

**THE ADVERSE EFFECTS OF INTERNATIONAL
MONETARY FUND PROGRAMS ON THE
HEALTH AND EDUCATION WORKFORCE**

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Decades of underinvestment in public sectors and in teachers and health workers have adversely affected the health and educational outcomes of women. This is partly explained by a general lack of resources. However, the amount a country can spend on social sectors, including teachers and health workers, is also determined by its macroeconomic framework, which is set in agreement with the International Monetary Fund. There is now ample evidence of how IMF-imposed wage ceilings have constrained the ability of governments to hire adequate numbers of trained professionals and increase investment in social sectors. Though the IMF has recently removed wage ceilings from its basket of conditions, little change has taken place to ensure that women are better supported by macroeconomic policies or, at the least, are less adversely affected. Thus far, the IMF's neoliberal policies have either ignored gender concerns or instrumentalized equity, health, and education to support economic development. Unless macroeconomic policies are more flexible and deliberately take into account the different needs of women and men, social outcomes will continue to be poor and inequitable. Governments must pursue alternative, feminist policies that put the goals of social equity at the center of macroeconomic policy. These policies can facilitate increased investment in education and health care, which are vital measures for achieving gender equality and providing both women and men with the skills and training needed to soften the impact of the current economic crisis.

IMPORTANCE OF INVESTING IN HEALTH AND EDUCATION

Governments are obligated to respect, protect, and fulfill the economic, social, and cultural rights of all citizens. Women and men must enjoy equal and free access to rights such as high-quality basic education and health care. These skills and capacities can enable them to lead healthier lives, access other rights, and secure good employment, thereby contributing to strengthening and stimulating national economies.

Ensuring the progressive realization of these rights requires appropriate legislative, administrative, budgetary, and judicial initiatives. Many of these measures are determined by national processes and laws, while some are influenced by international institutions. The links between the international system and the state's ability to respect, protect, and fulfill these rights are important to understand, particularly because many citizens, especially women, continue to be denied such rights.

A good illustration of the influence of macroeconomic frameworks and, specifically, the role of the International Monetary Fund (IMF) in education and health sectors is the policy of wage bill ceilings. All public sector workers, including teachers and health workers, are hired through the wage bill. A ceiling is often placed to limit excessive spending. The main concerns about these ceilings are how the limits are set, and by whom; whether adequate planning takes place to project the numbers needed; and whether the potential consequences of the ceilings for access to and quality of services, especially for women, are considered.

This article draws on country evidence to show how the IMF's wage bill ceiling policy has led to capping of the numbers of teachers and health care workers that can be hired, leading to significant shortages. Though the policy has since been reversed, the consequences of limiting the public sector workforce are still felt today. Overall, countries are still unable to hire sufficient numbers of teachers and health workers. Annual assessments by UNESCO's Global Monitoring Report for Education for All show that most low-income countries (LICs) sustain pupil-teacher ratios of over 60:1, at times reaching more than 100 children in a classroom (1). This is far more than the recommended ratio of 40:1. More students than this per teacher would jeopardize the use of child-centered and participatory approaches and, eventually, learning outcomes, especially for girls.

Research shows how chronic underinvestment in these sectors, particularly in teachers and health workers (partly due to IMF structural adjustment policies), has consistently led to lower educational and health attainment for women (2, 3). Fewer girls are succeeding in school, because the infrastructure is unsafe and discriminatory practices inside classrooms are ill-suited to learning. Despite policies promoting free schooling, indirect costs and increasing poverty and gender inequality continue to keep girls out of school. For improving women's

health outcomes, the World Health Organization suggests that “putting in place the health workforce needed for scaling up maternal, newborn and child health services towards universal access is the first and most pressing task” (4).

Furthermore, the linkages between women’s health and educational outcomes show that lack of support in one sector affects overall well-being. Research shows that an estimated 7 million new cases of HIV could be prevented in a decade if children, especially girls, completed primary school (5). Providing girls with an extra year of education beyond the average, and with access to quality health care, has also been shown to boost eventual wages by 10 to 20 percent (6). Given these outcomes, exploring alternative policies to support increased investment in the social sectors and to achieve gender equality should be a priority.

