBAL CRISIS Galway Bay Hotel, 28th/29th November

This was a well-attended conference with representation from many sectors of academia, NGOs and students. The conference was opened by Olivia Mitchell TD who stated that:

"There are many definitions and theories of development and there is much dispute about which paths to development are the most effective. But there is no dispute that the participation of women is indispensable to development that is sustainable and equitable. Therefore, barriers to women's participation must be addressed and initiatives to bring about the advancement of women must be prioritised. One of the most significant barriers women face is lack of access to appropriate reproductive health services, information and supplies, which results in persistent high levels of maternal mortality and disability. Unless women's reproductive health is central to development policy, the poorest women in the most disadvantaged societies will continue to be trapped in cycles of poverty and ill health, to the detriment of their countries' development. Conversely, when women's reproductive health needs are met, women can transform their countries' future."

There were three sections to the conference dealing with new ideas and countries in Development 2.0, gender equity issues and health equity issues respectively.

'Development 2.0'

The opening plenary set the scene for a fresh approach to rethinking global development, anticipating what lies ahead after the MDGs.

Sally-Anne Kinehan (Deputy General Secretary, Irish Congress of Trade Unions) presented one route to tackling inequity across North and South through the 'decent work agenda', given that austerity policies and eroding labour standards and working conditions are impacting most heavily on the most vulnerable and discriminated workers.

Dr. Ram Reddy's reflections on India's 'dysfunctional politics' called for a re-examination of the political dimensions of development, raising questions about civil society and the limits of elite politics, sand-wiched between the globalizing expansion of corporate enterprise on the one hand, and impressive democratization from below, on the other.

India has passed some very notable national measures for poverty alleviation - massive national food security and rural employment guarantee schemes and mobilization of socioeconomic rights for the poor are providing pressures and spaces for change. Yet, India lags behind the rest of South Asia on social indicators. There is a lack of progress on universal health reforms and broad nutritional and multidimensional poverty, coupled with rising healthcare costs that underpin an emerging health crisis.

Sue Branford's presentation on Brazil's mixed development achievements offered a counterpoint to India's development puzzle. After a decade of electoral success for the Worker's Party (PT), Brazil has seen major improvements in terms of alleviating poverty and inequality, attributable to minimum wage increases and cash transfers to the poor. This has made a difference to some 60 million people, but poverty alleviation is not enough, as the public remain dissatisfied by the quality of health and education provision. Huge demonstrations have broken out against small increases in transport costs in the face of mega-infrastructural spending for the forthcoming World Cup. PT has responded to workers' demands, but it is urban-focused, neglecting the Amazonian interior and failing to meet the landless movement's expectations for land reform.

Prof. Ronaldo Munck's final contribution in this section, highlighted migration as a key but neglected factor in development, given the enormity of population movements and associated flows of workers, capital and migrant remittances. This highlights the transnational and contingent character of development and possibly calls for a new paradigm based on a world of flows. It also shows the importance of development theory in explaining development processes.

This plenary opened up a stimulating, diverse and inclusive conversation, with equity as a shared interdisciplinary concern when debating research, policy and practice across development studies, gender studies and global health.

Gender and equity

This plenary focused on gender equality in times of crisis and the key factors to consider in the context of economic recovery.

Prof. Diane Elson opened the plenary with clear macro framework to understand the gender impacts of the crisis in the global north and south. She suggested that we must examine the impacts across the three spheres of a) Finance, b) Production and c) Social Reproduction. Prof. Elson argued that the root of the economic crisis lies in the dominance of the financial sector over production and social reproduction spheres. She cautioned against focusing on short-terms impacts as the more hidden and longer effects on structural changes to employment, production and social reproduction have significant impacts on gender equality. For example Prof. Elson pointed to increasing gender wage gap and worsening physical and mental health as families face the burden of austerity budgets. Prof. Elson made a strong plea to rethink the ways in which to create a socially useful Finance sphere at the service of production and social reproduction.

Dr. Una Murray turned the discussion to developing country contexts highlighting the 'triple crisis' - economic crisis combined with an ongoing food and energy crisis. In the context of multiple crisis, Dr. Murray suggested that institutions, both governments as well as development NGOs, play a critical role in safeguarding gender equality. However, institutions face challenges in measuring gender equality, identifying appropriate indicators for assessing changes in power and decision-making, and recognizing their own limited understanding of gender equity. She concluded that recognizing gender constraints and relations is critical for resilience against future crises.

Dr. Simel Esim concluded the session with a focused discussion of cooperatives and their potential role in economic recovery. She highlighted the long history of cooperatives as alternative forms of organisation for production, consumption and social provisioning. Dr. Esim made a compelling argument for consideration of cooperatives, noting that banking cooperatives did engage in the risk-taking as commercial banks and have weathered the crisis with limited impact. She suggested that socially responsible member owned cooperatives with individual votes based on local, real economies and ethical governance principles are clearly attractive in the current climate.

The session overall provided a framework to understand gender impacts, highlighted the role of institutions at meso level, and suggested possible alternatives for an economic recovery that is more equitable.

Health and Equity

The speakers at this third plenary session summarised the health equity challenges in a period of global economic crisis.

Dr. Finola Finnan addressed the broader determinants of health and summarized issues where we could do better (nutrition, primary education, maternal and child survival, access to ART and prevention, sanitation, environmental sustainability) and issues in development assistance funding (financing, volatility, priority setting, coordination, accountability). She illustrated these issues using HIV and gender as case studies. She summarized the main challenges as the needs to address structural inequalities, establish human rights framework for goals, explicitly address gender-based discrimination in responses, develop accountability mechanisms with national regional and international layers, balance the need for results and speed vs time for real social change and participation, and stay the course with what works.

Dr. David McCoy also focused on how the world could do better on the MDG targets, and the determinants of health and development. While the numbers living on \$1.25/day have declined since 1990, the numbers living on \$2/day and £3-5/day have not. He questioned the roles of philanthropy and its influence on international bodies. He quoted the WHO Commission on the Social Determinants of Health: " in many cases, there is a net financial outflow from poorer to richer countries - an alarming state of affairs" (p 38) and "structural inequities in the global institutional architecture maintain unfairness in trade-related processes and outcomes" (p 132). He illustrated the growth in illicit financial flows versus ODA and in military spending, and the crises of growing urban poverty, water, and climate change. He discussed the roles of three underlying pathologies: inequality, democratic failings, and neoliberalism.

The discussion included questions to the panel and audience on the roles of multinational corporations based in Ireland in inequality and how to best address inequalities in health in Ireland.