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**Impact of Women Organizations  
Access to Public Institutions and  
Officials on Policy Outputs in the  
Health Sector in Ghana and Liberia  
(2006 – 2018)**

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## Abstract

Among the major ways that Women organizations seek to influence policy outputs in relevant sectors are through access to public institutions and officials. Ghana and Liberia despite having a large number of women organizations that are actively involved in the political and policy processes are still experiencing major health challenges, such as the prevalence of chronic diseases as policy outputs showed mismatch of outputs to needs, low quality of services and significant rural health delivery deficit. The study examined the impact of women organisations access to public institutions and officials on policy outputs in the health sectors in Ghana and Liberia from 2006 – 2018. The study adopted convergent parallel design (a mixed method design). The population of the study was 92 registered women organisations in the two countries with a sample of 677 select-respondents using Taro Yamane formula. Validated questionnaire and interview guide were instruments of data collection. Linear regression was employed in the analysis of quantitative data while qualitative data were content analysed. The researchers found that women organisations access to public institutions and officials had significant effect on policy outputs in health sectors of Ghana and Liberia,  $F_{(2,677)}=3931.142$ , Adj.  $R^2=.921$ ,  $p<0.05$ . The study concluded that Women organizations access to public officials and institutions had significant impact in Liberia with formulation of maternal and child health policies, while it did not produce the same result in Ghana. Women organisations need to collaborate to be able to make better impact on policy outputs in the two countries.

**Keywords:** Access, health sectors, policy outputs, public institutions, women organisations

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## Introduction

Political participation of women can be measured in three different dimensions: their participation as voters, their participation as an elected representative and their participation in the actual decision making process (Shanker, nd,). Women's participation in decision-making is essential for women's interests to be incorporated into governance. It has been widely experienced that governance structures which do not provide for adequate participation of women, often suffer from state interventions which are neither inclusive nor democratic. Including women, especially in local governments, remains an essential step towards creating gender equal opportunities and gender sensitive policies. Since women have different needs and perspectives on social and political issues, it is important to involve women in governments to incorporate all the societal viewpoints in policy and decision-making processes. Women are actively involved in household and community work and hence well aware of real issues faced by common people. This gives them insight and perspective which can be instrumental in sustainable overall development.

Among the impediments to women political participation at the gladiatorial level is lack of adequate funds to prosecute electoral campaigns which are highly monetized across African countries including Ghana and Liberia. Most of the women that desire to serve in public office, face the challenges of limited funds to prosecute political campaigns. Some of them may also not be able to muster the kind of energy given to succeed in the highly intense electioneering process (Gatzinski, 2018).

Other identified impediments to women political participation are the traditional, cultural and sometimes religious roles that are ascribed to women in most African societies, including Ghana and Liberia (Gatzinski 2018; Agbalajobi 2010). Traditionally, women across Africa are restricted to the role of caretakers or caregivers and homemakers, which implies that their involvement in the public sphere becomes the exception instead of the norm. In Ghana and Liberia, politics is regarded as male dominated while the traditional roles of women are apolitical in nature being confined to the "traditional private sphere."

In Ghana, women are often underrepresented in the leadership of the major political platform. As a result there is a big gender gap in political participation in terms of election into decision making roles even though a large number of women vote in elections. According to Ichino and Nathan (2018), there are social norms against women's participation that are important predictors of women's participation such that women in more conservative households that believe that women should not be active in public sphere because of societal roles that make the public sphere the domain of the men, experience lower rates of participation in politics.

The major platform through which most women participate actively in politics and governance is the membership of the women organizations. Women organizations seek to achieve increased involvement of women on equal terms with men at all levels of decision making. This is regarded as key to the achievement of equality and development, peace as well as democracy. The activities of women organizations also encourage incorporation of women's perspectives and experiences into decision making that could enhance satisfactory solutions not only for the women but the society at large (Kassa, 2015). Beyond mobilizing their members to vote during general elections, the women organizations also utilize such mechanisms as access to public officials and institutions, agenda setting, and accountability measures to influence policy output in the pro-women sectors.

