

Women's Health and the Impact of Gender Roles and Expectations: Challenges and Opportunities

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ABSTRACT

This study primarily examines the barriers to advancing gender equality and improving women's health outcomes. The study focuses on how gender roles and expectations related to caregiving, household responsibilities, and work have a significant impact on women's health, limiting their access to resources for economic empowerment, education, and healthcare. The study used a mixed-methods approach, combining a literature review with an online questionnaire of mostly women, to better understand the complex relationship between gender roles, expectations, and women's health. The literature review explores the impact of gender norms and expectations on women's health outcomes, revealing several genderspecific health concerns, including reproductive health, mental health, and chronic diseases. The assessment also highlights how societal and cultural norms contribute to gender-based violence and discrimination, which can harm women's health. Thematic analysis is used to assess the interviews and find recurring themes about women's health and the effects of gender norms and expectations. In conclusion, this study advances our understanding of the complex interplay between gender roles, cultural norms, and women's health. The mixed-methods approach provides a comprehensive understanding of how gender norms and expectations affect women's health, underscoring the need for gender-sensitive interventions to promote health equity and enhance women's lives.

Keywords: *Gender Equality, Empowerment, Healthcare, Gender Roles, Gender-Based Violence, Discrimination, Health Equity*

The impact of gender roles and expectations on women's health has been widely recognized as a critical area of concern. Gender roles refer to the expectations and behaviours assigned to individuals based on their sex. These social norms and cultural practices often reinforce gender roles, leading to gender-based discrimination and limiting access to healthcare, education, and economic opportunities³(UN Women, 2021). Given the distinctive biological, social, and cultural elements that influence women's health outcomes, women's health is a crucial topic of concern.

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Received: February 20, 2024; Revision Received: April 27, 2024; Accepted: May 01, 2024

³ UN Women. (2021). *Gender equality and women's empowerment*. <https://www.un.org/sustainabledevelopment/gender-equality/>

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Gender discrimination, gender stereotypes, and cultural norms frequently place restrictions on women's access to healthcare, education, and employment prospects ⁴(World Bank, 2012). Women's health, including reproductive, mental, and chronic illness outcomes, can be significantly impacted by these gender norms and expectations. Additionally, women who are subject to gender stereotypes that associate women with caregiving roles may face barriers to pursuing careers and educational opportunities that can impact their economic well-being and healthcare access. Additionally, because of structural gender disparities, women frequently encounter obstacles while trying to obtain healthcare, education, and employment opportunities.

A severe problem that harms women's health and well-being is gender-based violence. Gender-based violence can take many forms, including sexual harassment, intimate partner violence, and sexual assault. For many years, researchers, legislators, and health professionals have been deeply interested in and concerned about issues related to women's health. Women still encounter several barriers to acquiring high-quality healthcare services, and the influence of gender norms and expectations is one important aspect that has an impact on women's health outcomes.

The social norms and expectations that dictate how men and women should behave and act in society are known as gender roles and expectations. Women's health outcomes may be significantly impacted by these roles and expectations, which may also restrict their access to care and impair their health. For example, women may be discouraged from seeking medical care for reproductive health issues due to cultural taboos and the stigma surrounding these issues (WHO, 2020).⁵

According to WHO, "every woman has the right to the highest attainable standard of health, which includes the right to dignified, respectful health care" (WHO, 2014).⁶ However, some women still experience discrimination and poor psychosocial support in terms of maternity care. For instance, women in some countries may be subjected to harmful traditional practices, such as female genital mutilation or child marriage, that can have lasting health consequences.