THE INTERNATIONAL MONETARY FUND’S INFLUENCE ON TEACHERS AND HEALTH CARE WORKERS

Understanding how governments can improve training and recruitment approaches has been the focus of recent research (7–11). The topic has come to light because of the current shortage of teachers and health care workers. UNESCO estimates a current shortage of 18 million teachers worldwide (12). Sub-Saharan Africa alone needs 3.8 million more teachers to ensure class sizes of 40 pupils per teacher. In particular, greater numbers of female teachers can lead to an increase in girls’ enrollment, retention, and achievement in school (13). As a positive role model, having female teachers can also have a sustained impact on gender relations in the community and in society at large (14). Currently, however, female teachers number less than half of all teachers in Sub-Saharan Africa and South and West Asia.

Similarly, the WHO finds that at least 4.3 million additional health care workers will be required by 2015 to meet the Millennium Development Goals and to ensure at least 4.1 health workers per 1,000 population. Worldwide, 334,000 skilled birth attendants would need to be trained to reach the 72 percent coverage for births (15). Countries in Sub-Saharan Africa are in need of 1.5 million health workers (16) and more trained birth attendants to reduce a woman’s lifetime risk of maternal death, which stands at 1 in 16, compared with 1 in 2,800 in rich countries. The WHO finds that “the magnitude of the crisis [in health care workers] in the world’s poorest countries cannot be overstated and requires an urgent, sustained and coordinated response from the international community” (15).

This projected and urgent need to spend more on teaching and health professionals has led to research on understanding how governments budget for teachers and health care workers. Most public sector workers are hired through a budget line called the “public sector wage bill.” The size of the wage bill depends on the national budget or resource envelope of the country, and it grows or contracts according to the resources available. Resources for the wage bill are

mostly derived from national revenue (e.g., taxation), though at times governments do use foreign aid to supplement shortages.

The wage bill represents an important expenditure for governments. Teachers and health care workers comprise a large portion of the wage bill, because of the sheer numbers required to make education and health systems function. When the wage ceiling is lowered, these workers are directly affected. Governments have to hire fewer trained teachers and health workers or find other cost-effective solutions.

Governments routinely, and rightly, set limits or ceilings on wage spending. Most tend to exceed spending beyond the ceiling, because a natural growth in public sector workers usually takes place over time. Care must be taken, however, not to overextend the limit consistently and by too much, otherwise it will be unsustainable.

How much countries can spend on wages is also partly determined by the national macroeconomic framework, which includes monetary (working with the supply and availability of money to meet inflation targets) and fiscal (fiscal deficit, public expenditure rates, including the wage bill, and taxation) policy targets. These and, until recently, the public sector wage ceiling are usually established in loan agreements with the IMF (17).

According to the IMF, the goal of its macroeconomic approach is to achieve economic stability and growth. Specific policies used to achieve these goals include “current-account and fiscal balances consistent with low and declining debt levels, inflation in the low single digits and rising per capita GDP” (18). The Global Campaign for Education’s April 2009 review of 23 loan agreements confirms that these policies are applied in most low-income countries (19). Eighty-seven percent of countries are aiming to bring down inflation below 7 percent by 2011, and 61 percent are aiming for 5 percent or lower. Fiscal deficits are also being lowered: 43 percent of countries are expected to bring their deficit down to below 3 percent. A detailed review of these agreements shows that while the IMF is being flexible in the short term (allowing inflation and deficits to rise slightly), the medium-term goal of reducing these targets to the low single digits is likely to constrain public spending, especially on the wage bill.

Several major studies have challenged the IMF’s approach to maintaining economic stability, showing that contrary to the Fund’s claims, low inflation targets have adversely affected poverty, public spending, employment, and growth (20–24). The twin goals of maintaining low to zero fiscal deficits and, at times, surpluses have also stifled spending. Fiscal policy, argues Diane Elson, a leading feminist economist, should be “actively counter-cyclical, expansionary in the downswing and contractionary in the upswing. This will be more likely to generate full employment and low rates of inflation” (25).

