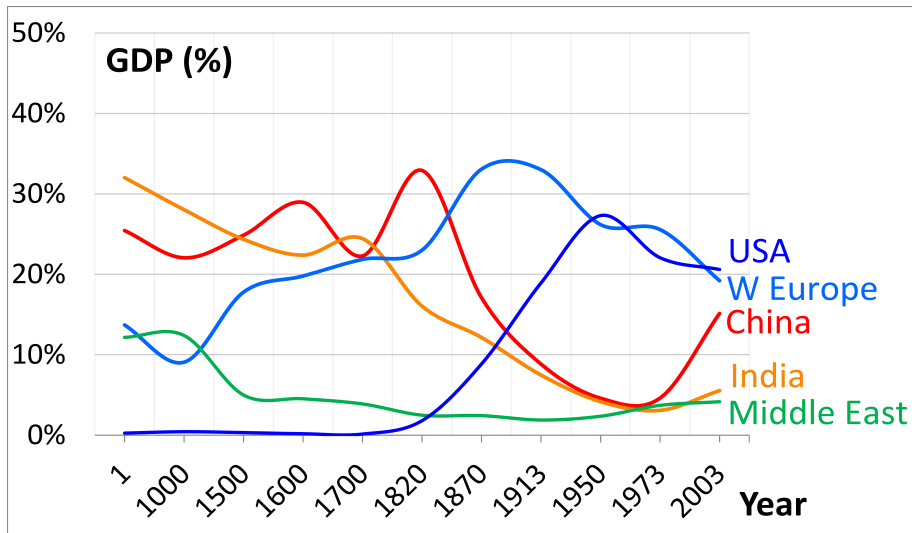


Women, Health and Economics: Presentation before participants of In-Service Training on "Breaking Barriers, Building Prosperity: Strategies for Women's Economic Inclusion" at LBSNAA, Mussoorie.

Prof. Rakesh Sarwal, MBBS, MPH, DrPH. (Community
Medicine). ex-IAS, sarwalr@gmail.com LinkedIn Google Scholar

July 8, 2025

India: Historical Dominance in World GDP

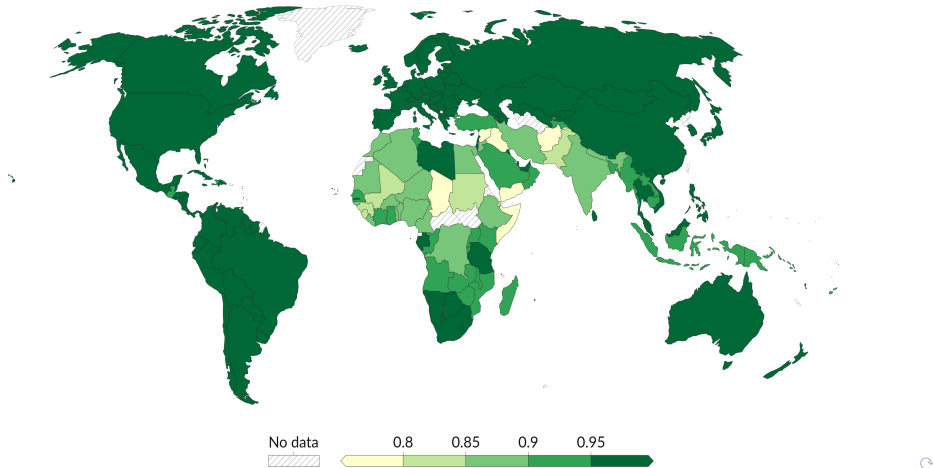


Gender Development Index: India Rank 108/193

Gender Development Index, 2023

Our World
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The Gender Development Index (GDI) measures gender inequalities in the achievement of key dimensions of human development: a long and healthy life, a good education, and a decent standard of living. Values close to 1 indicate higher gender equality.



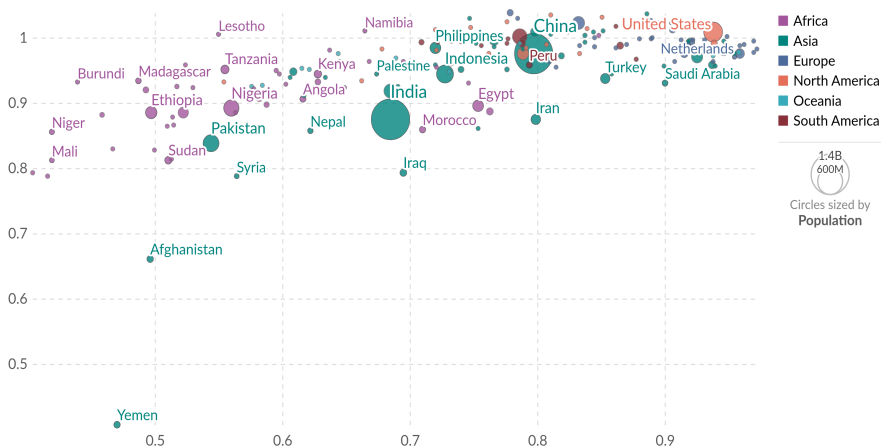
GDI vs HDI (1900 to present)