Specific examples of gender-based discrimination and violence include the pay gap, denial of access to education, domestic violence, and sexual harassment. For instance, women are often paid less than men for doing the same job, and girls in many parts of the world are denied an education simply because they are female. "Despite gains in some areas, women earn an average of just two-thirds of men's wages, and they are often denied access to opportunities leading to the best jobs." (ILO 1995)⁷

LITERATURE REVIEW

The literature review of studies focused on gender equality and women's health outcomes shows that gender roles and expectations have a significant impact on women's access to resources for economic empowerment, education, and healthcare. Intersectionality theory,

⁴ World Bank. 2012. *World Development Report 2012: Gender Equality and Development*. World Bank. <http://hdl.handle.net/10986/4391>

⁵ WHO. (2020). *Gender and reproductive rights*. <https://www.who.int/gender-equity-rights/understanding/gender-definition/en/>

⁶ WHO. (2014) <https://www.who.int/publications/i/item/WHO-RHR-14.23>

⁷ *Women Work More but are Still Paid Less* (https://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS_008091/lang-en/index.htm)

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which considers the intersections of various identities, such as race, ethnicity, and socioeconomic status, has been shown to be an effective approach to advancing health equity. Bauer GR (2014)⁸ suggests that incorporating intersectionality theory into population health research methodology can help identify the root causes of health disparities and promote health equity.

Violence against women – particularly intimate partner violence and sexual violence – is a major public and clinical health problem and a violation of women's human rights. It is rooted in and perpetuates gender inequalities (WHO).⁹ In other words, violence against women is caused by unequal power relations between men and women in society, where men have more power and control than women. This power imbalance is perpetuated by violence and is reinforced by societal norms and attitudes that condone or minimize such violence. Therefore, addressing and eliminating gender inequalities is essential to prevent and address violence against women.

Naila Kabeer examines the measurement of women's empowerment and proposed that resources, agency, and achievements are critical components of women's empowerment.¹⁰ The author is discussing the concept of women's empowerment and argues that it is a process that involves acquiring the ability to make strategic life choices. She believes that in order to measure women's empowerment, it is important to consider three inter-related dimensions: resources, agency, and achievements. In other words, Kabeer is proposing a holistic approach to measuring women's empowerment that takes into account multiple dimensions of choice and the structural parameters that shape individual choice.

In “*Women's empowerment and fertility: A review of the literature*”¹¹ the authors explore how women's empowerment can affect fertility rates by giving women more control over their reproductive decisions. They examine different dimensions of women's empowerment, such as education, employment, and decision-making power, and how each dimension can impact fertility rates. The authors also discuss the potential mechanisms through which women's empowerment can influence fertility, such as changes in contraceptive use, marriage patterns, and gender norms.

Finally, gender-sensitive interventions are needed to promote health equity and enhance women's lives. In “*Gender and health promotion: A multisectoral policy approach*”.¹² The authors highlight the gendered nature of health and how gender inequalities contribute to poor health outcomes for women. They emphasize the need for policy approaches that take into account the social determinants of health, including economic, social, and cultural factors, and that promote gender equality and women's empowerment. The paper also provides examples of successful multisectoral policy approaches to addressing gender and

⁸ Bauer GR. Incorporating intersectionality theory into population health research methodology: challenges and the potential to advance health equity. *Soc Sci Med*. 2014 Jun; 110:10-7. doi: 10.1016/j.socscimed.2014.03.022. Epub 2014 Mar 25. PMID: 24704889.

⁹ Violence against women (WHO) (https://www.who.int/health-topics/violence-against-women#tab=tab_1)

¹⁰ Kabeer, N. (1999). Resources, agency, achievements: reflections on the measurement of women's empowerment. *Development and Change*

¹¹ Upadhyay, U. D., Gipson, J. D., Withers, M., Lewis, S., Ciaraldi, E. J., & Fraser, A. (2014). Women's empowerment and fertility: a review of the literature. *Social Science & Medicine*, 115, 111-120.

¹² Piroška Östlin, Elizabeth Eckermann, Udaya Shankar Mishra, Mwansa Nkowane, Eva Wallstam, Gender and health promotion: A multisectoral policy approach, *Health Promotion International*, Volume 21, Issue suppl_1, December 2006, Pages 25–35, <https://doi.org/10.1093/heapro/dal048>

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health promotion, such as integrating gender into health policies, engaging men and boys in promoting gender equality, and improving access to health services for women.

In conclusion, the literature review highlights the complex relationship between gender roles, cultural norms, and women's health. Intersectionality theory, gender-based violence, women's empowerment, and gender-sensitive interventions are critical components of promoting health equity and enhancing women's lives.