Stability and growth are important goals, but governments must also ask at what cost. The question with regard to inflation and deficit rates is not how high is too high (or how low is too low), but rather what level of flexibility

is required to spur economic growth, increase domestic revenue generation, boost public expenditure, and protect or create employment. More often than not, the prioritization of economic goals, or the failure to include social and equality concerns in macroeconomic policymaking, leads to inequitable health and educational outcomes, especially for women, and may further entrench gender inequality.

POTENTIAL IMPACT OF INTERNATIONAL MONETARY FUND CONDITIONALITIES ON EDUCATION, HEALTH, AND EMPLOYMENT

Findings from recent studies, cited above, show that policy conditions (“conditionalities”) advocated by the IMF have either directly imposed low wage ceilings or indirectly influenced governments in setting the limitations. Investment in achieving these social goals tends to be an afterthought in allocation—a scramble for what is left after larger, macroeconomic policy targets are set. Considerations of gender equality and investment in programs to ensure that girls succeed in school can be difficult to implement within this short-term planning approach. As a result, the fewer number of girls competing in school affects the number of female teachers, who can, under the right conditions, support increases in girls’ enrollment and achievement rates.

The IMF’s own research and findings from its independent evaluation office (IEO) confirm the restrictive nature of this policy and its potential impact in limiting the number of teachers and health care workers that could be hired. The IEO’s report found that “wage bill ceilings were often set without consideration of the impact on expenditures in poverty areas” (26; see also 27, 28).

The Global Campaign for Education’s report (19) uses Sierra Leone and Mozambique as examples of the challenges faced by most countries with IMF loan agreements. The current Poverty Reduction Growth Facility (PRGF) agreement in Sierra Leone emphasizes reducing inflation from 15.6 to 8.9 percent by 2011 and building foreign reserves (29). Though the wage bill is projected to rise slightly, to 6.1 percent of GDP by 2011, this follows a sustained decrease in the past few years, leaving Sierra Leone to follow cost-cutting measures leading to a severe shortage of trained teachers. Fifty-one percent of the current teacher workforce is untrained in Sierra Leone (1).

Mozambique’s wage bill conditionality was removed in 2006, allowing the government to increase the wage bill from 6.5 to 7.5 percent of GDP. This enabled hiring of 9,000 of the 12,000 teachers required. In 2009, under the PSI (Policy Support Instrument) agreement, the wage bill will continue to increase, to 8.4 percent, but then is targeted to decline to 7.8 percent by 2011 (30). Although, in the short term, this will enable the government to hire 12,000 teachers and 1,500 health workers, with the wage ceiling decreasing over time, an adequate

number of public sector workers, needed to make modest progress toward the universal primary education and health goals by 2015, is unlikely.

Most governments, including Mozambique and Sierra Leone, have responded to limited wage bills by implementing cost-saving measures such as freezing or limiting the number of new workers or hiring untrained (para) teachers or underqualified health workers (31, 32). In an effort to recruit more teachers, and at a faster pace, the trend has also been to truncate the number of years of training, offer crash courses, or provide no training at all for community/volunteer teachers. The shortened training programs for teachers are not likely to leave much room for training on gender responsiveness or for exploring the current gendered biases in the curriculum.

Similarly, Senegal formalized the hiring of para teachers as a cost-saving measure by reducing the teacher training programs from 4 years to 6 months (33). The policy in Senegal is now being reviewed in the light of the lower learning outcomes of children, especially girls. There is greater recognition of how a lack of adequate training not only affects teachers' professionalism but also violates their labor rights. It also affects their ability to provide quality education and health care to all children (34, 35). When education is of low quality, parents may not see the need to invest scarce resources in educating girls. As noted above, fewer girls succeeding in school also leads to fewer female teachers, who are seen to encourage girl's education (36). Overall, not educating a girl affects not only her health and employment opportunities but also her ability to access her rights. If she chooses to have a family, her low level of education is also likely to affect the entire family's well-being.

The shortage of resources in public health has led to a scenario similar to that for teachers in education. In areas where the need for health workers is great, less-skilled providers are often chosen to increase coverage. Although this is attractive from a budgetary perspective, there are disadvantages in the quality of care and serious consequences for women's health and mortality (37). In Sierra Leone, where maternal mortality is 2,100 in 100,000 live births, approximately 43 percent of health professionals attending births are skilled. In Mozambique, maternal mortality is 520 in 100,000 live births, and 48 percent of birth attendants are skilled health professionals (38).

