

Switching a light on before dawn and after dusk. "Click" And it gives light. This everyday action, which most people in the world take for granted, is new for women living in non-electrified villages in Africa. Being able to switch on a light has brought radical changes to their lives. An innovative partnership involving public, private sectors and civil society has not only brought light but also better health and status to the village women.

## Towards a Future where Women Shine in Society:

Light Switches to transform women's status and health



In West Mamprusi district of the Northern Region of Ghana, Amina Seidu lives in a village with no access to electricity. The turning point in her life came in 2014, when she received one of the solar lanterns distributed by PPAG to women in the village.

*"I was really excited when I turned on a light for the first time."*



Under the support of the Japan Trust Fund for HIV and reproductive health, a partnership between Government of Japan and IPPF, PPAG implemented a safe motherhood project in the West Mamprusi district in 2013-2015. This project promoted family planning, HIV, STI, antenatal, postnatal and immunisation services through clinics and outreach to improve the health status of women in reproductive age and ensure safe delivery. In addition to these services, the project also introduced income generating activities for women through a micro credit to enhance their financial independence and improve their low status which is a key driver of poor maternal health outcomes in Ghana.

Many of the areas where the project was implemented had no electricity. Some families used battery-operated torch lights but many others could not afford this. In the West Mamprusi district, wives and children live in small huts separately from males who reside in the main family house. Normally, the males had access to the battery operated torches while women and children lived in darkness. In cases where women had access to the torches, they still relied on their husbands to decide if and when to purchase replacement batteries.

In the project areas, the cultural practice is for a man to have several wives and it is not unusual for men to withdraw supporting wives if sex is refused. In this very patriarchal society women have a very low status and were exposed to high risks related to sex, pregnancy and childbirth.

### Maternal and Child Health Indicators in Ghana

Indicators	Northern Region	National Average
Total fertility rate (Adjusted, 2010)*	6.01 (Highest in Ghana)	4.57
Maternal mortality ratio (per 100,000 live births, 2010)*	531	485
Skilled attendance at birth (% 2014)**	36.4 (Lowest in Ghana)	73.7
Mortality rate of under five whose mothers are aged 15-19 (2010)*	226 (Highest in Ghana)	193
Proportion of illiterate women (over 11 years old, %, 2010)*	69.6 (Highest in Ghana)	31.5

During the Fifth Tokyo International Conference on African Development (TICAD V), held in May 2013, a solar lantern, produced by Panasonic Corporation was promoted as the answer to the lack of electricity in many African villages. In the same year, the Japanese government committed to prioritise in both domestic and international interventions initiatives that create "a society in which women shine". (\*2).

IPPF decided to increase the impact of the JTF project implemented by PPAG by introducing the solar lanterns. Using JTF funds, IPPF procured solar lanterns and used them to provide much needed light in its clinics as well as to complement the micro credit investment and create new business opportunities for 300 women. Training for these new business ventures was provided by PPAG.



Resources: \*Ghana Statistical Service, 2010 Population and Housing Census; National Analytical Report. Accra, Ghana: GSS, 2013. \*\*Ghana Statistical Service, Ghana Health Service and ICF International. Ghana Demographic and Health Survey 2014: Key indicators. Accra, Ghana: GSS GHS and ICF International, 2015.

## Synergy Programme Effects between Maternal and Child Health and Solar Lanterns/Micro Credit

Amina used both the capital and solar lantern to cultivate and sell groundnuts. Previously, she had to leave home early in the morning to the field using burning budled grass as a torch in order to avoid snake bites. She was always at risk of burning herself. Now with the solar lantern, she walks to work more safely. Moreover she no longer needs to leave work before dusk to prepare meals. At home, her children use the solar lantern to study while Amina cooks. In addition, Amina used the solar lantern to start a side business of cell-phone charging. Amina can earn eight Cedi (approximately two US dollars) if she manages to charge 4 cell-phones a day. She says: "This new income enabled me to buy more nutritious foods for my children."

Amina now decides how best to use the increased time, opportunity and income provided by the solar lantern. The excitement of switching the light on for the first time has developed her confidence and increased her happiness. Their income generating activities have been successful, enabling the women to save and pay back the micro-credit capital to PPAG. By the end of July 2016, two hundred and eleven women had fully repaid their micro credit loans.



## Public Private Civil Society Partnership in Ghana (April 2013–November 2015)

### Government (Government of Japan)



Japanese Prime Minister Abe declared his intention to create "a society in which women shine" at the UN in September 2013. Women's health is one of the priority areas.