Gender Development Index vs. Human Development Index, 2023

Our World
in Data

The Human Development Index (HDI) is a summary measure of key dimensions of human development: a long and healthy life, a good education, and a decent standard of living. The Gender Development Index (GDI) measures gender inequalities in the achievement of these dimensions.

Gender Development Index



Global Gender Gap Index: India rank 129/146

- economic participation and opportunity
- educational attainment
- health and survival, and
- **political empowerment**
- The World Economic Forum estimates that at the current pace of progress, it will take 123 years to achieve full gender parity worldwide

Women's Health Issues across Lifespan

Women's Health- Issue to watch out

Adolescent stage

- Menstrual
 - irregularity
- Nutritional deficiency
- Urinary Tract Infection (UTI)



Childbearing stage

- Menstrual irregularity
- Polycystic Ovary Syndrome (PCOS)
- Infertility
- Maternal health
- Aneamia



Pre menopausal stage

- Fertility decline
- Hormonal
 - fluctuation
- Erratic menstruation
- Weight gain



Postmenopausal stage

- Cardiovascular issues
- Osteoporosis
- Mental health issues
- Weight changes



Gender issues in Health in India

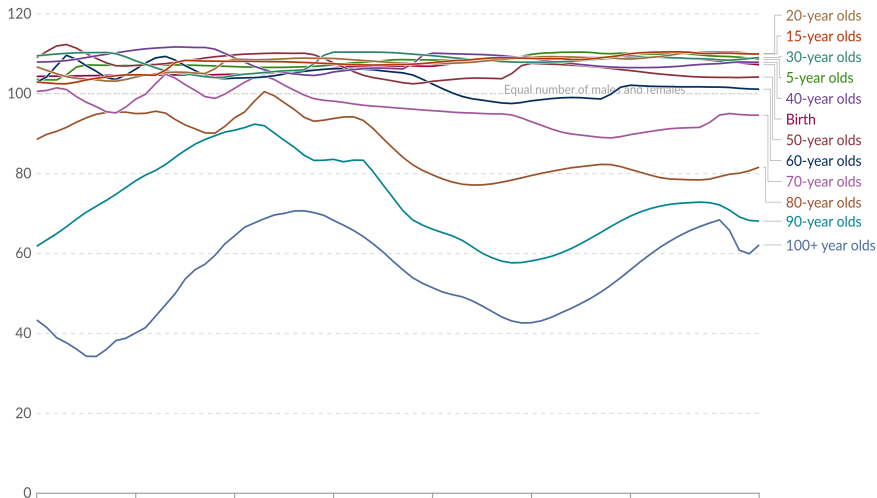
- Sex Ratio at Birth
- India with 20% of worlds children hosts 40% of malnourished children
- Anemia among adolescent girls, pregnant women
- Early marriage
- Unmet need for family Planning
- Intimate partner violence
- Women as recipients of caste based injustice and violence
- High Maternal Mortality Ratio

Sex Ratio by Age, India 1950-2023

Sex ratio by age, India, 1950 to 2023

The sex ratio is measured as the number of men per 100 women. This is shown across various age groups: from newborns to 100-year-olds.

Our World
in Data



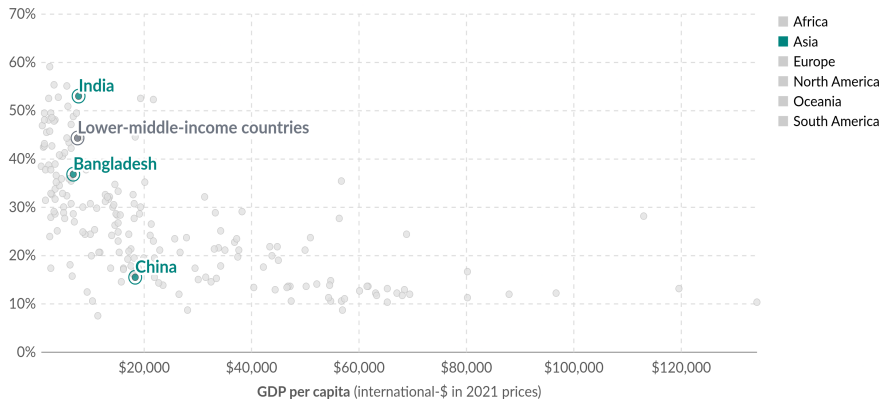
Share of women of reproductive age with anemia