Poor health and educational outcomes are likely to also affect employment rates, which will push people farther into poverty. The International Labor Organization (39) estimates the LICs to be hit hard—30 to 50 million more workers are expected to be unemployed, pushing more than 200 million people to the brink of poverty and starvation. For women, who often have lower educational attainment, the impact is expected to be worse, as they tend to be the first to lose employment (40). In economies dependent on export employment where women form the backbone of the export labor force, women will increasingly be forced into informal and other types of employment associated with low average earnings, poor working conditions, few labor rights, and job insecurity.

Investment in health and education can also promote economic growth, because with more skilled (and healthy) workers contributing to the economy, there is a better potential for growth and increasing revenue (from taxes) that the government can use to hire more teachers and health care workers.

Here again, there is evidence of how the neoliberal policy mix of the IMF has amounted to lower national revenue, much of which is used for public sector spending, especially on wages. Following the advice of the IMF and World Trade Organization, the LICs continue to remove trade barriers, including lowering or eliminating import and export duties, which have been an important source of revenue, to spark foreign investment. While the use of other forms of taxation such as value-added tax (VAT, which can be regressive unless food and other key items are exempted) has helped to recover some revenue, it amounts to only one-third of what could have been collected through trade (41). Given the already low tax base in the LICs (15%, compared with 35% in European countries), it is unclear how they will be able to increase public spending to the levels required to ensure equal access and success for both women and men (42).

This dilemma of cutting public spending in order to adhere to the IMF macroeconomic framework will continue to trouble countries for years to come. More countries are turning to the IMF for loans, as a result of the economic crisis. In April 2009, the G20 leaders provided a new lease on life for the IMF by committing US\$750 billion. The potential implications of the IMF's bolstered role in education and health are of concern, given past performance in restricting expenditure—either indirectly through macroeconomic and fiscal policies, or directly through the wage ceilings. As the evidence shows, unless a better balance between social and economic goals is achieved, health and education sectors will not be able to provide quality care and learning opportunities, especially for women. This trade-off (“sacrifice ratio”) takes on greater significance over time, especially during recession, and affects education, health care, and employment (43). As shown earlier, the effects are likely to be greater for women.

RECENT CHANGES TO INTERNATIONAL MONETARY FUND POLICIES

In September 2007, the IMF acknowledged that the wage ceilings had affected, and were continuing to affect, the recruitment of teachers and health care workers. It committed to omitting wage ceilings as conditionalities in new loan arrangements (44). If wage ceilings were included as a policy condition, staff were asked to justify their use and to reassess the need and rationale for these ceilings (45).

Recent research examines whether this policy change resolved the problematic association between IMF policy and workforce limits. The Global Campaign for Education's review of 23 loan agreements between the LICs and the IMF confirms that the IMF has, for the most part, changed its policy toward wage ceilings (19).

Three countries—Côte d’Ivoire, Benin, and Burundi—continue to have a ceiling on the public sector wage bill as an indicative target within their PRGF.

The study (19) also shows, however, that removing the wage bill conditionality from loan agreements does not automatically result in an increase in the wage bill or in the number of teachers and health care workers in a country. Only 30 percent of countries (7 of 23) project an increase in the wage bill, with 39 percent (9 of 23) actually aiming to decrease the wage bill as a percentage of GDP within the next three years. A review of nine SBA (Stand-By-Arrangement) loans by the Third World Network (46) shows that all countries aim to reduce current spending, and seven of the nine will either freeze or cut public sector wages.

Current policy advice points to little change, despite claims of protecting social sector spending. So far, the IMF has recommended further belt-tightening measures, suggesting fiscal austerity and conservative (or limiting) spending. The Fund advises that “public sector wage increases would also be a poorly targeted form of support and may not be sustainable” (47). The case of Latvia seems to indicate that the IMF’s response to the financial crisis is to cut public spending. The recently approved SBA with the IMF includes a fiscal adjustment program that will see the wage bill go down drastically, from 1.3 percent of GDP in 2009 to 0.4 percent in 2010 (48).

