Timor-Leste Population and Housing Census 2022

Thematic Report on Gender

INSTITUTO NACIONAL DE ESTATISTICA TIMOR-LESTE I.P.

Timor-Leste
Population and Housing Census 2022

Thematic Report
Gender

December 2024

Timor-Leste Population and Housing Census 2022, Thematic Report–Gender

The Timor-Leste National Institute of Statistics (INETL)

Dili, December 2024

Preface

The Population and Housing Census 2022, conducted by the Timor-Leste National Institute of Statistics (INETL) from 5 September to 5 October 2022, underscored our continuing commitment to decision-making grounded in robust data analysis. Utilizing modern technology in the form of tablets for data collection, the census laid the foundation for a comprehensive understanding of our nation's demographic landscape. Initial census basic tablets were released in the latter part of 2023, enriching our understanding of the demographic intricacies captured during Timor-Leste Population and Housing Census 2022.

This publication, is one of several detailed thematic census reports, addressing internal and international migration. Crucial areas such as characteristics, origin and destination of internal and international migrants, duration of residence, reasons for migration and country of citizenship of residents in Timor-Leste serve as a cornerstone for informed policymaking.

At this juncture, I would like to acknowledge the collective dedication of the INETL staff and the multistakeholder Census Technical Committee, led by Mr. Elias dos Santos Ferreira, President of INETL, I.P., in the successful completion of this census.

Their tireless efforts steered the census process from its initiation to the release of this report. Gratitude is also extended to our development partners from the UN System, among them, the UNFPA, UNICEF, UNDP, UN Women, WFP and ILO, whose invaluable contributions have significantly enriched the census endeavour.

Similarly, the support that we received from the Australian Bureau of Statistics (ABS) throughout the census process is also duly recognized. On behalf of the Ministry of Finance, I would like to invite to all individuals with a keen interest in demographics and statistical data to leverage the insights presented in this publication. It is our hope that this compilation shall serve as reliable resource for informed discourse and evidence-based decision making in the realm of our country's national development.

Thank you.

MINISTRA DAS FINANÇAS

Santina JRF Viegas Cardoso
Minister of Finance, RDTL

Acknowledgements

The Timor-Leste National Institute of Statistics (INETL), formerly the General Directorate of Statistics, implemented the Population and Housing Census 2022 under the slogan 'Our census, our future be part of it'.

The census was largely financed by the Government of Timor-Leste through the Ministry of Finance. Additional financial and material support in form of tablets and power bank, was provided by UNFPA, UN Women, UNDP, UNICEF and WFP. I would like to express my gratitude for the unwavering support towards the census.

I would like to acknowledge the invaluable technical support provided by UNFPA throughout the census process. The support provided during field staff training by UN Women is also acknowledged.

Let me also thank a team of independent international monitors from the Australian Bureau of Statistics, who worked with us throughout the enumeration period, their feedback from the field was valuable and timely.

I would like to further express my appreciation to all members of the Census Technical Committee for their advice and guidance in the census. The Census Publication Commission led a successful implementation of the census publicity campaign to ensure that the stakeholders, including the general public, were informed about the census.

Special thanks go to each and every enumerator and supervisor who worked tirelessly, visiting households across the country to collect the census information. They worked for long hours and also at odd hours in trying to collect the information.

Finally, I would like to commend the work of all staff from INETL headquarters and municipality offices, who continue to work for the success of the 2022 census project. I am grateful to the people of Timor-Leste for their cooperation, without which a successful census would not have been possible.

Elias dos Santos Ferreira, L.Ec, MM
President, Timor-Leste National Institute of Statistics

Contents

List of tables

List of figures

Abbreviations

AFR	Adolescent Fertility Rate
COVID-19	Coronavirus Disease 2019
CEDAW	Convention for the Elimination of all Forms of Discrimination against Women
CRPD	Convention on the Rights of Persons with Disabilities
DHS	Demographic and Health Survey
GAR	Gross attendance ratio
GDP	Gross Domestic Product
GDS	General Directorate of Statistics
GPI	Gender parity index
ICF	ICF International
ILO	International Labour Organization
INETL	Institute of National Statistics of Timor-Leste
ISCO	International Standard Classification of Occupations
ISIC	International Standard Industrial Classification
LFPR	Labour Force Participation Rate
LU	Labour underutilization
MCA	Multiple Classification Analysis
MMA	Maternal mortality ratio
NAP 1325	UN Security Council Resolution 1325 on Women, Peace and Security
NAR	Net attendance ratio
NEET	Not in Education, Employment, or Training
NESP	National Education Strategic Plan
NSD	National Statistics Directorate
PHC	Population and Housing Census
R2	Coefficient of determination
SMAM	Singulate mean age at marriage
SDG	Sustainable Development Goals
SDP	Strategic Development Plan
STI	Sexually transmitted infection
TBA	Traditional birth attendant Total Fertility Rate
TFR	Total Fertility Rate
TLPHC	Timor-Leste Population and Housing Census
TUS	Time-use survey
UN	United Nations
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNICEF	United Nations Children's Fund
WASH	Water, Sanitation and Hygiene
WG	Washington Group
WHO	World Health Organization

Executive Summary

This Thematic Report on Gender was developed based on the 2022 Timor-Leste Population and Housing Census (TLPHC) and underscores the critical importance of addressing gender inequities to honour equal rights and opportunities for all people in Timor-Leste. In line with recommendations made in CEDAW's fourth periodic report to the State Party, the TLPHC 2022 findings show that significant gender discrimination remains in place in many areas. Over the years, at the international and national level, the country has made important legal commitments to advancing women's rights and achieving gender equality. Although some limitations are present in the census data to draw a comprehensive picture of gender equality, the census provides interesting material to look into the country's progress in using gender mainstreaming to reach gender equality.