Women organizations access refers to the ability of women to enter the state, both in the electoral arena as well as the policy arena. Access can be attained through a variety of means. In the electoral arena, strategies include the use of quotas, reserved seats, party influence and global norm-setting through multinational agreements (such as the Southern Africa Development Community (SADC) Protocol on Gender and Development). In the policy arena, governments may invite women's participation; women's movements may challenge policies that discriminate against women in consultative processes and most commonly in Africa, special mechanisms collectively known as national gender machineries can offer institutionalized access to policy making processes. In the parliamentary

arena, access can range from the ability to make submissions to government on upcoming legislation, attending public hearings on legislation, to one on one discussion with members of parliament. Access is also the beginning of a process of keeping government accountable for its actions toward a constituency of women.

The extent to which women can obtain political access is largely influenced by a society's political culture, cultural attitudes, identity politics as well as the economic barriers that accompany gender roles. The nature of the political system (whether it is democratic, authoritarian or a dictatorship) impacts the number of and contestation between parties. The electoral system will determine how, and how many, women get into parliament. Formal commitments to equal participation may not translate into more seats in parliament. In situations of nation building, contestations between the interests of including women and acknowledging ethnic particularities play a role in the outcomes of representation (Agbalajobi, 2010, p. 77). For these reasons, quotas have been proposed as a mechanism for breaking through entrenched barriers to women's participation. In the policy arena, National Gender Machineries are important structures that can support women in government and provide access to the structures in which the key priorities of governments are set. However, their effectiveness in terms of access depends on the extent to which they are allowed to participate in Cabinet (for example) as full members.

Policy output is composed on three levels of abstraction: the goals of policies, the instruments used to achieve these goals, and the settings in which the policies are applied (Howlett&Cashore, 2009). Although governments are always faced with various options, the goals of the policy must target the needs of the citizenry who elected the government, as it is believed that government exists to serve the people, which is the whole essence of democracy (Odedina & Nwogwugwu 2020). The implication is that policy output would be evaluated based on the way it impacted the citizens. A policy instrument, on their part, are described as "building blocks" or means to transfer the rather abstract principles and rules set out by policies into concrete and substantive action (May, 2003, p. 225) and

are, therefore, located at the center of the taxonomy (“mechanisms”). Each policy instrument comprises a wide range of intensity measures, such as objectives, the tools to reach these objectives, benefits and burdens affecting the target populations, and rationales legitimizing the implementation structures (Bobrow, 2006; Schneider & Sidney, 2009).

Albrecht and Arts (2005) suggest that policy output is characterized by two basic elements, namely “the launching of policies and measures (PAMs) as well as the organization and mobilization of resources to execute these” (p. 888). The political actions of launching the policies and the mobilization of resources in ensuring effective implementation of the policies are encompassed in the policy output. Knill et al. (2012) argue that to analyse the policy output in any given context, there is a need to examine the “density” and “intensity,” of the policy. By this the authors mean an interrogation of the number of policy instruments that are utilized in the specific policy being analysed.

Scholars propose that analysing policy output through the examination of the policy instruments is vital in undertaking comparative studies of policy output. This would involve a focus on policy density, e.g., by counting policies related to specific regulatory problems or types of policy instruments (Jahn & Kuitto, 2011; Knill, Debus, & Heichel, 2010; Albrecht & Arts, 2005). However, in the words of Grant and Nathan (2008) “simply counting (policy instruments) without accounting for their content is likely to produce measurement error” (p. 306).