Though governments recognize the need to invest in public sectors, they are most likely—as in the cases of Sierra Leone and Mozambique mentioned above—to go along with cutting expenditure to comply with the conditionalities in their loan agreements with the IMF. Violating these terms could potentially lead to a temporary cessation of aid and foreign investment—a price too high to pay.

The IMF has recently indicated several forthcoming changes to its loan facilities, to show greater flexibility for the LICs during the crisis. The details are yet to be released, but a recent publication raises several concerns about these policies. The report claims that these efforts are likely to bring little change to the budgeting processes for education and health care workers and could potentially further entrench the LICs in poverty (49).

Overall, it is uncertain whether the IMF would be able to secure the additional funds it has pledged to the LICs. Only a portion of the resources raised from gold sales, approximately US\$785 million, will go toward the LICs, and none of this will support debt relief. The SDR (Special Drawing Rights) allocation, which functions as a reserve currency, is also touted as a potential measure for increasing funding for the LICs, but does not include provisions for transfers from rich countries to poor ones, modification of developing countries’ costs in converting SDRs to hard currency, or plans for special, targeted allocations based on needs. It is likely to result in only US\$11 billion; for Sub-Saharan Africa, this amounts to less than 5 percent of the pledged US\$250 billion through SDR and the US\$80 to US\$100 billion for developing countries.

Though the IMF will reduce interest payments on outstanding concessional loans from 0.5 percent to zero through 2011, this is only worth about US\$110 million to all LICs over the course of two-and-a-half years, or less than US\$1 million a year, on average. This does not amount to adequate relief, especially as, overall, the borrowing will lead to future debt.

Finally, the redesigning of the LIC lending programs into different instruments (or replacement of current PRGF and ESF (Exogenous Shocks Facility) arrangements) may not bring about as much flexibility as the IMF professes, partly because there has been little indication of any change in conditionality frameworks. The LICs most likely will continue to need to adhere to pro-cyclical demands for cuts in spending (probably the wage bill) and to maintain low inflation rates and fiscal deficit levels.

Herein lies the contradiction. The G20 countries adopt fiscal stimulus packages and protect their own social sectors, while their directors on the IMF board continue to support restrictive policies that constrain investment in education and health in the LICs.

TOWARD FLEXIBLE, GENDER-SENSITIVE ECONOMIC POLICIES

Advocacy for, ideally, eliminating conditionalities, or at least for greater flexibility in monetary and fiscal targets (determined by the LICs and their citizens), is important to maintain—especially to redress gender inequalities. Two working papers by Stotsky (50, 51) at the IMF recognize “the need for macroeconomic policy to take into account the benefits of decreasing gender inequality and improving the status of women may contribute to increased rates of economic growth and greater economic stability.” The author suggests that policies should consider the potentially harsher short-term effects of economic austerity measures on women and avoid exacerbating gender inequality (50). Though Stotsky recognizes the need to include analysis of how gender differences in behavior influence macroeconomic outcomes, the evidence pointing to the IMF’s impact on increasing inequalities is largely questioned, giving little hope about how much future policies will include both a gendered analysis and specific measures to either support women or, at the very least, ensure they are not adversely affected.

The evidence from the education and health sectors, however, points to the need for renewed discussions on the architecture of the entire macroeconomic system, if women’s rights are to be fulfilled. What is needed is a new point of departure that places social policies at the center of macroeconomic policy.¹ The objectives of macroeconomic policy should, in fact, be consistent with human rights

¹ This term, and the discussion of the alternative, feminist approach to economic policy in this article, are drawn from Balakrishnan and Elson (52).

obligations. Education, health, equity, and equality concerns should appear in the actual design of macroeconomic policies, not just in the analysis of their outcomes.

The Center of Concern's Global Women's Project advocates this type of transformational policy (53):

Putting social policies at the center of economic policies would change the criteria for judging effectiveness. The soundness of economic policies would not be based on market criteria, per se, but in terms of whether they ultimately succeed in bringing societies to achieving social justice.

Feminist economists Diane Elson and Nilufur Cagatay go further (54):

Thus, desired social outcomes such as distributive justice, equity, provisioning of needs for all, freedom from poverty and discrimination, social inclusion, development of human capabilities become the ultimate goals of policy-making, including macroeconomic policy-making.