The Government of Japan supports the efforts to strengthen the rights of women to obtain adequate information about reproductive health and make informed decisions.

"We commit to continue to prioritize the provision of health services for women and girls, including family planning services and to support efforts to enhance women's rights to make informed decisions about their health care and fertility."

G7 Guiding Principles for Capacity Building of Women and Girls, 2016

### Private sector (Panasonic Corporation) **Panasonic**

We strongly believe our solar lanterns can make a big impact in the areas of maternal health and education. IPPF is an important business partner for us. Maternal health (clinic) and education (school) are at the centre of community life. If we can prove that our product is useful for community people we can establish trust for our brand within the whole community.

IPPF's global work to improve maternal and child health has gained trust and a good reputation worldwide. We find our collaboration with IPPF very helpful as it gives us an access to its member associations' grass-root network which is useful for information collection and sales of our products. We would like to establish a way to balance our profit/growth and corporate social responsibility by developing products which fulfil local needs and dealing with recent competition over product price.

Mr Takayuki Hotta  
International Relations Group  
Panasonic Corporation

### Civil Society (IPPF)



The right intervention, however small it maybe, can make a big difference to improve the lives of women and their families. Our pilot project implemented in West Mampursi is a good example of putting Japan's policy for women's empowerment into practice. In order to enhance effectiveness of community based health interventions, IPPF will continue to link with Japan's ODA and private sector's technology.

Solar lanterns have only reached 60% of the women trained on income generating activities. Although the demand from the remaining 200 women for the lantern is great, it has been difficult to procure the same products for them due to the small scale of the order. It has also been challenging to mobilise funds for purchase and delivery of the product. We would like to develop a sustainable partnership with Japanese private sector to improve the health outcomes of the communities we serve, especially women and young people.

Saku Mapa  
IPPF Central Office

At night people bring their solar lanterns to an open area at the village centre. Every other week, community based service (CBS) agents trained by PPAG use the opportunity to provide villagers with information about family planning and facilitate discussion about the reasons for family planning, and the relation between family planning and women's health. After repeated discussions, an increasing number of women feel that the relation with their husbands has improved. Amina who has 6 children says, "As both my husband and I did not know about family planning, I gave birth to children one after another. But now we have new knowledge about family planning, it is easier to discuss with my husband. I would like to plan carefully in the future." The discussions also focus on changing the male attitudes to women and promotes the new initiatives focused on women's empowerment.

Mr Peter Dhakurah, PPAG's Programme Coordinator for the Northern Region, feels substantial changes are happening in the project focus villages. He says: "Many women and girls cannot access health services in rural areas due to poverty. There was a vicious circle between poverty, unsafe baby delivery and unsafe abortion, related side-effects or transmissions of communicable diseases and further poverty. The introduction of solar lanterns and micro credit in the project improved project effectiveness and transformed the vicious circle into a virtuous one.

Globally, two thirds of people living in extreme poverty are women. If women can be free from poverty, it will lead to increased consumption and positive social action. This will then result in growth and development at a macro level in society. Poor and vulnerable people need support to trigger this change. Even if the support is small, it can make a difference. This is one of the main lessons learnt from this pilot project in West Manpursi.

*Click.* Today there are women who switch on a light in the village in Africa. The light symbolises women's empowerment and their ability to shine, and heralds hope for the future. Japan's support and technological innovation have galvanised IPPF's community based health interventions for the women and community of West Mampursi.



#### [Notes]

\*1 IPPF Japan Trust Fund for HIV and Reproductive Health: JTF

JTF was established within IPPF in 2000 with the full support of the Government of Japan. IPPF manages JTF and implements various activities to promote integrated services of HIV and reproductive health.

\*2 The Government of Japan is committed to lead efforts that realize gender equality and the empowerment of women and girls to achieve SDGs. [http://www.mofa.go.jp/mofaj/gaiko/oda/about/doukou/page23\\_000779.html](http://www.mofa.go.jp/mofaj/gaiko/oda/about/doukou/page23_000779.html)

\*3 'Food Expenditures and Income in Rural Households in the Northern Region of Ghana (2012 AAEA)'

\*4 'Panasonic Solar Night Discussion' – night group discussion which PPAG's community based service agents organized for all villagers, or targeted groups of women, men and young people.

\*5 'Gender Equality Strategy 2008-2011 (UNDP)'

## What is IPPF ?

**The International Planned Parenthood Federation (IPPF) delivers sexual and reproductive health services that let people make their own choices. We fight for everyone to have the right to make those choices. We are local, through our members and volunteers, and global, through our network. We meet need, wherever it is, whoever requires it, for as long as they want it.**

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