The report covered the following topics:

1. Introduction
2. Population Demographics and Dynamics
3. Marital status
4. Mortality and Health
5. Fertility
6. Education
7. Economic activity status
8. Disability
9. Social status of females
10. Opportunities, challenges and recommendations

<u>Population Demographics and Dynamics</u>

- The total population is 1,340,925, of which 660,144 were females (49.2 percent), and 680,781 were males (50.8 percent). These percentages were similar in both urban and rural areas.
- In 2022, the sex ratio for all ages was 103.3, i.e. for every 100 females, there were 103.3 males in Timor-Leste. There are only minor differences between urban and rural areas.
- The mean age for males in Timor-Leste is 25.6 years. Dili has the lowest male mean age (23.9 years) among the municipalities, while Atauro and Viqueque have the highest (27.2 years). The national average age for females is 26.0 years, with Viqueque having the highest mean age for females at (29.0 years). Overall, the mean age for females in Timor-Leste is higher than for males, reflecting the country's longer life expectancy for females.
- The overwhelming majority of the population was born in Timor-Leste, and less than one percent of the total population was born in other countries. In the foreign-born population, there are relatively more females than males.
- The census figures of the last three censuses show that during the period 2010 – 2015, the growth of the female population (10.8 percent) was higher than the growth of the male population (8.2 percent).
- At the country level, 89.9 percent of male children and 89.8 percent of female children are registered.

Marital status

In various ways, marital status is important for the position of women and girls. In many countries, marital status is closely connected to the socio-economic position of women. It is related to the property and hereditary rights of women. Marital status also affects the participation of women in the labour market.

- There are noticeable differences between males and females. Among males 14 years of age and older, 46.7 percent are never married, compared to 37.1 percent for females. In contrast, the proportion of married males is 50.3 percent, lower than the 53.6 percent for females.
- In all the municipalities, the percentage of never-married females are lower than the proportions of never-married males due to the lower age at marriage for females than for males.
- The Singulate Mean Age at Marriage (SMAM) for males was 28.8 years, while the SMAM for females was 25.3 years, a difference of 3.5 years. For males and females, the singulate mean age at marriage is higher in urban than in rural areas. The mean age at first marriage for males and females has increased over the years
- According to the census, 0.2 percent of all females 20 – 24 years old at the time of the census were married before age 15, and 4.9 percent before age 18.
- On average, women who married at ages 14, 15 and 16 had an age difference of more than seven years with their husbands. Women who first married at age 20 had a husband 4.9 years older. The older the age at first marriage, the less the difference between the spouses: 3.7 years at marriage age 25, 2.5 at age 30, 1.5 at age 35 and 0.8 at age 39.
- For all ages, the percentage of widowed females is considerably higher than that of widowed males. Between ages 60 and 64, a quarter of all females are widowed, against only 7.3 percent of males. The majority of widows live in an extended household. Among all ages, 57.9 percent live in an extended household.

Mortality and Health

By analyzing information on deaths, the TLPHC helps estimate mortality rates, identify trends in life expectancy, and uncover disparities based on factors such as gender, age, and location.

- In Timor-Leste, life expectancy at birth for males stood at 65.1 in 2022. At 69.2 years, female life expectancy exceeds male life expectancy at birth by about four years. Between 2004 and 2022, male life expectancy at birth increased by 7.7 years. In comparison, female life expectancy at birth increased at a steeper rate, from 58.9 years to 69.2 years. This represents an increase of 10.3 years.
- The female life expectancy in urban areas was 71.1 years compared to 65.7 years in rural areas. For males, this was 68.7 years and 63.2 years, respectively.
- Infant mortality was higher among males than females, estimated at 46.3 males versus 38.3 female infant deaths per 1,000 live births. The child mortality rate refers to the probability for a child aged 1 to die before reaching the exact age of five years. child mortality among males was somewhat higher than among females: 8.1 deaths per 1,000 live births compared to 6.8 per 1,000 live births.

- Under-five mortality remains a challenge in Timor-Leste despite the fact that it is declining. The adjusted under-five mortality stood at 54.5 deaths per 1,000 live births based on TLPHC 2022 data. When comparing data from August 2012 to June 2021, for example, mortality among under-five males in urban areas was 53.2 compared to 47.8 in rural areas. In comparison, a total of 42.4 female under-five deaths occurred in urban areas (August 2012) compared to 38.9 June 2021.
- Based on the TLPHC, the 2022 MMR stood at 413 deaths per 100,000 live births. This is a slight decrease compared to 2015, when it was 426 deaths per 100,000 live births. In 2010, the MMR stood at 570 maternal deaths per 100,000 live births. Timor-Leste has the highest MMR among all countries in Southeast Asia. Its MMR is almost twice as high as the MMR in Cambodia (218 deaths per 100,000 live births), which has the second highest MMR.
- About 68.5 percent of women aged 15 years and over who had a birth in the last five years before the census were assisted by skilled birth attendants (SBA). This is an increase compared to the latest DHS data when skilled birth attendance was 57 percent (2016) and 30 percent (2009-2010). Skilled birth attendance in rural areas was also much lower than in urban areas, 59.2 percent versus 91.8 percent, respectively. Higher skilled birth attendance is also related to higher school attainment and higher wealth status of the household.
- About 8.7 percent of households get their water from an unimproved river, stream, lake, pond or irrigation channel. An analysis of TLPHC data to determine whether there was a difference in access to an improved water source showed that male- and female-headed households have essentially the same drinking water sources. Also, there was little difference in the 2022 TLPHC in the materials used for energy and cooking between male and female-headed households.

Fertility and reproductive health

Fertility is inherently a gender issue because it is closely tied to gender roles, norms, and inequalities in society.