Although Ghana is reputed to be the most consolidated democracy in West Africa, it had made marginal improvement in women representation in national parliament which could have effect on the level of attention that is given to some pro-women sectors such as health. By 2016, there was an increase in the number of female Parliamentarians from 10% (2012) to 13% (2016) (i.e. from 29 to 35), which is still below the 30% threshold set by the United Nations for effective representation in decision making (Munemo, 2017). The level of women involvement is far below that of high-flying countries in Africa, such as Rwanda and South Africa. In the case of Liberia, the twelve-year rule of the first female President in Africa

Ellen Johnson-SirLeaf, may not translate to drastic improvement in policy outputs in the health sector. In spite of the formulation and implementation of the National Health Policy 2007 to 2011, major health challenges remain, including the prevalence of chronic diseases as policy outputs showed mismatch of outputs to needs, low quality of services and worker in competencies, as well as a significant rural health delivery gap (Lee, Kruse, Panjabi, Massaquoi, Chan and Gwenigale (2011).

The study therefore, examined the impact of women organisations access to public institutions and officials on policy outputs in the health sectors of Ghana and Liberia from 2006 to 2018. The remaining parts of the study are Women and public policy, methodology, findings and discussion, conclusion and recommendations.

### **Women and Public Policy**

Feminist perspectives to policy studies have grown over the last three decades emerging as a sub-field of study (Lombardo, Meier and Verloo 2013; Orloff and Palier 2009; Mazur and Pollack 2009; Mazur 2002; Hawkesworth 1994). Given that there is absence of a corpus of feminist theory on policy, the study brings together some of the feminist writings theorising policy, with a few to contributing a comprehensive feminist theoretical reflection on policy (Lombardo and Meir, 2018, p. 611). The section is not exhaustive in terms of covering the entire gamut of feminist literature on policy, rather it reviews only literature that are helpful in arriving at a feminist theoretical position on policy studies. There is effort to highlight insights that feminist theorisation adds to the study of public policy, the new conceptualisations and framings that feminist scholars have made that is different from those of mainstream policy studies, the research questions they have raised and how these help to advance feminist theory on policy.

Feminist scholars have contributed in different ways to expanding the notion of what is public and what therefore, are important policy issues. The nature of the (policy) issues on which they have focused – dealing with violence, care, or the body – has allowed feminist thinking to scrutinize

policies through gender and intersectional lenses that illuminate biases in existing policies and unequal relations between women and men (Lombardo and Meir, 2018, p. 610).

This sub-field began with feminist activists and scholars challenging lack of attention to gender in policymaking, and politicized the absence of women from policy making. These activists and scholars also drew attention to the complex ways gender structured the operation of various policy fields (Lombardo, Meier and Verloo, 2013). Scholars in this school of thought come from various disciplines, including; anthropology, economics, geography, political science and public administration with the common interest of studying “the process and content of policy and policy making, the institutions and actors involved, and the challenges at stake in order to further “gender+ equality,” a concept that “situates gender always in relation to other axes of inequality” (Lombardo and Meier 2018). Feminists’ scholars that have theorized on policy have different foci which range from emphasising the concerns, needs, and position of women to the adoption of gender as an analytical category that investigates how power permeates socially constructed relations and institutions, to discursive and intersectional approaches that go beyond gender altogether (Lombardo and Meier, 2018).

A major area of contribution in policy studies is broadening the notion of what is public and what could then be categorised as important policy issues. Feminist scholars by challenging claims of policy neutrality and universality, pose challenges to public/private dichotomy on which policies have been traditionally biased (Okin 1991; Pateman 1983). By shoring up a division between the public and private spheres and allocating the public domain to men, while restricting women to the private sphere, public policies not only neglect issues considered private, but circumscribe the equal citizenship of women. In a now classic debate, feminist scholars have demonstrated that the two spheres are deeply interrelated with each supporting and maintaining the other. According to Mazur (2002), it is feminist struggles that led to expanding the scope of what is considered as political and emergence of new policy areas such as; violence against



women, reproductive rights, the sharing of care work between the sexes, as well as equal work and equal political representation. The globally recognized 35% quota for female membership of national legislative assemblies is product of the equal political representation by women although, majority of the countries of the world (including Ghana and Liberia) are very far from attaining the target.