OBJECTIVES AND METHODOLOGY

The objectives of the study are:

- To identify the impact of social determinants of health such as education, income, and employment on gender-based disparities in health outcomes.
- To explore the intersectionality of gender with other social identities such as race, ethnicity, and sexual orientation in relation to health outcomes and healthcare experiences.
- To investigate the societal and cultural norms that contribute to gender-based violence and discrimination.
- To assess the effectiveness of gender-sensitive interventions and policies aimed at improving health outcomes and reducing gender-based disparities.

This study adopted a qualitative approach to understand the relationship between gender roles, expectations, and women's health. The researcher used a descriptive research design to explore different gender norms that have affected women's health. Subsequently, the author identified the key informants based on certain inclusion and exclusion criteria. The online Questionnaire was used as a tool to collect data. A total of 19 respondents participated in the study. The target population was mostly women and the criterion of the selection of the sample is based on the purposive sampling method. The questionnaire included open-ended questions, giving freedom to the respondents to answer freely rather than choosing from the given options. The data was collected through informed consent by the participants which contained information about the purpose of the study. The study is based on primary data which has been collected through a detailed questionnaire. The personal information of the respondents has been kept confidential and the author has maintained the privacy of the subjects involved. Accordingly, the data has been analysed using thematic analysis for qualitative information to present the themes derived from the study.

The study was conducted online with limited respondents(n=19) so the data can't be used to draw a broad inference about the study. Furthermore, the study excludes the general knowledge and perspective of the male population because most of the respondents were female.

Findings:

Qualitative data enables us to comprehend various aspects of the investigation, including resulting themes.

1. Barriers to Advancing Gender Equality

There are several barriers that limit opportunities for women to achieve various life goals, depending on the context and specific issues. Various societal norms and stereotypes that lead to gender-based discrimination and violence are deeply ingrained in society.

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Out of 19 respondents, 11 faced challenges and barriers related to various gender roles and expectations. One respondent shared her experience of discrimination in her professional life, saying,

"The barriers that I have experienced are related to traveling for work to distant locations within the same city. The whole concern changes into an implied thought process, which creates a fear that I should not travel or come late at night, and it's for my safety."

The economic and political structure privileges men and limits women's participation in the workforce and political leadership, restricting women's access to resources, opportunities, and decision-making power. Adding to this, another respondent said,

"The biggest challenge working in the professional front was to work in a male-dominated organization where people always talked about gender equality, but there was only one female employee at a higher position. The idea that I am female and won't be able to work in the field created a full stop for the opportunities that I wanted to avail in life."

Women encounter prejudice about their physical difficulties in various contexts, making them feel unwelcome and unimportant. When women gain or lose weight for different medical or health reasons, their friends and peers may make fun of them. A person who shared her experience and is a health professional said,

"I have faced a lot of criticism about my appearance from friends, colleagues, and even members of my own family, who claim that I appear skinny and that no one would ever marry me if I can't put on weight."

Lack of supportive infrastructure, such as affordable childcare arrangements, parental care, and flexible work systems, limit women's ability to balance work and family responsibilities, making them susceptible to various health issues. Overall, women face many issues and barriers that limit them in various spheres of life, including professional and personal. The problems are complex and multifaceted, and they vary depending on the issues that need to be understood and addressed. It is crucial to advance gender equality and create a more just and equitable society without barriers and discrimination. Thus, we need to have a holistic approach to understanding the barriers and challenges that women face in society to work for equal rights, policies, and programs to address gender-based discrimination and achieve gender equality.

2. Impact of gender roles and expectations on women's health:

Women's health results can be significantly impacted by gender roles and expectations. Women's emotional and physical health, access to healthcare, and health-related behaviours are all affected by these expectations. For instance, traditional gender roles that place the primary responsibility for childbearing and rearing children on women can have negative effects, such as limiting access to education and employment, high rates of maternal mortality and morbidity, and stress and burnout.

During interviews, respondents shared their experiences and talked about how gender roles and expectations have always negatively impacted women's health. One respondent shared her journey of childbearing and said,

"My health is not the same as it was before I gave birth to my child. Additionally, I quit my career solely for the sake of my child. I don't feel guilty about it, but I believe that if I had kept working, I would be in better physical and emotional health today."

