

Women in Nepal and Yemen: Second-Class Citizens

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Abstract

This article examines the rights of women and gender inequalities in Nepal and Yemen. Both Nepal and Yemen are far from equality in terms of gender. In both countries, young girls are being married off as young as 8 years old. Women are also discriminated against via religious beliefs and laws, and many women in these two countries lack access to health care and education. This article examines the evolution of women's rights in key areas based on information provided in the literature and actual data of these two countries.

I. Introduction

Over the last one hundred years, women's rights have grown significantly in the United States. Despite setbacks such as the enduring wage gap and work place discrimination, reproductive rights have expanded and there are today more women in college than men. The same cannot be said for many developing countries, such as Nepal and Yemen. In many developing countries, women are often treated as second-class citizens, subject to domestic violence and lacking proper health care and education.

This article discusses issues that women in Nepal and Yemen continue to face today and that continue to create inequalities between men and women. Following a brief literature review of studies regarding women's rights in Nepal and Yemen in the second section, this article will then present some historical and empirical background of both countries in the third section. A discussion of several key issues related to marriage, modern contraception, health and education will constitute the fourth section, before the fifth section provides some conclusions.

II. Brief Literature Review

Women's rights in developing countries have been researched extensively over the last few decades. However, many women still are not considered equal to men and are not given the same rights as men in many developing countries, including in Nepal and Yemen. This brief literature review summarizes some of the main contributions of the last few years focusing on women's rights in Nepal and Yemen. A report by the Asian Development Bank (2010) and academic

contributions by Guinée (2014) and Ranabhat et al. (2015) focus on Nepal, while Yadav (2009) and Badahdah (2016) focus on Yemen. Guinée (2014) and Yadav (2009) examine improvements made for women's rights in Nepal and Yemen, respectively. Badahdah (2016) and Ranabhat et al. (2015) focus on issues that continue to limit rights for women. The report of the Asian Development Bank (2010) covers both, the improvements made and the issues that continue to cause gender inequality.

- Yadav (2009) focuses on how a segmented public in Yemen has affected human development and how the role of women has shifted over the past 20 years. The article examines three main topics: why women work in a gender-segmented public, the effects of women in a segmented public on the relationship between men and women, and ways to rework the public and private system in order to include women. This article also discusses how the role of women in politics has changed from 1990 (when the Islah Party defined the purpose and duties of the “women’s sector” as developmental, cultural or educational) to 2010 (when women play an increasing role in the political spectrum of Yemen).
- A report by the Asian Development Bank (2010) concludes that Nepal has taken progressive steps toward greater gender equality throughout the past five decades. Important legal amendments have been made to strengthen women’s rights in key areas such as citizenship, inheritance, anti-trafficking, and women’s political representation. However, achieving gender equality and transforming Nepal into a more inclusive democracy will also require changes in public attitudes. Policy and program approaches that can contribute to removing these barriers include attention to identifying the excluded, the causes of their exclusion, and appropriate context-specific responses.
- Guinée (2014) explores the ways in which education is being used as empowerment for women in Nepal. Guinée interviewed 23 educated Nepalese women from low-socioeconomic households and examines if and how their education has empowered them in their society. It was found that the sense of empowerment women felt did not come directly from their education but rather from the job and income earned after receiving their education. The article also explored how marriage influences feelings of empowerment for Nepalese women. Guinée argued that an educated woman is more likely than an uneducated woman to expect respect and equality from their spouse.
- Ranabhat et al. (2015) focus on women’s health in Nepal and specifically how women’s health is affected by the Chhaupadi culture. The Chhaupadi culture is prevalent throughout Nepal and part of the broader culture that says that women cannot live in their homes during their menstruation. Ranabhat et al. study how this culture affects women and whether or not this culture leads to health issues. The study concluded that this culture does in fact contribute to health issues such as infections, as women are not able to maintain proper hygiene during their menstruation.
- Badahdah (2016) describes how women in Yemen are systematically oppressed by conservative Islamic laws and by the patriarchal society. Badahdah specifically focuses on restrictions placed on women that are living with HIV. The study revealed that the majority of people in Yemen are uninformed about HIV and living with HIV, thus, view people with the disease negatively. Badahdah suggests that the government in Yemen create programs to educate individuals about HIV and establish basic rights for those living with HIV.

III. Historical and Empirical Background

Nepal, officially known as the Federal Democratic Republic of Nepal, is located in South Asia, landlocked between India and China, with a total land area of 143 thousand square miles. After a two-year independence war, Nepal gained independence from England in 1816. The country continued to be ruled by monarchy until 1951, when a cabinet system was established. This system lasted until 1960 and was later re-established in 1990. In 1996, a Maoist uprising resulted in a decade-long civil war ending in 2008, when Nepal was officially declared a federal democratic republic. The current constitution was established in September of 2015. In 2015, Nepal had a population of 28.5 million.¹