Tools such as gender-responsive budgeting, which require sex-disaggregated data, can help determine whether public expenditure is equally distributed between the sexes and across different social groups (55–57).

A deeper analysis of how economic behaviors both inside and outside the home are determined by power relations and relationships that distribute access to resources and rights should also inform the development of macroeconomic policies. If these concerns are taken into consideration from the outset, there is a better chance for policies specifically aimed at, and achieving, remedying inequalities.

This approach also extends to understanding how markets are social constructs and are organized along gendered lines. First, more effort must be made to improve the formal employment system, which often subordinates women through lower pay, poorer conditions, and less job security than men. Second, some of the contributions made by women to the economic system are ignored. The care, social, and reproductive and informal economy, and women's confinement and contribution to it, in particular, remains invisible or undervalued but has a significant impact on the quality of women's lives, their efforts to achieve gender equality, and the well-being of families and societies. To this end, it would also be useful to consider how time-use data on women's contributions to formal work (especially through unpaid labor) can be included in official calculations of GDP (58).

Developing a political commitment to achieving gender equality and improving women's status/position and power in society, and their access to and ability to make beneficial choices, requires a longer-term framework for government economic planning and investment in education and health care. The current three-year planning framework used by the IMF and governments is not likely to

support this type of investment. Deliberate policy, budgetary, and legislative efforts must be made to ensure that women have equal access and enjoyment of these fundamental rights.

Given that the state's ability to fulfill social and economic rights progressively to all citizens is partly dependent on the international system, the policies of international institutions must also be assessed and changed. At the least, international institutions must ensure that policies do not constrain the state's obligation to respect, protect, and fulfill rights. However, as this article has shown, by insisting on overly restrictive macroeconomic policies and capping public expenditure (either directly or indirectly), the IMF is constraining the ability of the state to provide more of the resources required to fulfill fundamental rights. These conditionalities, then, may also be seen as a breach of human rights obligations.

Redressing inequalities is not just about striking the right balance between macroeconomic stability and social sectors. Rather, it requires redefining what we mean by stability and effectiveness. A country that has achieved the IMF goals of low, single-digit inflation and fiscal deficit and shoring up of reserves will be, from a critical and feminist perspective, failing to protect human rights if these policies have not resulted in improved health care and access to education, on equal grounds, for women and men. When viewed from this perspective, the IMF's track record on human rights is dismal.

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REFERENCES

1. UNESCO. *Global Education Monitoring Report 2009: Overcoming Equality, Why Governance Matters*. Paris, 2009.
2. Marphatia, A. *Creating an Enabling Environment for Girls' and Women's Participation in Education*. United Nations Division for the Advancement of Women, Department of Economic and Social Affairs Working Paper EGM/WPD-EE/2005/EP-8. New York, 2005.
3. International Labor Organization. *Impact of Structural Adjustment on the Employment and Training of Teachers*. JMEP/1996/ILO. Geneva, 1996.
4. World Health Organization. *World Health Report 2005: Make Every Mother and Child Count*. Geneva, 2005.
5. Global Campaign for Education. *Learning to Survive: How Education for All Would Save Millions of Young People from HIV/AIDS*. Johannesburg, 2004.