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Gender roles and expectations also have negative impacts on women's mental health, such as anxiety, depression, and low self-esteem. For example, societal expectations that women prioritize caregiving and emotional labour can lead to stress and burnout, while gender-based discrimination can lead to feelings of inadequacy and self-doubt. One respondent discussed the poor mental health outcomes for women due to diverse gender roles, saying,

"The impact was massive in terms of mental health because even after providing financial support to the house, I face criticism and am expected to do all the in-housework by myself, which makes me weak both emotionally and physically."

Poor mental health outcomes for women, such as anxiety, sadness, and low self-esteem, can be attributed to gender norms and expectations. For instance, gender discrimination can cause feelings of inadequacy and self-doubt, while cultural expectations that women prioritize caring and emotional labour can cause stress and fatigue. Women have been assigned the work that men can't do due to various gender norms of society, leading to many health issues. Women have been seen as the caregiver in the family, a role assigned to them, and not considered men's domain. These roles and expectations lead to physical and mental health consequences. Adding to this, another respondent said,

"Health issues due to caregiving burden and major responsibilities are not an issue of the present time but have been existing for decades in Indian households and are promoted by not only males but also older females within the house."

Women's access to healthcare services may also be impacted by gender norms and expectations. For instance, gender-based discrimination can lead to substandard care and uneven treatment, while conventional gender norms that prioritize men's healthcare demands over women might result in insufficient healthcare resources for women.

To advance gender equality and enhance women's health, we must acknowledge and address these concerns. When women have an equal say in all the decisions, they wish to make for themselves, there will be fewer issues and nearly no prejudice, which will improve our society's ability to exist.

3. Access to resources for economic empowerment, education, and healthcare:

Access to resources for healthcare, education, and economic empowerment is essential to enhance women's health. Women who have access to these tools are more likely to experience positive changes in their mental and physical health, as well as decreased rates of maternal and newborn mortality and infectious illness.

Since financial stability and independence can result in greater access to healthcare and better health outcomes, economic empowerment is crucial for women's health. Women are more likely to earn greater salaries when they have access to education and career opportunities, enabling them to pay for better healthcare and healthier dietary alternatives. When discussing independence and women's role in decision-making, one of the respondents remarked,

"The main agency to say yes or no for any opportunity without others being the deciding party represents the barriers and challenges that I and other females have faced in their daily lives."

The health of women is greatly impacted by education as well. Women who have access to education are more likely to see improvements in their personal and family health. Women with higher levels of education are more likely to be aware of health concerns, have access to

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healthcare, and be better able to make decisions about their health. When speaking about the barriers and limited access to education, one of the respondents shared her views by saying, *"I had to work a lot harder to get an education, be independent and have control over my life. Still, I feel subjected to significantly more complex expectations from my family, quite different from my brothers in the family. I have to be extra careful, always do extra to be myself."*

For the health of women, access to healthcare is also essential. Preventative care, early diagnosis, and treatment of sickness are more likely to be received by women who have access to healthcare resources. This can lessen the risk of developing chronic illnesses and enhance overall health results. Unfortunately, many women worldwide lack access to these resources due to factors such as poverty, discrimination, and lack of political power. Addressing these issues and promoting gender equality is crucial to improving access to resources for economic empowerment, education, and healthcare. Policies and programs that promote access to these resources, such as increased funding for education and healthcare services and policies that promote gender equality in the workplace, can have a significant impact on improving women's health outcomes.

4. Gender-specific health concerns (reproductive health, mental health, chronic diseases):

Health problems that are specific to men or women and may be influenced by biological, social, and environmental factors are referred to as gender-specific health concerns. Women's reproductive health, which includes concerns about contraception, pregnancy, delivery, and menopause, is a major area of gender-specific health concern. For women's health and rights, access to reproductive healthcare services, such as family planning and safe abortion, is essential. Another significant area of gender-specific health concern is mental health since women are more prone than men to experience trauma, despair, and anxiety. These inequities may be caused by gender-based violence, societal injustices, and biological factors including hormonal shifts and reproductive events.