Yemen, officially known as the Republic of Yemen, is located in Western Asia along the Arabian Peninsula, with a total land area of 528 thousand square miles. Yemen became independent from the Ottoman Empire in 1918, and was quickly divided into North and South Yemen by the British in order to protect Aden, the southern most port in Yemen. Marxist policy in Southern Yemen during the 1970s caused a mass exodus into Northern Yemen. The two territories were unified in 1990 and have remained so despite a brief civil war in 1994. The legal system, which was set in place via the adoption of a formal constitution in 1991, is a mix of Islamic law, Napoleonic law, English common law and customary law. However, Yemen has been in an ongoing civil conflict since 2014. In 2015, it had a population of 26.8 million.²

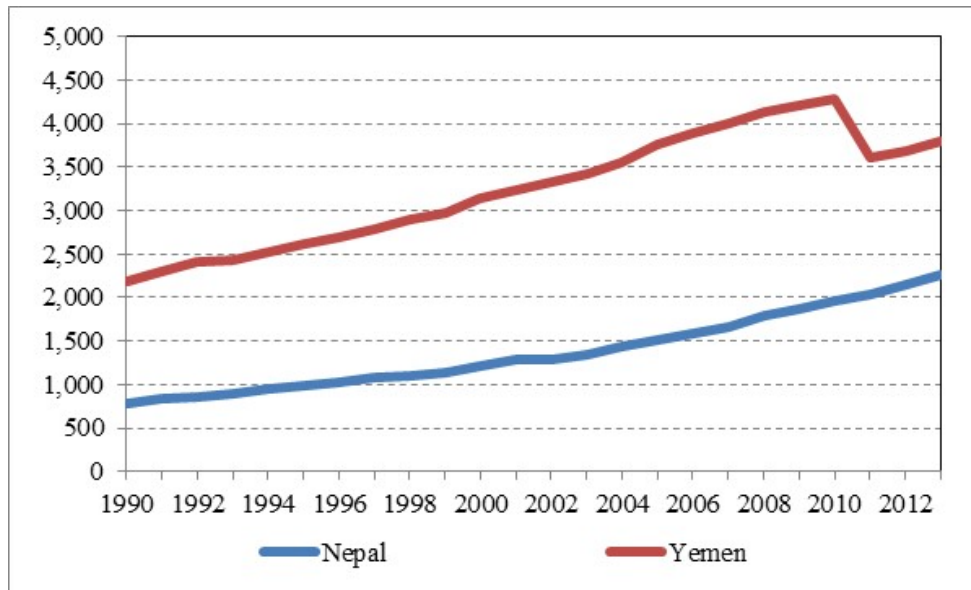
Figure 1 shows the gross domestic product (GDP) per capita, adjusted for purchasing power parity (PPP) for Nepal and Yemen from 1990 to 2013. In 1990, Nepal had a GDP per capita of \$774.59, while Yemen had a GDP per capita of \$2,192.43. From the beginning, Yemen has always had a much higher GDP per capita, and due to similar GDP per capita growth, Nepal has continued to lag behind Yemen. However, after years of steady growth, Yemen's GDP dropped drastically from \$4,286 in 2010 to \$3,616 in 2011. Despite this drop, Yemen's GDP per capita has continued to grow positively since 2011. Nepal's GDP per capita has continued to grow steadily over the past 25 years.

Figure 2 shows the average life expectancy at birth in Nepal and Yemen from 1970-2015. While the two countries started with about the same life expectancy in 1970 (of 40.5 years and 41.1 years, respectively for Nepal and Yemen), Yemen's life expectancy grew faster than that of Nepal during the 1970s and early 1980s. Hence, by 1985, Yemen's life expectancy was 4.9 years higher than that of Nepal. However, since the late 1980s, Nepal's life expectancy grew much faster than that of Yemen. Thus, Nepal overtook Yemen in 1997, and by 2015, Nepal's life expectancy surpassed that of Yemen by 5.9 years.

¹ This paragraph is based on information provided in the CIA World Factbook section on Nepal, available at: <https://www.cia.gov/library/publications/the-world-factbook/geos/np.html>, and World Bank (2016).

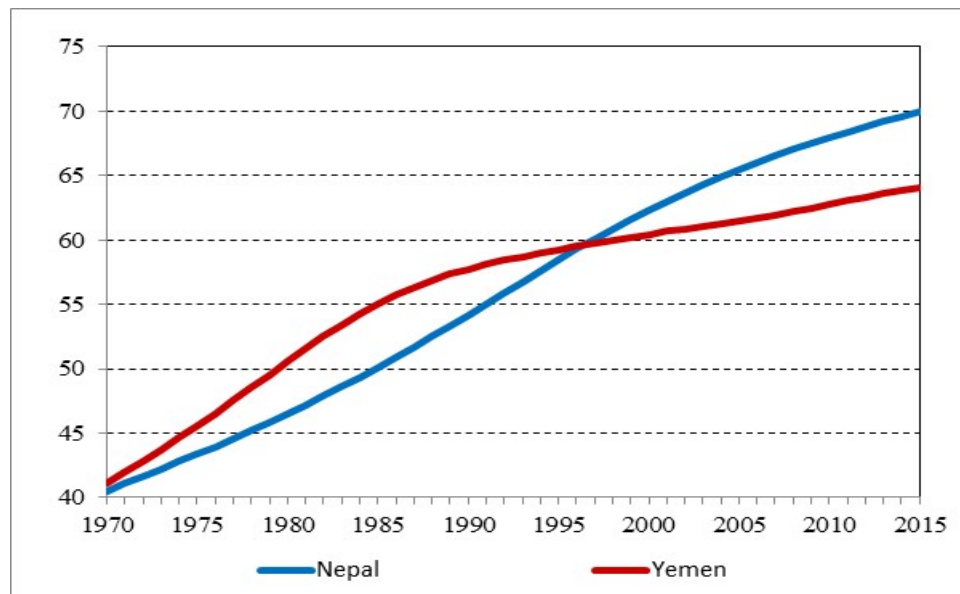
² This paragraph is based on information provided in the CIA World Factbook; section on Yemen; available at: <https://www.cia.gov/library/publications/the-worldfactbook/geos/ym.html>, and World Bank (2016).