6. Psacharopoulos, G., and Patrinos, H. A. *Returns to Investment in Education: A Further Update*. World Bank, Education Sector Unit, Latin America and the Caribbean Region, Policy Research Working Paper No. 2881. World Bank, Washington, DC, 2002.
7. ActionAid. *Confronting the Contradictions: The IMF, Wage Bill Ceilings, and the Case for Teachers*. London, 2007.
8. IMF's response to ActionAid's report. www.actionaid.org/assets/pdf/Calvin%20IMF%20letter%20May%2007.pdf.
9. ActionAid's response to IMF's letter. [www.actionaid.org/assets/pdf/AAI%20response%20to%20IMF%2014%20June%202007%20\(3\).pdf](http://www.actionaid.org/assets/pdf/AAI%20response%20to%20IMF%2014%20June%202007%20(3).pdf)
10. Center for Global Development. *Does the IMF Constrain Health Spending in Poor Countries? Evidence and an Agenda for Action*. Report of the Working Group on IMF Programs and Health Spending. Washington, DC, 2007.
11. Médecins Sans Frontières. *Help Wanted: Confronting the Health Care Worker Crisis to Expand Access to HIV Treatment: MSF experience in Southern Africa*. Geneva, 2007.
12. UNESCO Institute for Statistics. *Teachers and Education Quality: Monitoring Global Needs for 2015*. Montreal, 2006.
13. UNESCO. *Gender and Education for All—The Leap to Equality*. Education for All Global Monitoring Report 2003/4. Paris, 2003.
14. Kirk, J. *The Impact of Women Teachers on Girls' Education*. Advocacy Brief. UNESCO, Bangkok, 2006.
15. World Health Organization. *World Health Report 2006: Working Together for Health*. Geneva, 2006.
16. Global Health Workforce Alliance. *Scaling Up, Saving Lives*. Task Force for Scaling Up Education and Training for Health Workers. WHO, Geneva, 2008.
17. ActionAid. *Changing Course: Alternative Approaches to Achieve the Millennium Development Goals and Fight HIV/AIDS*. Washington, DC, 2005.
18. International Monetary Fund. Macroeconomic policy and poverty reduction. In *Poverty Reduction Strategy Paper Sourcebook*. Washington, DC, 2001.
19. Global Campaign for Education. *Education on the Brink: Will the IMF's New Lease on Life Ease or Block Progress towards Education Goals?* Johannesburg, 2009.
20. Pollin, R., and Zhu, A. Inflation and economic growth: A cross-country nonlinear analysis. *J. Post-Keynesian Econ.* 28(4):593–614, 2006.
21. Chang, H. J., and Grabel, I. *Reclaiming Development: An Alternative Economic Policy Manual*. Zed Books, New York, 2004.
22. McKinley, T. *The Globalisation of Inflation and Misguided Monetary Policies*. School of Oriental and African Studies, University of London, London, 2008.
23. Pollin, R., Epstein, G., and Heintz, J. *Pro-growth Alternatives for Monetary and Financial Policies in Sub-Saharan Africa*. International Poverty Centre Policy Research Brief No. 6. International Poverty Centre, Brasilia, 2008.
24. Bruno, M., and Easterly, W. Inflation crises and long-run growth. *J. Monetary Econ.* 41:3–26, 1998.
25. Elson, D. *Budgeting for Women's Rights: Monitoring Government Budgets for Compliance in CEDAW*. UNIFEM, New York, 2006.
26. IMF Independent Evaluation Office. *An Evaluation of the IMF and Aid to Sub-Saharan Africa*. IMF, Washington, DC, 2007.