As a result of the primary role that government plays in policy making, mainstream policy scholars have emphasized institutions, as they study the varying roles of the legislatures, executives and judiciary in the policy process (Eneanya 2015; Sambo 2008; Parsons 1995). Recently, some of these scholars have adopted the neo-institutionalist approach with emphasis on rules, routines, and cultures, as key factors in the making of policies (March and Olsen 1989, 1984). The assumptions of this framework is that “the policy making process and the actors involved in it, as well as the actual output, are shaped and constrained by existing institutions, which operate according to powerful conventions in specific historical contexts, deploying long-established routine” (Lombardo and Meier 2018).

Feminist theorists have gone beyond the propositions of mainstream policy scholars to develop institutionalist studies that have deepened the analysis of power in formal and informal policy institutions, showing an interest not merely in analysing and describing how institutions work, but also critically evaluating their inadequacies from the standpoint of equal citizenship (Krook and Mackay 2011). Lombardo and Meier (2018) write that “attuned to the role of institutions in cementing gendered power relations that disadvantage women, feminist institutionalism conceives of institutions as objects to study and challenge, as battlegrounds over gendered norms and power relations”.

Another area of interest to feminist policy studies is the view of public policy as a social construction in relation to issue definition and agenda setting, usually regarded as the constructivist model of policy studies. Constructivist models examine how social meanings enable and constrain policy making through debates in which actors and institutions structure

arguments intended to persuade others in the hope of achieving a shared understanding of problems to be addressed (Lombardo and Meier 2018).

## **Methodology**

The study adopted convergent parallel design (a mixed method approach), involving the combination of quantitative and qualitative methods. Creswell (2003) explains that using mixed-methods “provides a more complete understanding of a research problem than either approach alone” (p. 32). In this type of design, the two methods are weighed equally, data are analysed independently, while the results are interpreted together (Cresswell and Pablo-Clark, 2011). Women organizations were adopted as unit of analysis for measuring women political participation which facilitates women representation in the two select-countries. Policy outputs were restricted to education, health, social-welfare and women empowerment sectors. The study also adopted the comparative method in comparing the policies supported by female legislators and those supported by their male counterparts in the two countries.

The population of the study was 92 registered women organizations in Ghana (45) and Liberia (47). The women organizations have a total membership of 37,776. Taro Yamane (1967) formula was used to set the sample size at 677. Multi-stage sampling technique was used to select the respondents from eight cities in the two countries: Accra, Kumasi, Ho and Obuasi from Ghana; and Monrovia, Bong, Grand Cape Mount and Fish Town from Liberia. The instruments of data collection were questionnaire and interview guide. Quantitative data were analysed using linear regression, while narrative interpretative approach was employed in analysis of qualitative data.

## **Findings and Discussions**

$H_0$ : women organizations access to public institutions and officials has no significant effect on policy outputs in the health sector in Ghana.

**Table 1:** Effect of women organizations access to public institutions and officials on policy outputs in the health sector in Ghana

Variable	Coefficient	Std. Error	t- Statistics	Prob.
(Constant)	1.205	.888	1.358	.175
Women organizations access to public institutions	.112	.204	.550	.582
Women organizations access to public officials	4.088	.100	41.002	.000
R-Square	.810			
Adjusted R-Square	.809			
F-statistics	845.000			
Prob. (F-statistics)	.000			

Dependent Variable: Health sector  
Source: SPSS Output (2019)

Table 1 reveals a multiple regression result on Women organizations access to public institutions and officials effect on policy outputs in the health sector in Ghana. Looking at the result, it shows that Women organizations access to public institutions (coefficient= .112,  $t = .550$ ,  $p = .582$ ) has no significant influence on policy outputs in the health sector in Ghana, while Women organizations access to public officials (coefficient= 4.088,  $t= 41.002$ ,  $p = 0.00$ ) have significant positive effect on policy outputs in the health sector in Ghana, the t-statistics revealed that only Women organizations access to public officials parameter estimates is individually significant. This implies that an improvement on the Women organizations access to public officials will bring about a corresponding increase on policy outputs in the health sector in Ghana, other things being equal. The Adjusted R- Square of 0.809 reveals the explanatory power of Women organizations access to public officials on the policy outputs in the health