Figure 1: Gross Domestic Product per capita (PPP-adjusted) 1990-2013



Source: Created by author based on World Bank (2016).

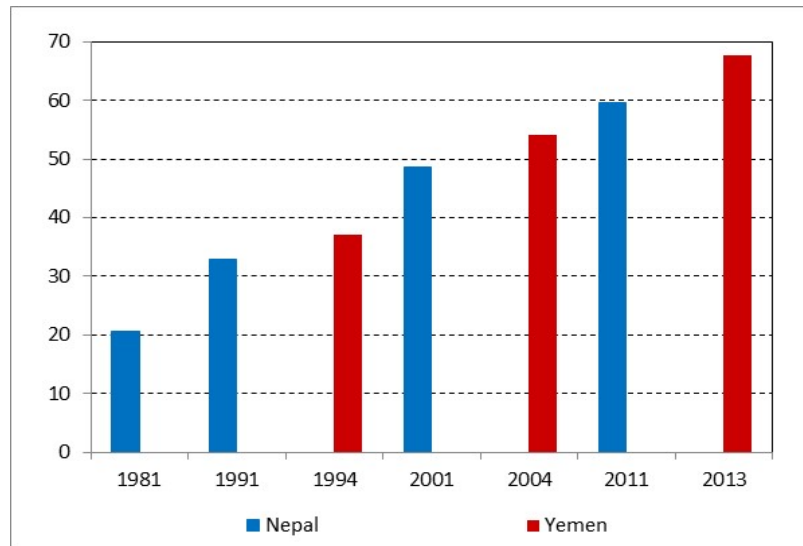
Figure 2: Average Life Expectancy at Birth (years), 1970-2015



Source: Created by author based on World Bank (2016).

Despite considerable data gaps, Figure 3 shows that the adult literacy rates of the two countries have overall been similar. Both countries have made considerable progress, nearly doubling adult literacy rates from the early 1990s to the early 2010s.

Figure 3: Adult Literacy Rate (15+ years, both sexes, percent); all available data



Source: Created by author based on World Bank (2016).

IV. Discussion

There are many factors that contribute to gender inequality in Nepal and Yemen. This section addresses four key factors: (1) marriage and domestic violence, (2) religious beliefs and laws that influence perceptions and attitudes about sexual behavior and the access to modern contraceptives, (3) lack of healthcare, and (4) lack of education. Some of these factors play a larger role than others, some have drastically improved over the years, yet others continue to plague their respective countries.

IV.1. Marriage and Domestic Violence

Marriage is one of the most prevalent ways in which men assert their dominance over women, especially in the least developed countries (LDCs) like Nepal and Yemen, where child marriages are common. Women typically have little rights within a marriage and must obey their husbands. Women in LDCs also face high levels of domestic violence.

IV.1.a. Child Marriage

Many government laws in Yemen are based on Shari'ah law, the religious laws of the Islamic faith.³ Based on Shari'ah law, the minimum age for marriage of 15 years was repealed in 1999. Subsequent attempts to set a minimum age have been rejected by the Yemeni government. Nepal, on the other hand, has a minimum marriage age of 20 years. Despite this minimum age, Nepal has the third highest incidence of child marriage in South Asia.⁴ The highest rates of child marriage in Nepal occur amongst those in the Dalit caste, which is the lowest and most disadvantaged caste,

³ See Tahirih Justice Center (2017).

⁴ Based on data provided by UNICEF (2016); both Bangladesh and India have higher child marriage rates.