27. Fedelino, A., Schwartz, G., and Verhoeven, M. *Aid Scaling Up: Do Wage Bill Ceilings Stand in the Way?* IMF Fiscal Affairs Department Working Paper WP/06/106. IMF, Washington, DC, 2006.
28. International Monetary Fund. *Aid Inflows—The Role of the Fund and Operational Issues for Program Design*. Washington, DC, 2007.
29. International Monetary Fund. *Sierra Leone: 2008 Article IV Consultation, Third Review Under the Three-Year Arrangement Under the Poverty Reduction and Growth Facility, Financing Assurances Review, and Requests for Waivers of Nonobservance of Performance Criteria, Augmentation of Access, and Modification of Performance Criterion*. Staff report. Washington, DC, January 2009.
30. International Monetary Fund. *Republic of Mozambique: Third Review Under the Policy Support Instrument*. Country Report No. 09/49. Washington, DC, 2009.
31. International Labor Organization. *The Use of Contract Teachers in Developing Countries: Trends and Impacts*. Working Paper WP No. 252. Geneva, 2007.
32. Wemos. IMF Macroeconomic Policies and Health Sector Budgets. 2006. www.wemos.nl/Documents/wemos_synthesis_report_final.pdf (accessed September 1, 2009).
33. ActionAid. *Améliorer la qualité de l'Éducation: une préoccupation du système éducatif sénégalais*. Senegal, 2009.
34. Chapman, D., Chen, X., and Postiglione, G. Is preservice teacher training worth the money? A study of teachers in ethnic minority regions of the People's Republic of China. *Comp. Educ. Rev.* 44(3):300–328, 2000.
35. Duthilleul, Y. *Lessons Learnt in the Use of "Contract Teachers": Synthesis Report*. International Institute of Education Policy, UNESCO, Paris, 2004.
36. CfBT Education Trust and Voluntary Service Organisation. *Managing Teachers: The Centrality of Teacher Management for Quality Education—Lessons from Developing Countries*. London, 2008.
37. Koblinsky, M., et al. Going to scale with professional skilled care. *Lancet* 368(9544): 1377–1386, 2006.
38. UNICEF. *State of the World's Children 2009: Maternal and New Born Health*. New York, 2008.
39. International Labor Organization. *Unemployment, Working Poor, and Vulnerable Employment to Increase Dramatically Due to Global Crisis*. Press release ILO/09/2. Geneva, January 28, 2009.
40. International Labor Organization. *Global Employment Trends for Women*. Geneva, 2009.
41. Baunsgaard, T., and Keen, M. *Tax Revenue and (or?) Trade Liberalisation*. IMF Working Paper WP/05/112. IMF, Washington, DC, 2005.
42. ActionAid. *Accounting for Poverty*. London, 2009.
43. Ball, L. What determines the sacrifice ratio? In *Monetary Policy*, ed. G. N. Mankiw. University of Chicago Press, Chicago, 1994.
44. International Monetary Fund. *IMF Executive Board Discusses Operational Implications of Aid Inflows for IMF Advice and Program Design in Low-Income Countries*. Public Information Notice (PIN) No. 07/83. Washington, DC, 2007.
45. Verhoeven, M., and Segura, A. IMF trims use of wage bill ceilings. *IMF Survey Magazine: Policy* 5, 2007.
46. Third World Network. *The IMF's Financial Crisis Loans: No Change in Conditionalities*. Penang, Malaysia, 2009.

47. International Monetary Fund. *The Implications of the Global Financial Crisis for Low Income Countries*. Washington, DC, 2009.
48. Eurodad. *Bail Out or Blow Out? IMF Policy Advice and Conditions for Low-Income Countries at a Time of Crisis*. Brussels, 2009.
49. ActionAid, Bretton Woods Project, Eurodad, and Third World Network. *IMF Financial Package for Low-Income Countries: Much Ado about Nothing?* London, 2009.
50. Stotsky, J. *Gender and Its Relevance in Macroeconomic Policy: A Survey*. IMF Fiscal Affairs Department Working Paper WP/06/233. IMF, Washington, DC, 2006.
51. Stotsky, J. *Gender Budgeting*. IMF Fiscal Affairs Department Working Paper WP/06/232. IMF, Washington, DC, 2006.
52. Balakrishnan, R., and Elson, D. Auditing economic policy in the light of obligations on economic and social rights. *Essex Hum. Rights Rev.* 5, 2008.
53. Center of Concern. From Women in Development to Gender and Trade: The History of the Global Women's Project. www.coc.org/system/files/gwp_project_history.pdf (accessed September 1, 2009).
54. Elson, D., and Cagatay, N. The social content of macroeconomic policies. *World Dev.* 28(7):1347–1364, 2000.
55. BRIDGE. *Gender and Budgets: Overview Report*. BRIDGE Cutting Edge Pack Series. University of Sussex, Brighton, UK, 2003.
56. Gender Responsive Budgeting Initiative Supported by UNIFEM. www.gender-budgets.org.
57. Schneider, K. *Public Finance Management, including Gender-Responsive Budgeting*. Working Paper EGM/FFGE/2007/EP.3. United Nations Division for the Advancement of Women Department of Economic and Social Affairs, New York, 2007.
58. Budlender, D. *The Statistical Evidence on Care and Non-care Work across Six Countries*. Global and Development Programme Paper No. 4. United Nations Research Institute for Social Development, Geneva, 2008.
59. Esplen, E., and Bell, E. *Gender and Indicators: Supporting Resources Collection*. BRIDGE Cutting Edge Pack Series. University of Sussex, Brighton, UK, 2007.

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