Exploring barriers to gender transformative policymaking and programming in Ghana's health and WASH sectors

July 2025 Policy Brief

Executive Summary

Gender inequality remains a significant global challenge, particularly in Africa, where traditional patriarchal structures greatly influence societal norms and policies. Women in Africa face considerable disparities in healthcare access, mainly due to deep-rooted gender stereotypes and unequal power dynamics.

1. Ghana's Context

Ghana has made significant progress in promoting gender equality and empowering women through constitutional guarantees, international commitments, and targeted initiatives. The 1992 Constitution of Ghana emphasizes equal rights for all individuals. Notably, Article 17 mandates equal treatment and protection from discrimination based on various factors, including social and economic status. This highlights the country's dedication to creating an inclusive society where gender equality is a priority. To implement these constitutional and international frameworks, Ghana has launched several gender-transformative initiatives, programs, and policies aimed at enhancing women's rights and promoting gender equality in the health and WASH (Water, Sanitation, and Hygiene) sectors.

2. Snapshot on gender policies/initiatives in Ghana's health and WASH sectors

National Health Insurance Scheme (NHIS): NHIS plays a crucial role in promoting gender equity in healthcare by reducing financial barriers, particularly for women, who often bear the brunt of health costs in Ghana. By improving access to services, including maternal health care, NHIS contributes to improved health outcomes for women, ensuring they receive the necessary support during and after pregnancy ¹.

Community Water and Sanitation Program (CWSP):

The CWSP emphasizes gendered approaches in water and sanitation management. Access to clean water and improved sanitation facilities directly impacts women's health, safety, and empowerment. By addressing these challenges, the CWSP helps alleviate the daily burdens on women and girls, who often must travel long distances to fetch water. ²

Community-Based Health Planning and Services (CHPS): The CHPS brings health services closer to remote communities, with an emphasis on maternal and child health. By improving access to essential health services, CHPS empowers women to take charge of their reproductive health and participate more actively in health decision-making processes. ³

Mother-To-Mother Support Initiative: This initiative creates peer support networks for mothers, fostering knowledge sharing about maternal health issues, parenting, and economic empowerment strategies. Such community-driven initiatives foster solidarity among women, enabling them to navigate challenges together while enhancing their capabilities and social networks.

Despite these initiatives, rural women and girls continue to encounter significant challenges in healthcare and WASH. Effective local-level implementation remains a challenge. Many programs do not fully address the specific needs and barriers faced by rural women and girls. It is essential to understand why policies designed to address gender inequities in Ghana's health and WASH sectors, despite being supported by legal and international frameworks, have not fully met their objectives. Our research explored barriers to gender-transformative

policymaking and programming in Ghana's health and WASH sectors.

3. Identified Barriers to Gender Transformative Policymaking and Programming in Ghana

Using qualitative interviews with stakeholders involved in gender-related policy formulation, several key barriers were identified:

Socio-Cultural Barriers

Traditional gender roles and societal norms often limit women's participation in decision-making processes, which perpetuates inequalities. These barriers include cultural beliefs that prioritize men's authority and insufficient access to resources for women.

"Cultural and social norms have significantly contributed to the vulnerabilities of women and young girls in our patriarchal and religious society. These norms often limit women's self-expression, participation in social activities, and involvement in community decision-making." KI2

Lack of Women's Representation

Women remain underrepresented in leadership positions, and their perspectives, needs, and overlooked experiences are frequently in policymaking. This lack of inclusion not only reinforces existing inequalities but also undermines the effectiveness and relevance of policies aimed at addressing gender issues in health and WASH. The absence of women in decision-making leads to a limited understanding of the challenges faced by women, particularly those most affected by issues such as poverty, violence, and inadequate access to WASH facilities and healthcare.

"We are often excluded from policymaking, particularly regarding water and sanitation, which are considered women's issues. As a result, we only learn about decisions after they are made, despite being directly affected. This lack of representation hinders the progress of WASH projects." KI6

Bureaucracy

The bureaucratic approach used by various institutions impedes the realization of projects. Rigid

processes and formalities create an environment that stifles open dialogue and innovation. The top-down approach system, which is mostly used by institutions, discourages free flow of information and feedback.

"The government sector has significant bureaucracy that hinders the effective implementation of gender transformative policies. As a field worker in direct contact with communities, I understand the challenges and can suggest effective solutions for gender issues. However, the lengthy approval process from higher-ups discourages many officers from fulfilling their responsibilities." KI3

Financial Barriers

Limited budgets, insufficient funding, and competing priorities, making it difficult for agencies and organizations to effectively implement policies and programs. Inadequate financial support often results in delays in project rollouts, reduced effectiveness of services, and sometimes even the complete abandonment of initiatives with significant potential in the health and WASH sectors.

"Financial issues are also limiting the entire department. You might plan and budget for an innovative project with great potential, but without the necessary funding, it can end up sitting unused on your desk. Sometimes, we have to invest our salary to kickstart some projects, which is frustrating given the level of impact we hope to achieve." KI9

4. Recommendations

To overcome these barriers, the following actions are recommended:

Monitor and Evaluate Policies

Establish robust monitoring and evaluation frameworks for gender-transformative policies. Continuous assessment will provide insights into what works and what doesn't, enabling policymakers to adapt and better meet the needs of women and girls.

Tailor Programs to Rural Needs

Conduct assessments to understand the unique challenges faced by rural women and girls in accessing health and sanitation services. Policies and

programs should be specifically designed to address these barriers, considering geographic, cultural, and socioeconomic factors. This can be achieved through effective consultation with relevant stakeholders.

Allocate Resources

Ensure adequate financial and human resources are allocated to gender-transformative initiatives. Investing in programs that prioritize women's health, education, and economic empowerment is crucial to achieving long-term gender equality.

Enhance Community Engagement

Develop outreach programs that actively involve women and girls in local decision-making processes. Their participation will ensure that policies address their specific needs. Engaging community leaders and influencers to champion gender equality can help shift entrenched societal norms.

Increase Awareness and Education

Launch campaigns to challenge and change harmful gender norms and stereotypes. Educational programs should focus on gender sensitivity, the importance of women's health, and their contributions to societal development to create a more inclusive environment.

Encourage Bottom-Up Participation.

Adopt a collaborative, bottom-up approach that integrates local perspectives into decision-making processes. This can be achieved through community workshops, focus groups, and participatory planning, actively seeking input from those directly affected by projects and policies.

Conclusion

While Ghana has made significant progress in addressing gender inequality in health and WASH, persistent socio-cultural barriers and a lack of women's representation continue to hinder the effectiveness of existing policies. By implementing targeted recommendations that enhance community engagement, strengthen women's leadership, and tailor services to meet the needs of rural populations, there would be meaningful steps toward achieving gender equality. Ongoing advocacy, education, and resource allocation are essential to ensure that policies are effectively translated into practice. Ultimately, fostering an inclusive environment where women actively participate in decision-making will empower them and contribute to the overall well-being and development of Ghanaian society.

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