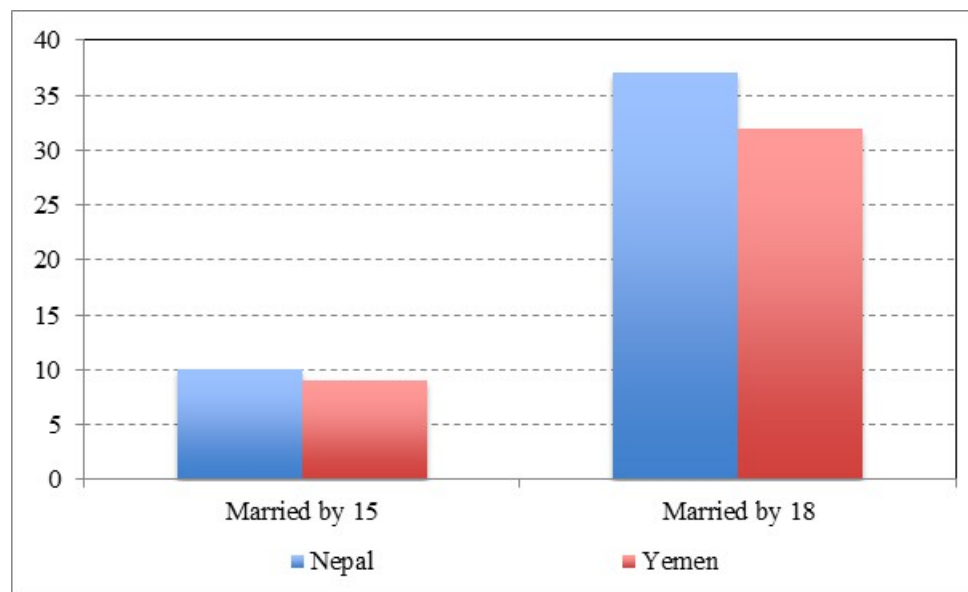
where child marriage rates are as high as 87 percent of women being married before the age of 19 in the Terai region of Nepal.⁵

As Figure 4 shows, Nepal and Yemen have overall similar rates of child marriage despite differences in formal laws regarding the minimum marriage age. The graph shows the percentage of women, aged 20-24 that were married by either 15 years or 18 years of age.

- In Nepal, based on a so-called Multiple Indicator Cluster Survey (MICS) of 2013, 10 percent of the women aged 20-24 were married by age 15, and 37 percent were married by 18.
- In Yemen, based on a Demographic and Health Survey (DHS) of 2013, 9 percent of the women aged 20-24 were married by age 15, and 32 percent were married by age 18.

Despite the careful collection of this data, many child marriages go unreported to authorities, and therefore, the data is likely an underestimate of the actual rate of child marriage in both countries.

Figure 4: Child Marriage Rates in 2013 (percent of women aged 20-24)



Source: Created by author based on data provided in UNICEF (2016).

According to a report by Human Rights Watch (2016), there are several reasons for the persistence of child marriages: poverty, lack of access to education, child labor, social pressures and harmful practices. In Yemen, poor families often feel forced into agreeing to allow their daughter to marry because of monetary incentives.⁶ In Nepal, attempts by the government to prevent child marriage have caused rates of “love marriages” to increase. Love marriages occur when young girls agree to marry in order to escape abusive situations at home and social pressures. While arranged child marriage rates are decreasing, love child marriage rates are increasing and thus little is being done to reduce child marriage in Nepal.⁷

⁵ See Human Rights Watch (2016); the Terai region is a lowland region in southern Nepal and northwestern India.

⁶ See Tahiri Justice Center (2017).

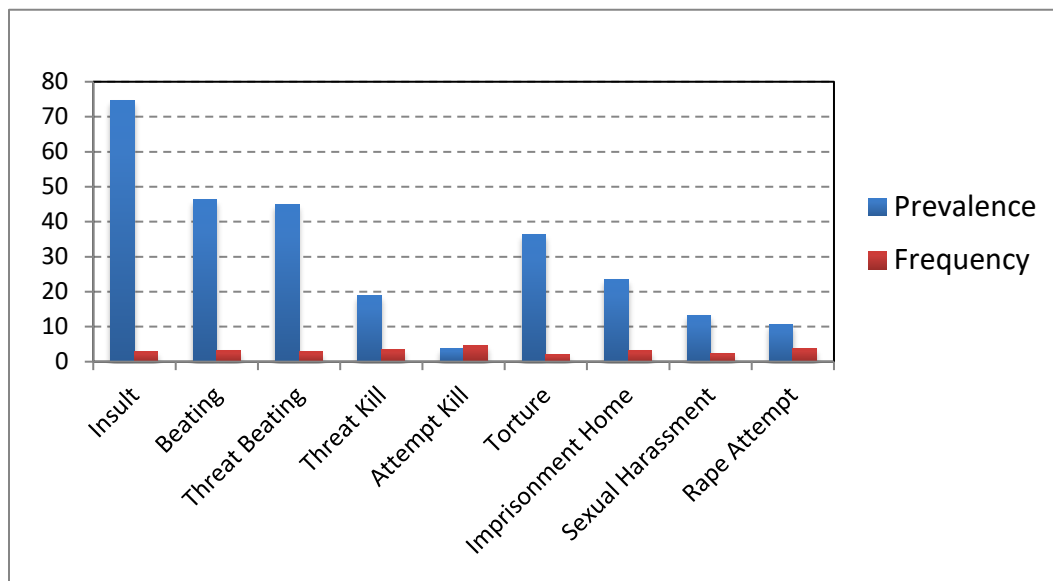
⁷ See Human Rights Watch (2016).