- In the 2022 TLPHC, various indirect estimation techniques were used to estimate the TFR for Timor-Leste. The TFR has been halved from a level of 7.2 in 2004 to the current 3.6 children per woman. In 2010, the census showed a TFR of 5.9. In 2015, the TFR had declined to 4.5 children per woman. Total fertility in rural areas (4.0. children per woman) is higher than in urban areas (3.0 children per woman).
- According to the 2022 TLPHC, the sex ratio is 113.8 male births per 100 female births. Also in the 2010 and 2015 TLPHCs, the sex ratio of children born in the last 12 months before the census was high: 111.5 in 2010 and 113.0 in 2015. It is very unlikely that these high sex ratios are caused by sex-selective abortions, but more in-depth research is needed to find the reason for the elevated sex ratios at birth in the TLPHC.
- Adolescent fertility and teenage pregnancies have profound and wide-ranging consequences, preventing young individuals from realizing their full potential. Over time, adolescent fertility has shown a significant downward trend. According to the 2003 DHS, the AFR was 78 births per 1,000 adolescent women. Over the past two decades, this figure has more than halved, reaching 34 births per 1,000 adolescent women in 2022.
- It has been proposed to use the proportion of women aged 40 - 49 who never had a live birth as a measure of primary infertility. Using this methodology, Timor-Leste would have an infertility rate of 9.8 percent.

Education

While efforts to expand access to education have benefited both genders, gaps in school attendance, literacy and educational attainment remain. Approximately half of the population aged 3-34 years were attending school, resulting in a sex ratio of 100.0. The gender parity index (GPI) was 103.1, as 48.7 percent of all males and 50.2 percent of all females were attending school.

- By age five, 38.2 percent of children were attending school, 40 percent of females versus 36.3 percent of males.
- The net attendance ratio (NAR) for pre-primary education stood at 31.8 percent for both sexes, 30.4 percent for males, and 33.3 percent for females. This implies a GPI of 1.10, as a higher percentage of females attended pre-primary education compared to males.
- The NAR for primary education was 75.2 percent, slightly higher for females (76 percent) than males (74.4 percent). In 2015, the NAR for both sexes was higher at 80.8 percent. The decrease in NAR is likely due to a drop in attendance related to the COVID-19
- The total NAR for secondary education in 2022 was 40.1 percent, a considerable difference compared to 2015, when it was 32.8. The GPI for NAR was 1.31 for secondary education, much greater than the GPI for primary education (1.02).
- The NAR for tertiary education is currently higher for females than males, standing at 22.2 percent compared to 14.5 percent, respectively.
- Literacy was slightly higher among males (72.5 percent) compared to females (68.8 percent). Notably, for those aged 25 and older, literacy levels for both genders showed significant improvement compared to 2015 and earlier years. Male literacy increased from 72.6 percent in 2015 to 77.1 percent in 2022, while female literacy rose from 62.1 percent to 71.7 percent during the same period.
- A total of 394,438 persons three years of age and older in Timor-Leste never went to school, 191,513 males (30.2 percent) and 203,025 females (33.0 percent). There were ignificant differences between males and females within the never-attended school population. In rural areas, 36.3 percent of women had never gone to school, against 14.2 percent in urban areas.

Economic activity status

SDG target 8.5 aims to achieve full employment and decent work for all with equal pay. Gender equality and workplace equity are crucial in reaching economic opportunities for all.

- Males dominate the labour force; there are 185 thousand males in the labour force, against 129 thousand females., i.e. 40 percent more males than females in the labour force. On the other hand, 304 thousand females are outside the labour force, against 257 thousand males.
- he Labour Force Participation Rate (LFPR) for both sexes is 35.9 percent. The LFPR for males is considerably higher for males (41.9 percent), than for females (29.7 percent).
- Almost two-thirds (64.1 percent) of the population 10 years and older are outside the labour market; for females, the percentage is considerably higher than for males, 70.3 percent against 58.1 percent.
- There were about 42.4 thousand male employers with employees and about 29.0 thousand female employers with employees. Significantly more paid employees are male than female (37.7 against 27.3 percent). The percentage of self-employed females without employees is

higher than that of self-employed males (37.1 percent against 30.7 percent).The category 'Helper in a family business or farm, working without pay' is the only category with more females than males (17.9 thousand against 17.1 thousand), which results in 13.0 percent for females and 8.5 percent for males, respectively.

- In relative terms, more females than males are found in vulnerable employment. About half of all females (50.1 percent) are in vulnerable employment, against 39.2 percent of males.
- A Multiple Classification Analysis (MCA) showed that males work about 2.4 hours more on their main job than females. After controlling for intervening factors, males, on average, work 33.1 hours a week against 30.7 hours for females.
- At the time of the census, the unemployment rate was 2.9 percent. Little difference was noticed between males (2.7 percent) and females (3.0). The youth unemployment rate stood at 5.2 percent. The youth unemployment rate for both sexes is similar: 5.0 percent for males and 5.5 percent for females.
- Youth 'Not in Education, Employment or Training' (NEET) for persons 15 – 24 years was 29.3 percent, 29.1 percent for males and 29.6 percent for females. This means no clear difference exists between both sexes for the NEET indicator between males and females.
- Out of a total of 242,288 children between 10 and 17 years old, 24,122 were working, which is 10.0 percent. Among all working children, 13,101 were boys (10.6 percent of the total), and 11,021 (9.3 percent) were girls.

Disability

Persons with disabilities form a vulnerable group within which women with disability are even more vulnerable. Women with disabilities face unique challenges as they often belong to multiple marginalized groups. Population and housing censuses are notorious for underestimating the prevalence of disability in a population, though. The results in this report should therefore be interpreted with caution.

- In the 2022 TLPHC, 17,061 persons were enumerated as having a disability. This resulted in a disability prevalence rate of 1.4 percent, 1.4 percent for males and 1.5 percent for females. The overall sex ratio for persons with disabilities is 99.7 males per 100 females.
- The cause of disability is somewhat different between both sexes. The percentage of all males with a disability whose functional limitation was caused by congenital factors or at birth was 21.0 percent, against 17.9 percent for females. The most significant difference in the cause of disability is for old age. Among females, more than half (50.9 percent) are caused by old age. This is considerably higher than for males (38.8 percent).
- Persons with a disability have a significantly lower level of education than persons without a disability. young persons (15 – 24 years) with disabilities have a higher degree of literacy (40.0 percent) than those ten years of age and older. It is important to note that young females with a disability have a lower literacy rate than young males, 37.7 against 41.9 percent.
- No less than 82.1 percent of females with a disability aged five and older never attended school. For males, this is 70.2 percent.
- The labour force participation for persons with disabilities is much smaller than the rate for persons without a disability. With only 16.0 percent, females with a disability score very low.