Share of women of reproductive age who have anemia vs. GDP per capita, 2019

Our World
in Data

Prevalence of anemia among women of reproductive age refers to the combined prevalence of both non-pregnant with haemoglobin levels below 12 g/dL and pregnant women with haemoglobin levels below 11 g/dL. GDP per capita is adjusted for inflation and for differences in living costs between countries.

Women of reproductive age with anemia (% of women ages 15-49)



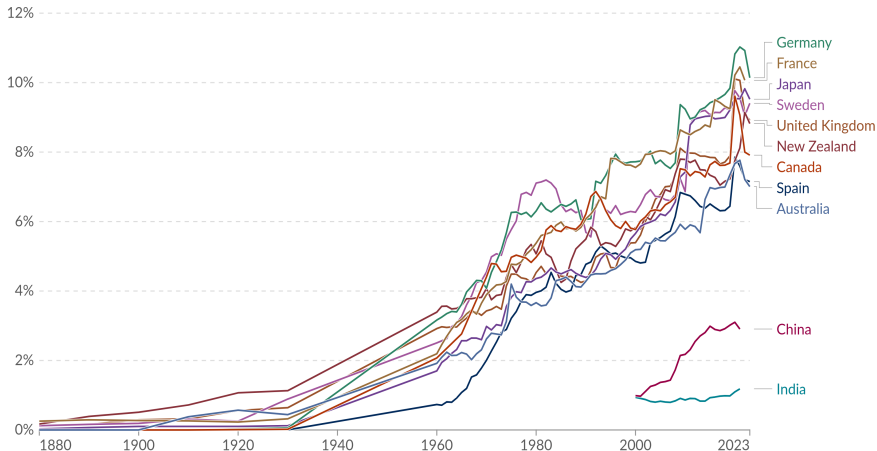
Data source: World Health Organization, via World Bank (2025); Eurostat, OECD, and World Bank (2025)

Public Health Spending as % of GDP

Government health spending as a share of GDP, 1880 to 2023

Our World
in Data

This metric captures spending on government funded health care systems and social health insurance, as well as compulsory health insurance.



Data source: OECD Health Expenditure and Financing Database (2024); OECD (1993); Lindert (1994)

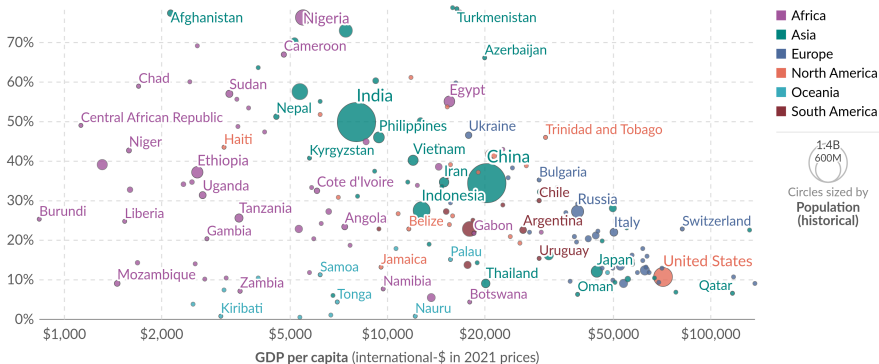
Out of Pocket Spending on Healthcare

Share of out-of-pocket spending on healthcare vs. GDP per capita, 2022

Our World
in Data

Out-of-pocket spending on healthcare as percent of total current healthcare expenditure vs. GDP¹ per capita, adjusted for inflation and for differences in living costs between countries.

