Evidence from Demographic and Health Surveys indicates that much of women’s decision-making power is exerted at the community level. When women are empowered to participate in their communities, they can challenge the attitudes and practices that entrench gender discrimination, share work, pool resources and collectively devise and sustain initiatives to improve maternal and newborn health. It is the acumen of women acting collectively that is among the strongest reasons why most newborns and mothers survive pregnancy and childbirth.

Increasing women’s participation in key decision-making processes in employment and political life is also critical to improving maternal and newborn outcomes. Improving economic status can be vital to enhancing women’s participation in decision-making, with attendant implications for the health of their children. When women have greater influence in the management of household decisions, they are more likely than men to ensure that children eat well and receive medical care. Owning assets can also enhance women’s influence in household decision-making; a study in rural Bangladesh showed that women who have a greater share of assets than their husbands before their own wedding have a stronger influence on household decision-making.

Despite some progress at increasing their representation in national legisla-