Social status of females

- In the youngest age group, the majority of children live in a nuclear household with parents (54.4 percent), while a significant group live in an extended household (40.7 percent). In the age group 15 – 64, the percentage of persons living in nuclear and extended households is about the same. At older ages, the majority of people live in extended households (56.4 percent).
- A larger percentage of older females (59.0 percent) than males (53.4 percent) live in an extended household. On the other hand, more older males (11.5 percent) than females (8.0 percent) live together with their spouse and no one else.a larger percentage of older females (59.0 percent) than males (53.4 percent) live in an extended household. On the other hand, more older males (11.5 percent) than females (8.0 percent) live together with their spouses and no one else.
- Among the 250,270 private households, 44,535 were headed by females, i.e. 17.8 percent of all households. The highest number of female heads can be found in extended households (18,433), followed by nuclear households with one parent and children (15,791) and one-person households (8,652).
- About two-thirds of all people in agriculture work mainly or entirely for their own family consumption. Less than ten percent of all persons are involved in agriculture only to produce cash crops. There are only very small differences between the two sexes regarding the type of agricultural production they are involved in.
- There is a close relationship between gender inequality and poverty. Some of the most important links between the position of women in society and their low economic status are directly connected to gender inequalities. To shed some light on the relationship between gender and poverty, a crosstab was made in the report, in which the percentage of households in the poorest quintile is presented for each type of household, with the sex of the head of the household. For males and females living in one-person households, the percentage is higher than 20 percent, indicating that more people than expected fall in the poorest wealth quintile. The percentage for females (34.8) is higher than for males (29.5). Also, nuclear households with one parent and children are more likely to fall into the poorest wealth quintile. However, somewhat contrary to what one would expect, more fathers with children (26.3 percent), than mothers with children (23.8 percent) fall in this category. Fewer persons than expected are present in the poorest quintile for females and males in extended households (15.7 percent of females and 13.5 percent of males).

Opportunities, challenges and recommendations

Based on the findings of this gender report, a series of challenges and recommendations were formulated. These can be found in Chapter 10 of the current report.

Gender-related SDG Indicators from the 2015 and 2022 Population and Housing Census

Gender-related indicator(s)	Total		Urban		Rural		Data Source (s)	Total		Urban		Rural		Data Source (s)
	Male	Female	Male	Female	Male	Female		Male	Female	Male	Female	Male	Female	
3.1.1 **Maternal mortality** ratio (deaths per 100,000 live births)	na	426					Population and Housing Census 2015 (PHC) Mortality, Report	na	413					Population and Housing Census 2022 (PHC) Mortality, Report
3.1.2 Proportion of **births** attended by skilled health personnel	na	56.7	na	86.4	na	44.8	Population and Housing Census 2015 (PHC) Mortality, Report	na	68.5	na	91.7	na	59.2	Population and Housing Census 2022 (PHC) Mortality, Report
3.2.1 Under-5 **mortality** rate	72.4	70.8	60.4	57.6	84.9	81	PHC Mortality Report 2015	59.3	49.3	47.8	38.9	66	55	Population and Housing Census 2022 (PHC) Mortality, Report
3.2.2 Neonatal **mortality** rate (deaths in the first 28 days per 1,000 live births)	24	14					DHS 2016 Main Report							
3.7.1 Proportion of **women** of reproductive age (aged 15–49 years) who have their need for **family planning** satisfied with modern methods	na	46.6	na	43.1	na	48.1	DHS 2016 Main Report							

continued

3.7.2 **Adolescent birth** rate (aged 15–19 years) per 1,000 **women** in that age group	na	52	na	30	na	62	DHS 2016 Main Report	na	34	na	19	na	42	Population and Housing Census 2022(PHC) Fertility Report
3.a.1 Age-standardized prevalence of current tobacco use among persons aged 15–49 years	52.7	4.1	53.2	4.4	52.4	4.1	DHS 2016 Main Report							
4.2.2 Participation rate in **organized learning** (one year before the official primary entry age), by sex	44.7	47.1					PHC 2015 Education Report	36.3	40					PHC 2022 Education Report
4.3.1 Participation rate of youth (aged 15–24) in **formal and non-formal education and training** in the last 12 months, by sex	63.3	58.6					PHC 2015 Education Report	65.4	68.5					PHC 2022 Education Report
4.3.1 Participation rate of adults (aged 25–34) in formal and non-formal education and training in the last 12 months, by sex	16.6	11.8					PHC 2015 Education Report	11.3	9.9					PHC 2022 Education Report

continued

4.5.1 Parity indices (female/ male) (based on Gross Attendance Ratio):												PHC 2022 Education Report
Pre-primary education	1.7					PHC 2015 Education Report						
Primary education	0.95						0.96					
Pre-secondary education	1.03						1.04					
Secondary education	0.98						1.06					
Tertiary education	0.8						0.96					
4.6.1 Proportion of population in a given age group achieving at least a fixed level of proficiency in functional (a) literacy and (b) numeracy skills by sex												PHC 2022 Education Report
4.6.1.a. Literacy rate: 10 years of age and older							70.6	63.9				

continued

4.6.1.b. Literacy rate by age									
14-Oct					79.2	81.3			
15 - 19					85.6	86			
20 - 24					83.4	81.7			
25 - 29					80.4	77			
30 - 34					77.1	69.2			
35 - 39					72.6	62.1			
40 -44					69.9	55.5			
45 - 49					63.8	41			
50 - 54					55	30.1			
55 - 59					45.6	22.9			
60 - 64					33.9	15.7			
65 - 69					19.6	8.5			
70 - 74					15.6	9			
75 - 79					16.2	8.5			
80 - 84					16.1	9.7			
85+					18.2	12			
5.2.1 Proportion of ever-partnered women and girls aged 15 years and older subjected to (a) physical, (b) sexual or	(a) 28.5	(a) 19.2	(a) 32.7	DHS Main 2016Report	70.6	63.9			
(c) emotional violence by a current or former intimate partner in the previous 12 months (age 15–49)	(b) 3.5 (c) 8.9	(b) 3.3 (c) na	(b) 3.5 (c) na						