Out-of-pocket as share of total expenditure (%) (% of current health expenditure)



Data source: World Health Organization Global Health Expenditure Database, via World Bank (2025); Eurostat, OECD, and World Bank (2025)

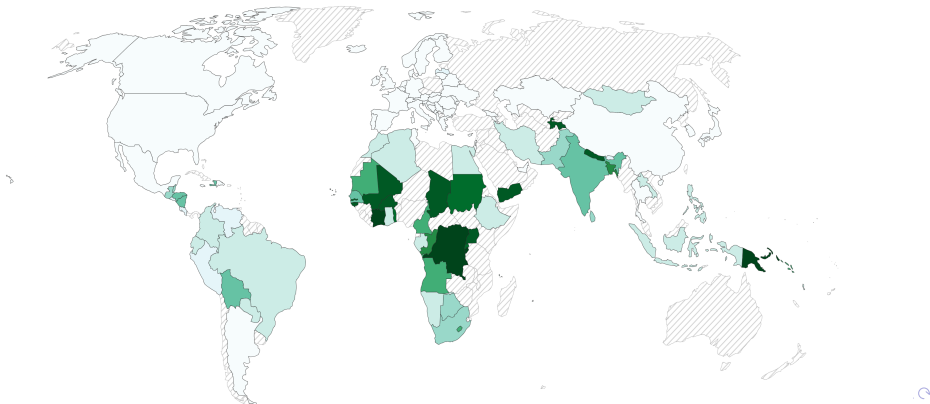
Note: "Out-of-pocket" spending refers to direct payments made by households to healthcare providers. GDP per capita is expressed in international-\$² at 2021 prices.

Share of people at risk of falling into poverty from Healthcare, 2022

Share of people at risk of falling into poverty if payment for surgical care is required, 2022

Our World
in Data

The proportion of population at risk of impoverishing expenditure when surgical care is required. Impoverishing expenditure is defined as direct out-of-pocket payments for surgical and anaesthesia care which drive people below the extreme poverty threshold.

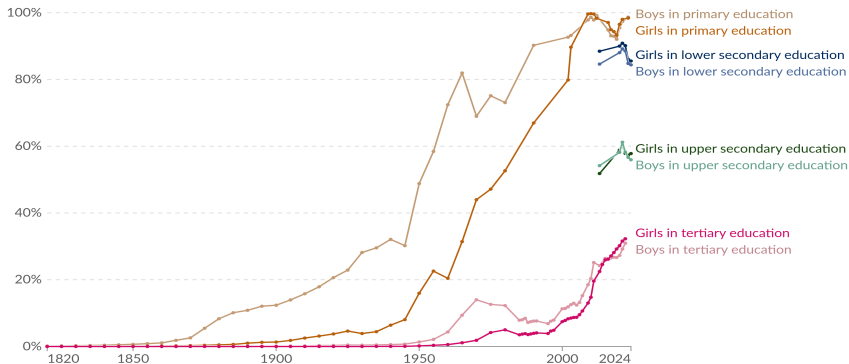


Educational Enrollment by Gender (India, 1820-2024)

Gender gap in primary, secondary and tertiary education, India

Our World
in Data

Share of boys or girls within the relevant age group who are enrolled in primary¹, lower secondary², upper secondary³, and tertiary⁴ education.



Data source: Multiple sources compiled by World Bank (2024); Lee and Lee (2016); UNESCO Institute for Statistics (2025)

Note: This is given as the 'gross' rate, which includes children of any age entering the level of education; this can result in percentages greater than 100 because children may enter education late or repeat a year.

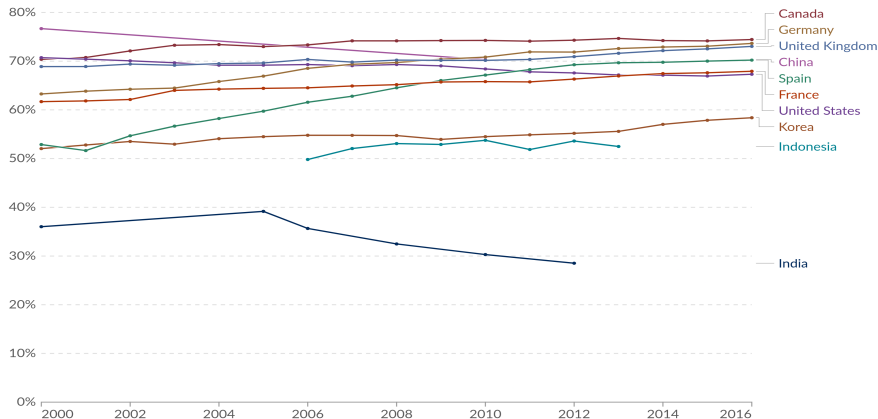
OurWorldinData.org/global-education | CC BY

Female Labour Force Participation across countries (2000-2016)

Female labor force participation rate (15-64), 2000 to 2016

Proportion of the female population ages 15-64 that is economically active.