IV.2.b. Rights in Marriage and Domestic Violence

Due to societal structures in both countries, women are seen as second-class citizens in relation to men, and the rights of women in marriage reflect that standing. In Yemen, laws based on Sharia'ah law give women limited rights in marriage. "Article 40 of Yemen's Personal Status Law states that a woman must obey her husband in all matters, including not leaving home without his permission and keeping up with domestic chores."⁸

A report by Human Rights Watch (2016) sites a 2002 survey of 120 Yemenis women that found that more than 28 percent of the sample group had been ordered by their husbands to remain in their homes at some point in their marriage and that 74 percent of the sample group had been verbally abused by their husbands. The Personal Status Law has no stipulation for marital rape and therefore it is legal in Yemen. Another study cited by Human Rights Watch (2016, p. 11) "found that 59 percent of rural women and 71 percent of women living in urban areas said they were physically beaten by their husbands because of family problems."

Figure 5: Prevalence and Frequency of Domestic Violence in Yemen



Source: Created by author based on Ba-Obaid and Bijleveld (2002).

Figure 5 shows the results of a study by Mohamed Ba-Obaid and Catrien Bijleveld (2002), which examined domestic violence in Yemen. The figure outlines the prevalence and frequency of different types of abuse, prevalence in terms of overall percentage and frequency in terms of

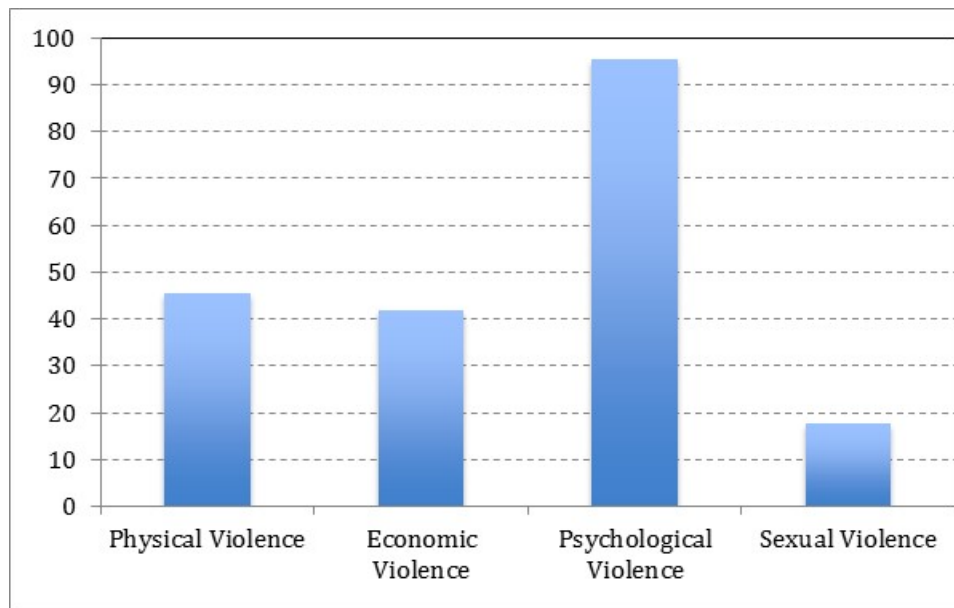
⁸ Human Rights Watch (2011), p. 9.

percentage of occurrence on a daily basis. The study also looked at the most frequent perpetrator of the abusive acts and found that person to be the husband, followed by a brother or the father.⁹

The Nepalese government has made several attempts to reduce domestic violence and provide more rights for women in a marriage. In 2009, the government passed the Domestic Violence Act that redefined domestic violence into broader terms of “any form of physical, mental, sexual, or economic harm perpetrated by one person on another with whom he or she has as a family relationship, including acts of reprimand or emotional harm.”¹⁰ Despite this Act and the Gender Equality Act, which raised the age of consent for marriage to 20 years, women still face oppression and violence in marriages. According to law, Nepalese women cannot divorce their husbands for marital rape. The husband, on the other hand, can divorce his wife simply on the grounds of having a sexually transmitted disease.¹¹

Figure 6 shows the results of a study by Paudel (2007) on domestic violence experienced by women in Nepal. In this study, physical violence is described as beating, slapping or kicking; economic violence as deprivation of resources; psychological violence as scolding and mental torture; and sexual violence as sexual abuse or forced sex.

Figure 6: Domestic Violence Experienced by Women in Nepal (total incidents among adolescent, youths and adults, percent)



Source: Created by author based on Paudel (2007).

Despite similar rates of violence against women in Nepal and Yemen, differences in Nepalese and Yemeni society and laws seem to have a profound impact on women’s perception of domestic violence. According to the World Bank (2016), 32.4 percent of women in Yemen believe that a

⁹ Ba-Obaid and Bijleveld (2002), p. 340.

¹⁰ Pandey (2016), p. 813.