continued

5.3.1 Proportion of women aged 20–24 years who were married or in a union before:	na						DHS 2016 Main Report	na						Population and Housing Census 2022 (PHC) Mortality Report
age 15		2.6							0.2					
age 18		14.9							4.9					
5.5.2 Proportion of women in managerial positions	na	22.9					PHC 2015 Labour Force Report	na	27.5					Population and Housing Census 2022 (PHC) Labour Force Report
5.6.1 Proportion of women aged 15–49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care	na	35.92					DHS 2016 Main Report							
5.b.1 Proportion of individuals who own a mobile telephone (age 15–49)	77.3	65.6	86.9	78.5	72.4	59.2	DHS 2016 Main Report							
6.1.1 Proportion of population using safely managed drinking water services	77.3	77.2	94.3	94.1	70	70.3	2015 PHC	86.8	87	97.6	82.5	97.7	82.7	Population and Housing Census 2022 (PHC)

continued

6.2.1 Proportion of population using safely managed sanitation services, including a hand-washing facility with soap and water	53.8		76		45.4		DHS Main Report							
7.1.2 Proportion of population with primary reliance on clean fuels and technology 9.0 21.8 4.1	9		21.8		4.1		DHS Main Report							
8.6.1 Proportion of youth (aged 15–24 years) not in education, employment or training	16.8	23.7					PHC Education Report	29.1	29.6					Population and Housing Census 2022 (PHC) Labour Force Report
8.7.1 Proportion and number of **children aged 10–17 years engaged in child labour**, by **sex** and age														
9.2.2 **Manufacturing employment** as a proportion of total employment	1.5	2.2					PHC							

continued

11.1.1 Proportion of urban population living in slums, informal settlements or inadequate housing Indicator currently not able to be produced													
16.9.1 Proportion of children under 5 years of age whose **births have been registered** with a civil authority, by age	59.8	61	65.8		58.3		DHS Main Report						
17.8.1 Proportion of individuals using the Internet (in the last 12 months)3	31.1	22.4	59.3	45.5	16.8	10.9	DHS Main Report						

Note: where one figure is presented under the male and female columns, the data relate to both sexes.

1. Introduction

1.1. Background to the study

Timor-Leste has made notable strides in reducing gender disparities, yet significant challenges remain in achieving equitable opportunities and outcomes for men and women across different sectors. The census provides a vital and comprehensive resource for analyzing these gender dynamics, shedding light on patterns in education, employment, health, and other factors. Understanding these trends is essential for addressing structural inequalities that impact males and females differently and identifying priority areas for targeted interventions to promote gender equality. Based on the 2022 Timor-Leste Population and Housing Census (PHC), this report focuses on the situation of men, women, boys and girls. Before delving into this, however, it is important to clearly understand the definitions of 'sex' and 'gender.' Further definitions of other topics can be found in Annex 1.

Defining gender

"Gender refers to the roles, behaviors, activities, and attributes that a given society at a given time considers appropriate for men and women. In addition to the social attributes and opportunities associated with being male and female and the relationships between women and men and girls and boys, gender also refers to the relations between women and those between men. These attributes, opportunities and relationships are socially constructed and are learned through socialization processes. They are context/ time-specific and changeable. Gender determines what is expected, allowed and valued in a woman or a man in a given context. In most societies there are differences and inequalities between women and men in responsibilities assigned, activities undertaken, access to and control over resources, as well as decision-making opportunities. Gender is part of the broader socio-cultural context, as are other important criteria for socio-cultural analysis including class, race, poverty level, ethnic group, sexual orientation, age, etc." **(UN Women, n.d.).**

Defining sex

"The physical and biological characteristics that distinguish males and females" (UN Women, n.d.).

A common achievement highlighted in Timor-Leste's commitment to gender equality is the progress that has been made in Parliament, whereby women held 36.9 percent of seats as of February 2024. Efforts to improve parity in literacy and education and ensure all men and women above statutory pensionable age are receiving a pension are also notable (UN Women, n.d.).

Many challenges remain, however. Timor-Leste was ranked 64th out of 156 countries in the World Bank 2021 Global Gender Gap Index (World Bank, 2021). This is a significant improvement from previous years, but it shows that inequalities still persist with high rates of maternal mortality, gender-based violence, particularly domestic violence, women's lower labour force participation and wage employment, and limited women's representation in decision-making at the local level. Nearly 36.8 percent of women aged above 15 reported in 2016 that in the last 12 months, they had been subjected to physical, sexual violence and/or psychological by a current or former intimate partner (Timor-Leste Demographic and Health Survey 2016). Women's sexual and reproductive health needs remain unmet, with only 45.9 percent having their family planning with modern methods needs met in 2016 (Timor-Leste Demographic and Health Survey 2016).

Between the Labour Force Surveys of 2031 and 2017, the labour force participation rate did not substantially increase. Job creation mainly took place in the public sector. In addition, labour productivity decreased during this period. A worrisome trend is that real wages declined by 22 percent. According to the 2024 World Bank Timor-Leste Economic Report (Rezza, 2024), the real median wage decreased from 236 US dollars to 185 US dollars for males and from 241 to 185 US dollars for females. The report also noted that the percentage of youth aged 15 – 24 years who were not in employment, education, or training (NEET) was somewhat higher for females (31.3 percent), than for males (29.8 percent).