Our World
in Data



Data source: OECD

OurWorldinData.org/female-labor-supply | CC BY

Gender Roles

Now: Conservative



Desirable: Progressive



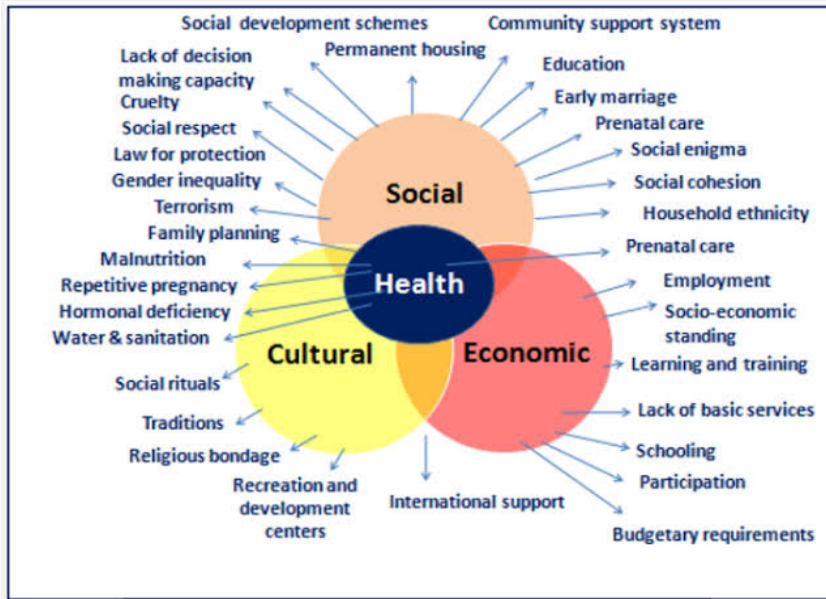
Constitutional provisions on health

- Right to equality (Article 14)
- Right to protection of life and personal liberty (Article 21 includes providing humane working conditions)
- Universal Declaration of Human Rights, 1948
- Convention on the Elimination of Discrimination Against Women (CEDAW), 1965)

Right to Life, a Fundamental Right, includes Right to Health ?

- India a signatory to Alma Ata Declaration, 1978 on Right to Health by 2000.
- India a signatory to Universal Health Coverage for all for 2030.

Health in Socio-Cultural Context



Health care scenario in India

- Health Systems:
 - HR gaps
 - Urban rural differentials in Health care
 - Rising drug prices as outside price control, TRIPS
 - Poor accountability to services and outcomes
 - Fragmentation of care: Pathies
 - food and nutrition outside health
 - Super-specialization at cost of Family Physician,
 - Neglect of health of Tribes, urban slums
 - Health care induced poverty trap
- Neglect of Primary, Preventive care at cost of tertiary care
- Low access to public health facilities
- Low quality of services, IPHS standards
- Increasing privatization of health care
- Insurance excludes OPD, medicines
- Rising consumer misinformation, Medical Shopping,

Inter-linkages: Health & Economic Empowerment

- Poor health reduces productivity and limits work opportunities.
- Economic dependence hinders access to healthcare.
- Better health higher income potential stronger agency.

Government Initiatives Health, Economic Empowerment

- National Health Mission (NHM)
- Janani Suraksha Yojana (JSY) Promotes institutional deliveries.
- Poshan Abhiyaan Tackles malnutrition among women and children.
- Self-Help Groups (SHGs) for microfinance and community empowerment.
- Skill India Mission Training women for various sectors.
- MUDRA Loans Support for women entrepreneurs.
- Digital India Expanding digital and financial inclusion.

Global best practices

- National Health Assembly (NHA) of Thailand for participatory health governance and implement the "Health in All Policies"
- UHC Thailand
- Home visits by Health teams in Thailand
- UHC in Thailand movie

Recommendations

- Integrated health, education, and economic programs: Food Processing an example.
- Invest in safe infrastructure, healthcare, and childcare.
- Promote gender equity in education and employment.
- Address harmful social norms through legal and awareness campaigns.
- Use gender dis-aggregated data for targeted policy.

Conclusion

- Women's health and economic empowerment are essential for inclusive growth.
- Addressing these areas together creates a multiplier effect on development.
- A gender-inclusive strategy benefits families, communities, and the nation.
- If India's female labor force participation rate were to rise to the level of men's, the country could unlock substantial economic growth, possibly adding 18-20% to GDP

Thanks and Feedback



- Click to give Feedback
- Questions ?