Regarding mental health issues post-pregnancy or post-menopause, one of the respondents said,

"After giving birth, I struggled with postpartum depression for a considerable amount of time. When it wasn't adequately handled, I had to deal with many issues, take several drugs, and switch physicians frequently."

Another one shared her experience post-menopause and talked about the hormonal changes that affected her mental health and how she was on medications for quite a long time.

"After menopause, my body never responded the way it had before. I avoided practically everything since I didn't enjoy anything. Although my kids are physicians, I needed counseling, and medication from a psychiatrist was the only thing that helped me."

Women often have different symptoms, risk factors, and outcomes than men when it comes to chronic illnesses, including heart disease, diabetes, and cancer. For instance, heart disease is the number one killer of women worldwide, yet women may experience different symptoms than men, making diagnosis and treatment more difficult. An all-encompassing strategy that considers the biological, social, and environmental factors that contribute to these disparities is necessary to address gender-specific health issues. This also involves addressing socioeconomic determinants of health, including poverty and discrimination,

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advocating policies and programs that promote gender equality, and increasing access to healthcare services that are sensitive to gender and cultural differences.

Societal and cultural norms contribute to gender-based violence and discrimination.

Societal and cultural norms play a significant role in perpetuating gender-based violence and discrimination against women. These norms are often deeply ingrained in cultural beliefs and practices and can be challenging to change. Some of these norms include the normalization of violence against women, patriarchal attitudes that prioritize male dominance, and victim-blaming attitudes that shift responsibility away from perpetrators (Heise et al, 2019)¹³.

One key norm that contributes to gender-based violence is the idea of "masculinity" and its association with dominance and aggression. Men who adhere to traditional notions of masculinity may view violence to assert their dominance and control over women (Heise et al., 2019). This can result in intimate partner violence, sexual assault, and other forms of gender-based violence.

Another societal norm that contributes to gender-based violence is the idea of "honour" and its association with women's sexuality and chastity. In many cultures, a woman's virginity is seen as a source of family honour, and any perceived violation of this honour can lead to violence against the woman (Heise et al., 2019). Honour killings, for example, are a form of violence that is perpetrated against women who are perceived to have brought shame to their family by engaging in behaviours that are seen as immoral or disobedient.

Gender-based violence is also perpetuated by the idea of victim-blaming, which places the responsibility for the violence on the victim rather than the perpetrator. Victim-blaming attitudes can be seen in comments such as "she was asking for it" or "she shouldn't have been out so late at night." These attitudes shift the blame away from the perpetrator and reinforce the idea that women are responsible for preventing their own victimization (Heise et al., 2019).

Additionally, cultural norms that prioritize male dominance can contribute to gender-based discrimination and violence against women. In many cultures, men are seen as the primary breadwinners and decision-makers, while women are expected to be submissive and obedient. This can result in women being denied access to education, employment opportunities, and healthcare, limiting their ability to achieve economic empowerment and independence (World Bank, 2012)¹⁴.

In conclusion, societal and cultural norms play a significant role in perpetuating gender-based violence and discrimination against women. These norms can be deeply ingrained in cultural beliefs and practices and can be challenging to change. However, it is essential to challenge these norms and promote gender equality to eliminate violence against women and promote women's health and well-being.

Thematic analysis of respondents to assess recurring themes.

Based on the data presented, the study aimed to gather information about gender roles, expectations, and their effects on women's health outcomes. The study included 19

¹³ Heise, L., Greene, M. E., Opper, N., Stavropoulou, M., Harper, C., Nascimento, M., & Zewdie, D. (2019). Gender inequality and restrictive gender norms: framing the challenges to health. *The Lancet*, 393(10189), 2440-2454.

¹⁴ World Bank. (2012). Gender equality and development.