1.2 Gender Policy Environment

Gender equality and women's empowerment are foundational principles enshrined in the United Nations (UN) Charter, emphasising men's and women's equal rights. These commitments have been strengthened by global initiatives such as the 1995 Beijing Declaration and Platform for Action and the 2030 Agenda for Sustainable Development, which identified gender mainstreaming as a crucial strategy for promoting equality. Gender mainstreaming involves incorporating the perspectives and needs of both women and men into policies, laws, and programs to ensure equitable benefits and eliminate inequality. The ultimate goal is to achieve gender equality, whereby gender mainstreaming serves as a key strategy across sectors and institutions to make this a reality (UN Women, n.d.)

<u>At the international level:</u>

In response to the challenges mentioned above and others, the Government of Timor-Leste has shown significant national and international commitment to advancing women's rights and achieving gender equality. The Government of Timor-Leste has made numerous important commitments and efforts to advance gender equality and women's empowerment in the country. This includes:

- Agenda 2030 Sustainable Development Goals (SDGs)
- Beijing Declaration and Platform for Action
- Convention for the Elimination of all Forms of Discrimination against Women (CEDAW). The Timor-Leste Parliament ratified the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and its requisite Optional Protocol in April 2003. In 2009, the First Periodic Report to the CEDAW committee was presented. The following periodic reports were presented in 2013, and in 2021.

- International Convention on the Elimination of all Forms of Racial Discrimination
- International Covenant on Civil and Political Rights
- International Covenant on Economic, Social, and Cultural Rights
- United Nations Security Council Resolution 1325 on Women, Peace, and Security
- Convention on the Rights of the Child
- International Labor Organization Conventions on Equal Remuneration and Discrimination (employment and occupation)
- 2010 Dili Declaration ”A New Vision for Peacebuilding and Statebuilding” (World Bank Group, 2024)
- The second phase of the Maubisse Declaration on Rural Women (2018– 2023) to promote the empowerment of rural women in 2018
- The second and third national action plans on gender-based violence, in 2017 and 2022, for the periods 2017–2022 and 2022–2032
- Law on “Bolsa da Mãe – Nova Geração”, extending social support to pregnant women and children in 2021
- Law against Trafficking in Persons, in 2017
- The Law on the creation of the social security contributory regime, in 2017
- The Expropriation Law, to provide protection to women in cases of expropriation of land, in 2017 (United Nations, 2023).

At the national level:

The Constitution mentions that men and women must be treated equally in all aspects of life and stresses the need to end gender discrimination and gender-based violence. National legal frameworks, such as the Village (Suco) Law passed in July 2016 or the Law Against Domestic Violence enacted in 2010, have further proven such commitment. Other laws towards gender equality included the Law Establishing the Social Security Contribution Scheme, the Law Establishing the Special Regime for Definition of Ownership of Immovable Property (Land Law, 2017), Suco Law, and the Law Against Human Trafficking (2017).

In addition, gender-responsive budget planning was introduced, and numerous gender policy mandates, development plans and strategic action plans have been developed (World Bank, 2021). In the beginning of 2024, the 9th Constitutional Government, with the support of UN Women, officially launched the second generation of the National Action Plan (2024-2028) to implement UN Security Council Resolution 1325 on Women, Peace and Security (NAP 1325), for example. The NAP 1325 is a five-year national strategy to integrate gender equality and women’s leadership into all aspects of conflict prevention and resolution, peacebuilding, post-conflict recovery and humanitarian response in Timor-Leste. The establishment of agencies or oversight bodies, such as the Secretary of State for Gender Equality, the Parliament Gender Resource Center and the Secretary of State for the Promotion of Equality, further showcases national commitment to tackling gender inequality.

1.3 Methodology

This Thematic Report on Gender is based on the 2022 PHC, which crucially elucidates the differences in roles, activities, needs, opportunities, and rights of men, women, boys, and girls in Timor-Leste. It explores the relationships between males and females and the opportunities, barriers, and challenges they face in comparison to one another. The results presented in this report should inform policymaking programming, help prevent interventions from worsening gender inequalities and promote greater equity and justice in gender relations. Where data are available, estimates from previous censuses are presented, and results are presented at national, municipal, and rural-urban levels.
For the purpose of this report, we only consider the population in private households, which provides a wider range of demographic and socioeconomic data. Although persons in collective households were enumerated, only a limited set of questions were asked about the characteristics of persons living in collective households.

In some instances, results were obtained through logit regressions, a statistical method related to linear regression techniques. Logit regression is designed to assess the impact of multiple independent explanatory variables on the likelihood of a binary outcome, such as whether an individual is literate ("yes" or "no"). In a linear regression, the influence of each explanatory variable on the dependent variable is expressed through regression coefficients. In logit regressions, these coefficients represent the natural logarithms of the odds ratios for each category of the explanatory variables. Since these logarithmic values can be challenging to interpret, their exponential function is calculated to yield the corresponding odds ratios.

It is important to note that an odds ratio differs from a probability. In the context of a logit regression, the odds ratio represents the likelihood of an event occurring compared to it not occurring relative to a reference category. For example, the odds ratio might compare the likelihood of a woman being literate to that of a man, with the male category serving as the reference category.

As a multivariate model, logit regression provides the net effect of each explanatory variable on the dependent variable after controlling for the effect of other variables in the equation. An odds ratio greater than 1 indicates higher odds of experiencing the event for individuals in that category compared to the reference group, while a value less than 1 signifies lower odds. In this analysis, the results of logit regressions are visually presented in bar charts. The reference categories for each explanatory variable are assigned a value of "1". They are depicted in green unless they represent a high-risk group. High-risk categories are shown in red, medium-risk categories in orange, and categories with little or no effect are represented in blue.

The report also uses Multiple Classification Analysis (MCA). MCA is a statistical method from the linear regression family that studies how multiple explanatory variables affect a dependent variable at the interval or ratio level. MCA can work with both categorical and continuous data. After fitting the model, it presents unadjusted and adjusted means. Unadjusted means are based on the raw data, while adjusted means are shown after controlling for the other intervening explanatory variables in the equation. In addition to the means, MCA also presents the results, again in unadjusted and adjusted form, as deviations from the overall mean. This makes MCA a valuable tool for highlighting the differences between various groups in society while controlling for confounding variables. In this report, MCA allows for comparing males and females while controlling for other intervening factors.