sector, the result shows that 80.9% variation on policy outputs in the health sector is explained by Women organizations access to public officials. The F-statistic reveals the combined significant influence of all the independent variables on the dependent variable. Hence, from the result, it shows that the parameter of the general model is significant at 0.000 which is less than 0.05 level of significant. This means that the parameters estimates in a whole are statistically significant in explaining policy outputs in the health sector. Hence, the null hypothesis is rejected.

$H_0$ : women organizations access to public institutions and officials has no significant effect on policy outputs in the health sector in Liberia.

**Table 2:** Effect of women organizations access to public institutions and officials on policy outputs in the health sector in Liberia

<b>Variable</b>	<b>Coefficient</b>	<b>Std. Error</b>	<b>t- Statistics</b>	<b>Prob.</b>
(Constant)	-1.369	.845	-1.621	.106
Women organizations access to public institutions	-.529	.161	-3.277	.001
Women organizations access to public officials	5.788	.099	58.702	.000
R-Square	.927			
Adjusted R-Square	.926			
F-statistics	1734.303			
Prob. (F-statistics)	.000			

Dependent Variable: Health sector

Source: SPSS Output (2019)

Table 2 reveals a multiple regression result on Women organizations access to public institutions and officials effect on policy outputs in the health sector in Liberia. Looking at the result, it shows that Women organizations access to public institutions (coefficient=0.529,  $t= 3.277$ , prob. =.001) and Women organizations access to public officials (coefficient= 5.788,  $t= 58.702$ , prob. =0.000) have significant positive effect on policy outputs in the health sector in Liberia; the t-statistics revealed that the individual parameter estimates are significant. This implies that an improvement on the Women organizations access to public institutions and officials will bring about a corresponding increase on policy outputs in the health sector in Liberia, other things being equal. The Adjusted R- Square of 0.926 reveals the explanatory power of Women organizations access to public institutions and officials on policy outputs in the health sector, the result shows that 92.6% variation on policy outputs in the health sector is explained by Women organizations access to public institutions and officials. The F-statistic reveals the combined significant influence of all the independent variables on the dependent variable. Hence, from the result, it shows that the parameter of the general model is significant at 0.000 which is less than 0.05 level of significant. This means that the parameters estimates in a whole are statistically significant in explaining policy outputs in the health sector. Hence, the null hypothesis is rejected.

Combined result for both countries (Ghana and Liberia)

$H_0$ : women organizations access to public institutions and officials has no significant effect on policy outputs in the health sector in Ghana and Liberia.

**Table 3:** Effect of women organizations access to public institutions and officials on policy outputs in the health sector in Ghana and Liberia

Variable	Coefficient	Std. Error	t- Statistics	Prob.
(Constant)	-.570	.479	18.950	.000
Women organizations access to public institutions	4.557	.058	5.268	.000
Women organizations access to public officials	1.307	.146	8.952	.000
R-Square	.921			
Adjusted R-Square	.921			
F-statistics	3931.142			
Prob. (F-statistics)	.000			

Dependent Variable: Health sector

Source: SPSS Output (2019)

Table 3 reveals a multiple regression result on Women organizations access to public institutions and officials’ effect on policy outputs in the health sector in Ghana and Liberia. Looking at the result, it shows that Women organizations access to public institutions (coefficient= 4.557, t= 5.268, prob. =0.000) and Women organizations access to public officials (coefficient= 1.307, t= 8.952, prob. =0.000) have significant positive effect on policy outputs in the health sector in Ghana and Liberia; the t-statistics revealed that the individual parameter estimates are significant. This implies that an improvement on the Women organizations access to public institutions and officials will bring about a corresponding increase on policy outputs in the

health sector in Ghana and Liberia, other things being equal. The Adjusted R-Square of 0.921 reveals the explanatory power of Women organizations access to public institutions and officials on the policy outputs in the health sector, the result shows that 91.2% variation on policy outputs in the health sector is explained by Women organizations access to public institutions and officials. The F-statistic reveals the combined significant influence of all the independent variables on the dependent variable. Hence, from the result, it shows that the parameter of the general model is significant at 0.000 which is less than 0.05 level of significant. This means that the parameters estimates in a whole are statistically significant in explaining policy outputs in the health sector. Hence, the null hypothesis is rejected.