<https://openknowledge.worldbank.org/entities/publication/51c285f6-0200-590c-97d3-95b937be3271>

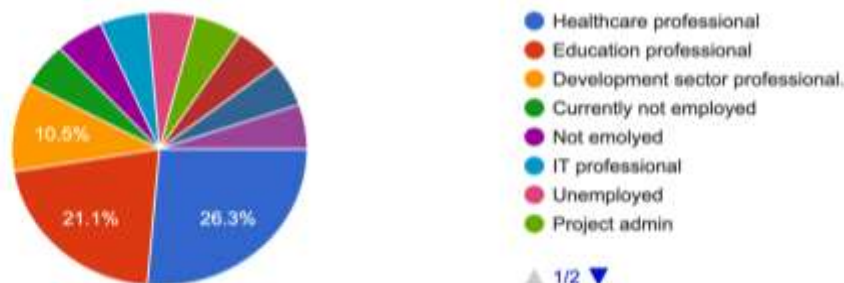
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respondents who were asked questions about their gender, age, educational background, employment status, occupation, challenges, and barriers related to gender roles, gender-specific health concerns, and experiences of gender-based violence and discrimination.

Most of the respondents identified as female (89.5%) and had a graduate or professional degree (78.9%). Most were currently employed (68.4%) and worked in healthcare, education, or the development sector.

5) If yes, what is your occupation?

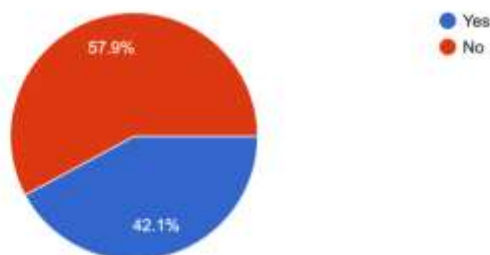
19 responses



Over half of the respondents (57.9%) reported experiencing challenges or barriers related to gender roles and expectations in their personal or professional lives. These included issues related to inequality in the workplace, expectations around appearance, and safety concerns. Respondents reported that gender roles and expectations related to caregiving, household responsibilities, and work had a negative impact on women's health outcomes.

6) Have you experienced any challenges or barriers related to gender roles and expectations in your personal or professional life?

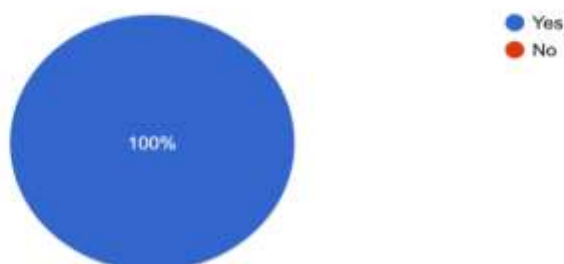
19 responses



Reproductive health and mental health were identified as gender-specific health concerns in their community. All respondents agreed that societal and cultural norms contribute to gender-based violence and discrimination.

10) Do you think societal and cultural norms contribute to gender-based violence and discrimination?

19 responses

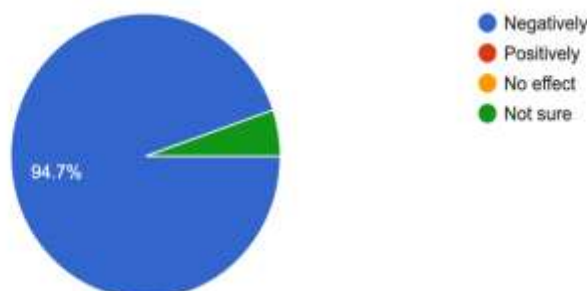


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While (94.7%) believed that this affects women's health outcomes negatively.

11) If yes, and how do these affect women's health outcomes?

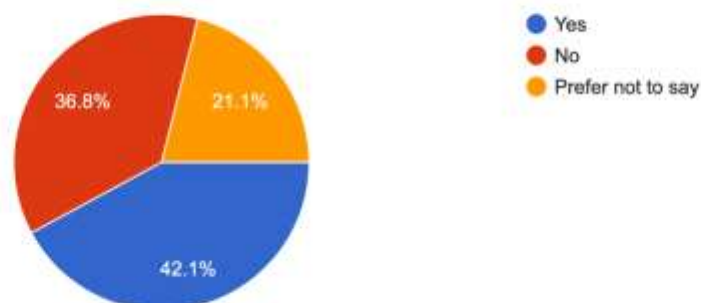
19 responses



Nearly half of the respondents (42.1%) reported experiencing gender-based violence or discrimination, and the impact on their health was described as negative, with mental health being the most affected. Anxiety, depression, hopelessness, and suicidal thoughts were among the reported impacts.