¹¹ Asian Development Bank (2010).

husband is justified in beating his wife after refusing sex, while only 0.2 percent of women in Nepal believe in that justification. This difference in opinion can be linked to differences in laws regarding marital rights and societal standards. In Yemen, a woman can lose her right to divorce her husband if she leaves the house without his permission,¹² whereas in Nepal, the government has taken steps to reform marital laws and created laws to protect women.

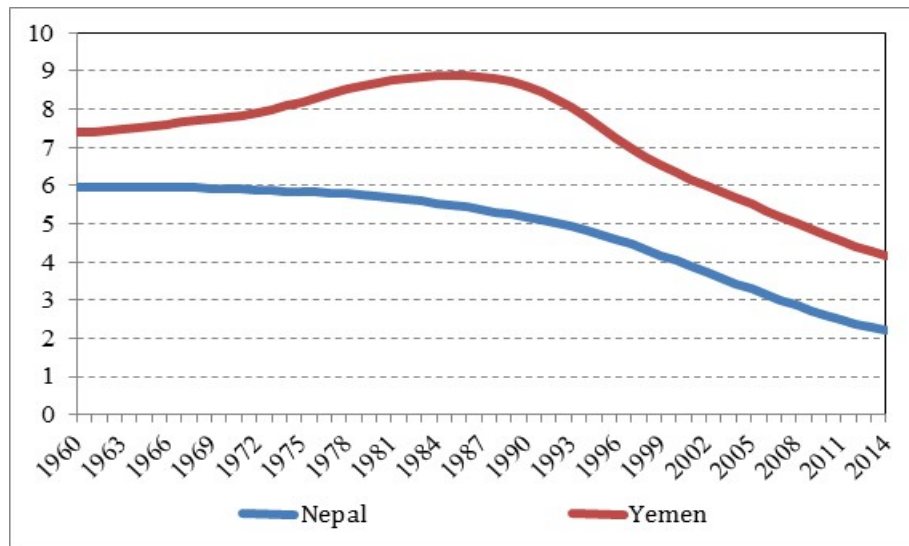
IV.2. Religious Beliefs and Laws

There are various religious beliefs and laws that influence perceptions and attitudes about sexual behavior in Nepal and Yemen. In Nepal, these attitudes come from Hindu and Buddhist traditions, in Yemen they come mostly from Shari’ah law.¹³ These beliefs and laws typically have a direct impact on fertility rates and access to contraceptives.

IV.2.a. Fertility Rates

Figure 7 shows the progression of the fertility rates in Nepal and Yemen from 1960 to 2014. Since 1960, Nepal’s fertility rate has continued to decrease from about six children per woman in 1960 to about two children per woman in 2014. On the other hand, Yemen’s fertility rate increased from about 7.5 children per woman in 1960 to its peak of close to nine children per woman in 1984, followed by a dramatic decrease. Today, the fertility rate in Yemen is about four children per woman.

Figure 7: Total Fertility Rate (births per woman)



Source: Created by author based on World Bank (2016).

Due to Yemen’s high fertility rate, Yemen has one of the fastest growing populations in the world. This high fertility rate is not only contributing to overpopulation but is also “detrimental to both maternal and infant health.”¹⁴

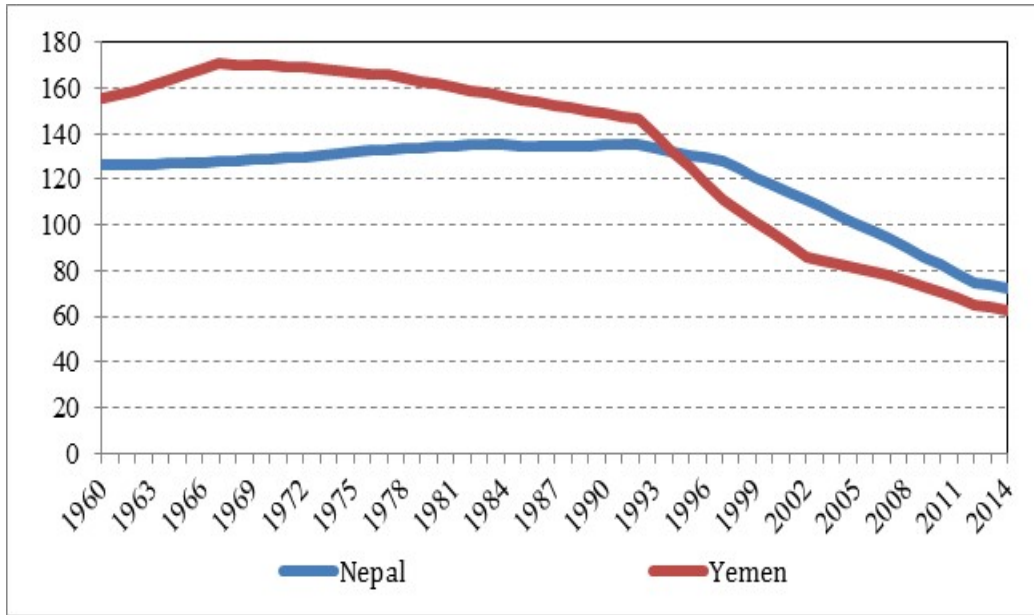
¹² Human Rights Watch (2011), p. 9.