In some cases, when a person's socio-economic position in a household is examined, a variable called the 'wealth index' or 'wealth quintile' is used. The wealth index summarizes all wealth characteristics of households measured in the census in a single indicator. The Demographic and Health Survey (DHS) methodology was used to calculate the wealth index. The interested reader is referred to the 2008 DHS working paper (no. 60) called 'DHS Wealth Index: Approaches for Rural and Urban Areas' (Rutstein, 2008).

1.4 Limitations

There are two challenges in using census data for gender analysis. One is that the statistical analysis of gender issues (using any data source) is often limited to an oversimplified analysis of indicators that document differences by sex. The second challenge is that census data only address a limited number of concerns that are of interest to gender analysis (leading demographic indicators, marital status, life expectancy at birth, education, labour market, household headship, disability, etc.).

Together with the limitations linked to the nature of the census data, which provides a wide range of data but not necessarily detailed results, the analysis in this report is limited to males and females, and not men and women, since data on non-binary persons were not available. Even though the 2022 TLPHC must be applauded for not only having included male and female as gender variables but also 'other', the number of responses in this last category was so residual (less than 50 cases) that an analysis of the non-binary respondents is impossible. That is why this gender thematic report focuses on the situation of men and women, with a particular interest in the condition of women and girls in the country. As we only base our analysis on persons who specifically answered either male or female to the question on gender, these terms are used throughout the report.

In some cases, census information was gathered at the household level, while the gender analysis would need data at the individual level. For instance, a question was asked about the main source of drinking water and the time needed to go to the source of water in minutes. However, to do a gender analysis, one would need information on which person in the household was usually involved in getting water. A whole set of questions is asked about items that the households possess, but it is unclear which persons possess these items or have access to them. For instance, a question is asked whether any member has a mobile internet connection, but it is not asked who has the connection and who is using the internet.

1.5 Report layout

The report will cover the following topics:

11. Introduction
12. Population Demographics and Dynamics
13. Marital status
14. Mortality and Health
15. Fertility
16. Education
17. Economic activity status
18. Disability
19. Social status of females
20. Opportunities, challenges and recommendations

"photo Credit: ©" INETL, I.P)

2. Population demographics and dynamics

This chapter provides a broad picture of the demographic features of the population of Timor-Leste at the time of the 2022 census, emphasising the size and characteristics of the female population vis-à-vis the male population. An important factor in a country's social and economic development is the size and structure of its population. From a gender perspective, it is important to understand population demographics and dynamics to define strategies for achieving national development goals and the SDGs. This understanding also assists the formation of effective policies for issues related to fertility and mortality, internal and international migration, and balanced regional development.

2.1. Population age and sex distribution

Number of persons

The final census results of the 2022 TLPHC showed that the country had a total population of 1,341,737 inhabitants. The population living in private households amounts to 1,340,925 individuals, while 812 individuals reside in collective households (INETL, 2023).

Considering the population in private households, the total population is 1,340,925, of which 660,144 were females (49.2 percent), and 680,781 were males (50.8 percent). These percentages were similar in both urban and rural areas. In urban areas, 50.7 percent of the population were males, and 49.3 percent were females, while in rural areas, males made up 50.8 percent of the population and females 49.2 percent (INETL, 2023).

Table 2. 1. Proportions of males and females in population by urban/ rural areas

Gender	Urban	Rural	Timor-Leste
Male	50.7	50.8	50.8
Female	49.3	49.2	49.2
Both sexes	100.00	100.00	100.00
Number	382,962	957,963	1.340.925

Source: Timor-Leste Population and Housing Census 2022

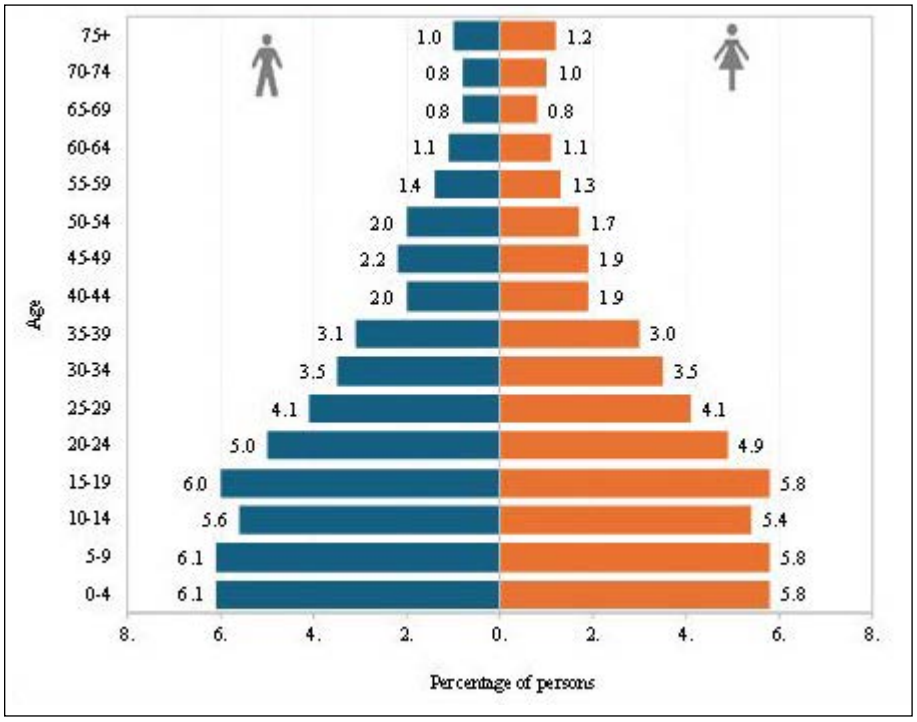
Distribution by age and sex

The population pyramid, showing the distribution of the population by 5 years age groups, is presented in Figure 2. 1. Two bumps in the population pyramids, representing demographic 'anomalies' are seen for ages around 20 and 50 years old, meaning that these demographic irregularities occurred around 1970 and 2000. Note that the number of persons in the age groups 0 to 15 is not substantially higher

than in the age group between 15 and 19. This may indicate that the decline in the total fertility rate (TFR) from 7.2 children in 2004 to 3.6 children in 2022 affected the population's age distribution in the young age groups (INETL, 2024).