Findings in Tables 1, 2 and 3 show that women organizations access to public institutions and Women organizations access to public officials have significant positive effects on policy outputs in the health sectors in Ghana and Liberia. The implication of this finding is that an increase in the level of women organizations access to public institutions and officials will bring about a corresponding increase on policy outputs in the health sector in Ghana and Liberia, other things being equal. The findings are in agreement with earlier studies by Domingo, Holmes, O'Neil, T., Jones, Bird, Larson, Presler-Marshall, and Valters, (2015) as well as Walby (2005) and Jahan (1996) that greater women voice and access to public officials and institutions would result in positive change including change in social norms.

The findings equally agree with the writings of Laplante (2004), that most of the time, women played major role in making sure that the health and other aspects of the psycho-social well-being of people were considered. Such interventions formed major parts of social and political change. Majority of females played different key roles as actors of change in their communities, especially, as teachers of change (Kirk, 2007).

Women organizations access to public officials and institutions led to maternal and child health policies in Liberia, while it did not produce the same result in Ghana. The interviewees corroborated this finding from the

quantitative data as the female top civil servants from Ghana stated that the process of policy making was such that most of the time by the time the women organizations make their input, it does not meet up with their schedule or may not be in tandem with the intentions of the government. The interviewees from Liberia reported greater synergy between the women organizations and public officials especially regarding health of women and girls, with the gender ministry collaborating with women organizations that are active in the health sector, alongside the efforts of the ministry of health. Among the area of focus in the health sector is putting an end to female genital mutilation (FGM), which in spite of posing major risks to the health of girls, is still being practiced in several parts of the two countries. Some of the top female civil servants stated in interviews that the fact that there are many small women organizations doing the same thing hinders their effectiveness to influence policy outputs in the health sector. Bigger organizations would be able to muster greater capacity to influence policy outputs than many small organizations dissipating energy without meaningful outcome.

There was agreement between the quantitative data and the qualitative data, as the interviewees from Liberia were more forth-coming with the evidence of women organizations input having impact in the health sector, especially with the women organizations that focus on the health highlighting their programmes to promote health of the girl child. The officials of the women organizations from Liberia made reference to various activities that they carried out on women's health alongside the gender and health ministries in their country to justify their claim of enjoying very collaborative relationship with the ministries. The good relationship that the women organisations enjoyed with public institutions and officials may not be divorced from the fact that the country had a female President who was at the fore-front of pushing women agenda in the health as well as other sectors.



## Conclusion and Recommendations

Women organizations access to public officials and institutions had a positive impact in Liberia, resulting in policy outputs in the women's health sector; especially girl child health. However, the effect of women organizations access to public officials and institutions on health in Ghana was not as prominent as the Liberian case. Although FGM is still being practiced in several parts of the two countries, officials of women organizations in Liberia enjoyed greater collaboration with officials of the ministry of health and gender ministry regarding putting an end to FGM. The study recommended that women organizations need to form alliances that would make them stronger and better able to push through their policy agenda with the relevant public institutions and officials, as many small groups pursuing similar agenda seemed to dissipate energy and resources with minimal impact than would one big organization that possesses enormous resources and able to pull the right strings.

The two countries need to domesticate their affirmative action policies to ensure that more women are involved in governance and the policy process. This will ensure that there is greater collaboration between public institutions/officials and women organisations working on health issues. The governments of the two countries need to work with women organisations and community leaders to ensure that the practice of FGM is abolished in the two countries.

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