12) Have you or someone you know experienced gender-based violence or discrimination?

19 responses



Overall, the study suggests that gender roles, expectations, and gender-based violence and discrimination have a negative impact on women's health outcomes. The study highlights the need for further research and interventions to address these issues and promote gender equality.

Need for gender-sensitive interventions to promote health equity and enhance women's lives.

Addressing Gender-Based Discrimination: Gender-based discrimination is a significant barrier to achieving gender equality and enhancing women's health. Therefore, gender-sensitive interventions should address gender-based discrimination in all forms to create a more equitable society. Policies and interventions must address the underlying structural and systemic causes of gender-based discrimination, including social norms, stereotypes, and unequal power relations.

Improving Access to Healthcare: Women face numerous barriers to accessing healthcare, including gender-based discrimination, poverty, and lack of education. Gender-sensitive interventions should focus on improving access to healthcare for women. This includes

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improving the quality of care, reducing healthcare costs, and addressing gender-based barriers to accessing care (UN Women, 2021).¹⁵

Enhancing Economic Empowerment: Economic empowerment is essential to enhance women's health and well-being. Gender-sensitive interventions should focus on improving women's access to education, training, and employment opportunities. This includes promoting equal pay for equal work, creating safe working conditions, and providing childcare support.

Promoting Gender-Responsive Policies: Gender-sensitive interventions should promote gender-responsive policies that address the specific needs and challenges faced by women. This includes policies that promote women's participation in decision-making processes, address gender-based discrimination, and enhance access to healthcare and education. A study in India,¹⁶ for example, showed that the attitudes around female leadership shifted dramatically after a law was passed that required 30% of local village council seats to be reserved for women. Legal approaches are advantageous because of their scale, but they depend on successful execution and enforcement, which is frequently inadequate.¹⁷

In conclusion, gender-sensitive interventions are crucial for promoting health equity and enhancing women's lives. These interventions should address gender-based discrimination, improve access to healthcare, enhance economic empowerment, address gender-based violence, and promote gender-responsive policies. By implementing these interventions, we can create a more just and equitable society without barriers and discrimination.

CONCLUSION

Gender roles and expectations have a significant impact on women's health. They can limit women's access to healthcare, education, and employment opportunities, while also increasing their vulnerability to gender-based violence, reproductive health problems, and mental health issues.

To advance gender equality and improve women's health outcomes, it is critical to overcome the obstacles that prevent women from gaining access to resources for economic empowerment, education, and healthcare. This includes tackling socioeconomic determinants of health, advocating for policies and programs that support women's empowerment and gender equality, and enhancing access to gender-sensitive and culturally acceptable healthcare services.

When treating gender-specific health issues, such as reproductive health, mental health, and chronic illnesses, it is also important to take into account the distinct biological, social, and environmental factors that contribute to these disparities. This may involve tackling social and economic inequities, advancing gender-sensitive research and healthcare practices, and advancing laws that support women's empowerment and gender equality.

¹⁵ Ending violence against women <https://www.unwomen.org/en/what-we-do/ending-violence-against-women>

¹⁶ Beaman L, Chattopadhyaya Raghavendra, Duflo E, Pande R, Topalova P. Powerful women: Does exposure reduce bias. *Q J Econ* 2009; **124**: 1497–540.

¹⁷ Heise, L., Greene, M. E., Opper, N., Stavropoulou, M., Harper, C., Nascimento, M., & Zewdie, D. (2019). Gender inequality and restrictive gender norms: framing the challenges to health. *The Lancet*, 393(10189), 2440-2454.

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Acknowledgment

The author(s) appreciates all those who participated in the study and helped to facilitate the research process.

Conflict of Interest

The author(s) declared no conflict of interest.

How to cite this article: Ain, Q.Q.U. & Rasool, M.A. (2024). Women's Health and the Impact of Gender Roles and Expectations: Challenges and Opportunities. *International Journal of Indian Psychology*, *12*(2), 564-575. DIP:18.01.056.20241202, DOI:10.25215/1202.056