¹³ Respectively for Nepal and Yemen, see Menger et al. (2015) and Human Rights Watch (2011).

¹⁴ Riniker (2012) p. 4.

Figure 8 displays the birth rates per 1,000 women, aged 15 years to 19 years from 1960 to 2014. Similar to the overall fertility rate, Yemen experienced an increase in most of the 1960s, followed by a moderate decline from 1968 to 1992, after which it declined rapidly, reaching an adolescent birth rate of 62 births per 1,000 woman. Nepal’s adolescent birth rate increased from 1960 until 1993, that is, much longer but far more moderately than in Yemen, after which it also decreased rapidly to reach 72.5 children per 1,000 women in 2014. These still high adolescent birth rates reflect the high child marriage rates shown in Figure 4 above.

Figure 8: Adolescent Birth Rates (births per 1,000 women ages 15-19)



Source: Created by author based on World Bank (2016).

IV.2.b. Access to Contraceptives

Lack of access to contraceptives, as well as inadequate education regarding the benefits and uses of contraceptives, continue to plague both Nepal and Yemen. Of the 40 percent of college-age men that “reported engaging in premarital sex ... only 57% of these [men] reported using a condom during first intercourse.”¹⁵ Menger et al. (2015) also found that the majority of Nepalese women have heard of common contraceptives but very few actually use contraceptives. Furthermore, most Nepalese women have never been to a gynecologist or have only been during pregnancy. This is partly due to the inability to pay for medical bills and the lack of education regarding reproductive health.

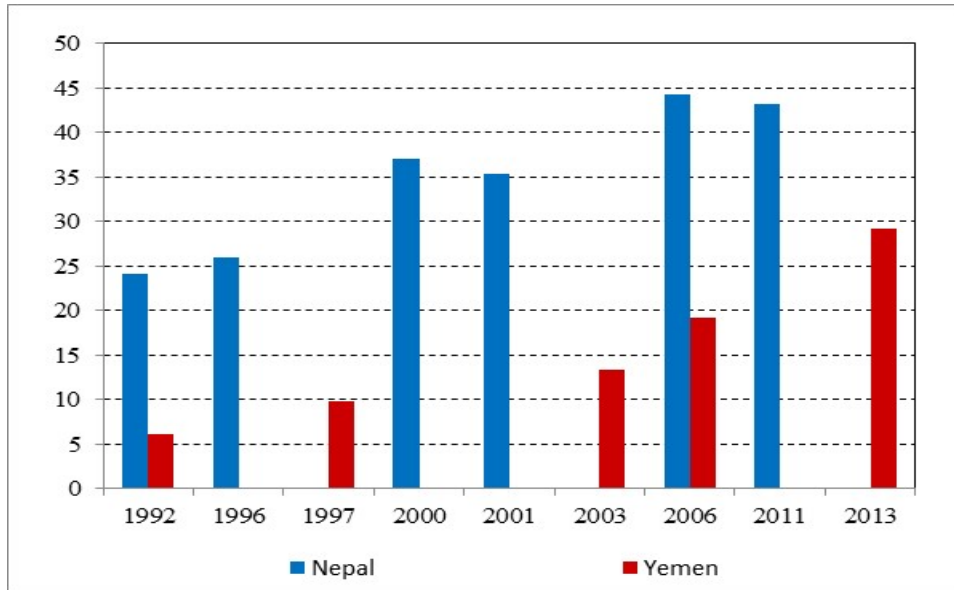
In Yemen, it is very rare for males and females to use contraceptives. However, according to Riniker (2012, p. 4), the percent of usage has dramatically increased from only 7 percent in the 1990s to 23 percent in 2003. Despite this increase, over three-quarters of the Yemini population did not have access to contraceptives or were uninformed about their uses in the early 2000s. Like in Nepal, the majority of Yemeni people, especially females, are not properly educated on

¹⁵ Menger et al. (2015), p. 360.

contraceptives and cannot afford to see a physician. A shortage of physicians and the lack of help from the corrupt government make accessing contraceptives even more difficult. Based on Riniker (2012), the most commonly used form of birth control is prolonged breast-feeding, which can delay the menstrual cycle.

Figure 9 provides all the data available on the prevalence (in percent) of modern contraceptives of women ages 15-49 years in Nepal and Yemen. It shows some progress over time in both countries, though the use of modern contraceptives is still low, especially in Yemen.

Figure 9: Prevalence of Modern Contraceptives (percent of women ages 15-49)



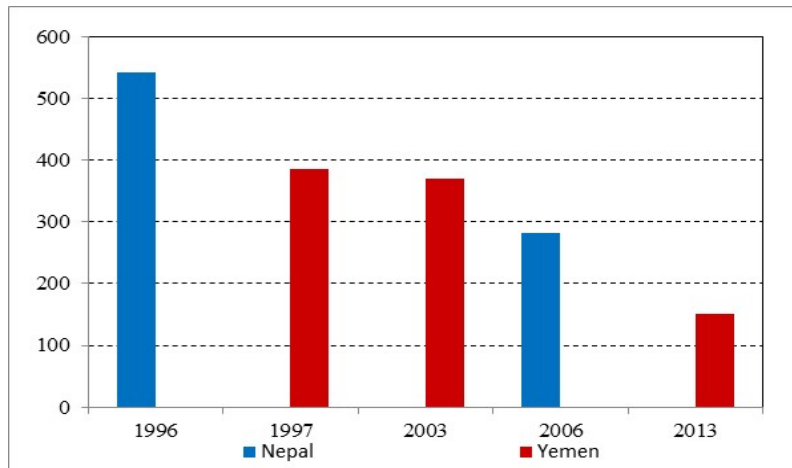
Source: Created by author based on World Bank (2016).

IV.3. Inadequate Health Care

As is reflected in declining, but still high maternal mortality rates shown in Figure 10, inadequate health care is another key problem for women in Nepal and Yemen, especially as the lack of contraceptives helps to spread sexually transmitted diseases (STDs). In Nepal, Hindu and Buddhist values limit “access to education, ability to control sexual relationships and acceptability in discussing sex and sexual health.”¹⁶ Menger et al. (2015) also come to the conclusion that over 60 percent of affected women are unaware of carrying STDs. Education about STDs and contraceptives is the primary way STD rates and the fertility rate will decrease.

¹⁶ Menger et al. (2015), p. 359.

Figure 10: Maternal Mortality Ratio (national estimate, per 100,000 live births)

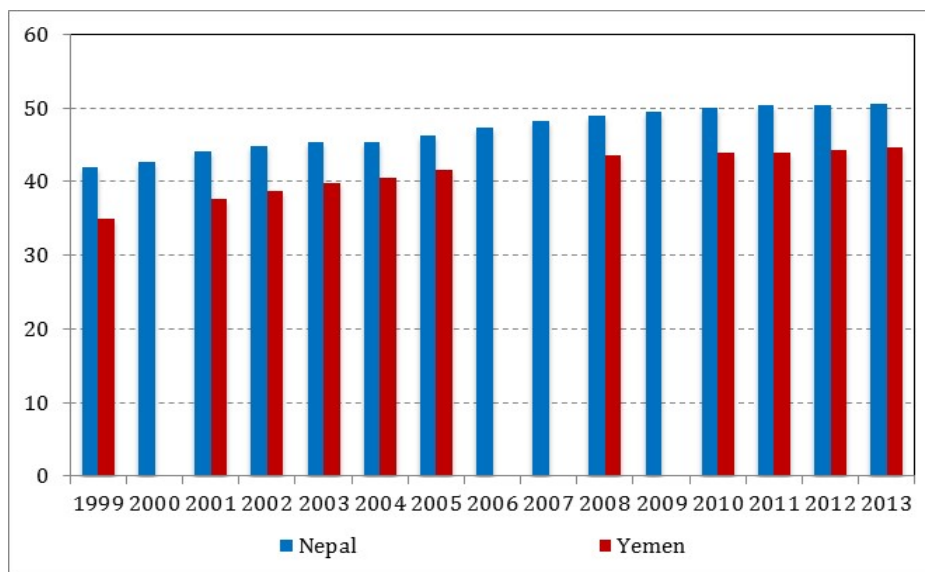


Source: Created by author based on World Bank (2016).

IV.4. Lack of Education

Education is the most influential way to change the lives of women in LDCs. Both child marriage and reproductive health can be positively influenced by the accessibility of education for young girls and women. Education alone has not been widely studied; rather, it is most often studied in terms of how education can empower women to seek a life outside of the home. In both Nepal and Yemen, education is something that very few girls, especially those who live in poverty, are able to obtain. Retention plays a big role in the lack of education because many girls are not able to continue attending school because they are to be married or have to work.

Figure 11: Primary Education, Pupils (percent of female)



Source: Created by author based on World Bank (2016).

Figure 11 shows that it has only been in recent years that girls make up close to 50 percent of the students in primary education in Nepal; Yemen has yet to reach that milestone. Most of the females that make up this percentage in Yemen come from relatively wealthier families, as it is most often the poorest of girls that do not receive an education.

V. Conclusion

The women of Nepal and Yemen are far from having equal rights as men. Despite progress in Nepal, in the case of Yemen, it is quite possible that women will never be equal to men as long as Shari'ah law is enforced. However, by creating equal access to education, rates of child marriages and domestic violence are likely to decrease. Creating access to health care and contraceptives, as well as informing the public on the realities of sexually transmitted diseases, will prevent discrimination based on reproductive health and improve the health of newborn children and their mothers.

Overall, the most effective way to transform the lives of women, not only in Nepal and Yemen, but in all developing countries more generally, is to educate them. Education provides women with a life outside of the home and gives them the power to make better-informed decisions. Though education alone cannot change the laws and beliefs of countries like Nepal and Yemen, by giving women an equal opportunity to succeed, prevailing attitudes about gender roles can be made more progressive and hence, will result in more equal rights in the future.

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