The decrease in fertility and the accompanying changes in the age structure may play an important role in the country's future economic development. It is estimated that between 2022 and 2062, the dependency ratio, i.e. the population aged 15–64 divided by the population younger than 15 and 65 and older, will decrease from 0.70 in 2022 to 0.59 in 2062. Timor-Leste can use this favourable age structure, with declining proportions of its population in the dependent age groups, to increase its GDP growth and alleviate the current poverty levels. This unique opportunity is called the demographic dividend. In the series of thematic reports of the 2022 TLPHC, a report is entirely dedicated to analysing the demographic dividend (Timor-Leste National Institute of Statistics (INETL), 2024).

Figure 2. 1. Population pyramid, relative age and sex distribution, Timor-Leste



Source: Timor-Leste Population and Housing Census 2022

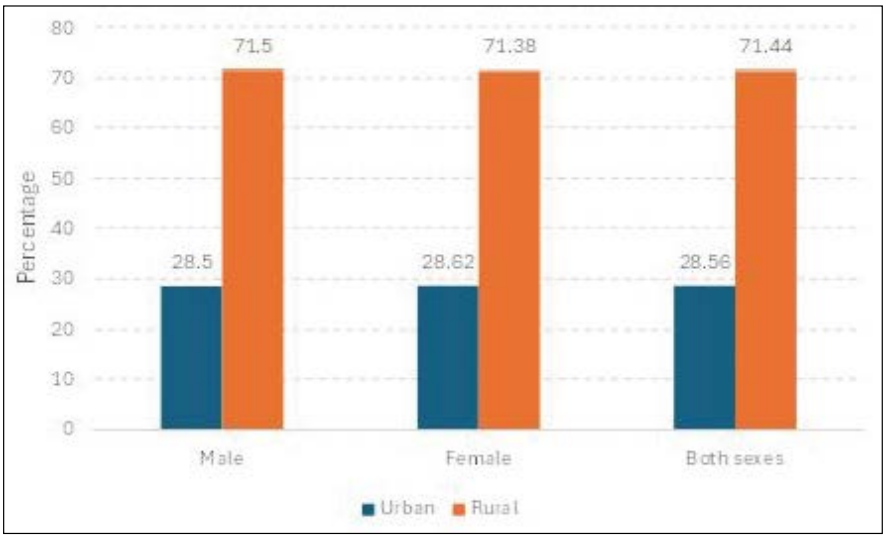
Spatial distribution

The majority of the population of Timor-Leste – about three quarters- was residing in rural areas in 2022 (Figure 2. 2). For both sexes, the proportion of those who were residing in urban areas was 28.56 percent (28.50 percent of males and 28.62 percent of females), compared to 71.44 percent residing in rural areas (71.50 percent of males and 71.38 percent of females).

Sex ratios

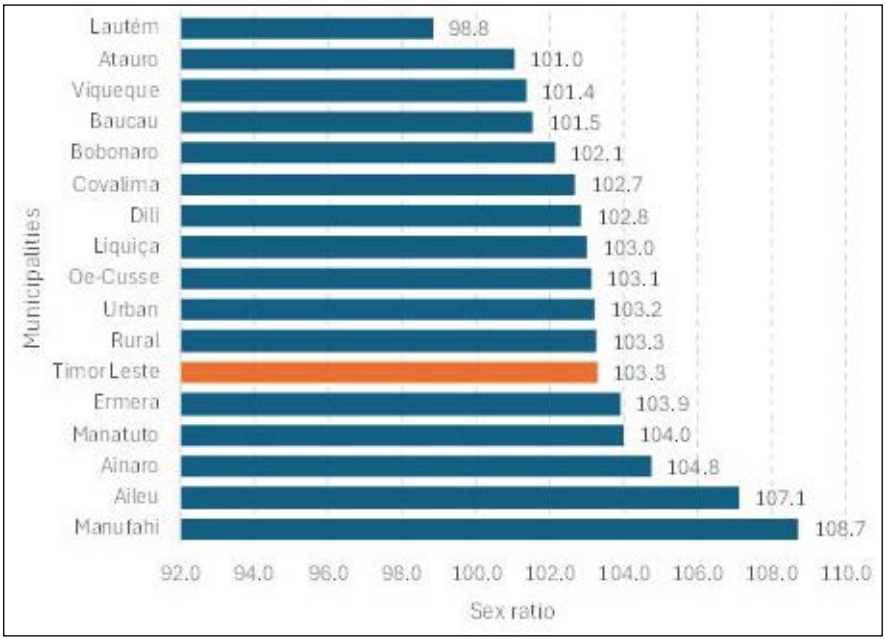
The proportion of the number of males to the number of females in a population is the sex ratio. A sex ratio of 100 means equal numbers of males and females; less than 100 means more females than males; and higher than 100 means more males than females. Many developed countries have overall sex ratios slightly below 100, with more females than males, especially in older age groups. Although somewhat more baby boys than baby girls are born, the overall sex ratio in most developed countries is typically below 100, as life expectancy for males is lower than for females. In some developing countries, the overall sex ratio might still be above 100 due to various factors such as gender differences in healthcare access, elevated maternal mortality, socioeconomic conditions, or migration patterns, which can skew the ratio. The study of sex ratios in censuses is important for gender analysis to see if sex ratio imbalances are indicative of growing inequalities (UNFPA, n.d.) The sex ratio at birth is further discussed in Chapter 5.

Figure 2. 2. Proportion of population by type of residence and sex



Source: Timor-Leste Population and Housing Census 2022

Figure 2. 3. Sex ratios by municipality



Source: Timor-Leste Population and Housing Census 2022

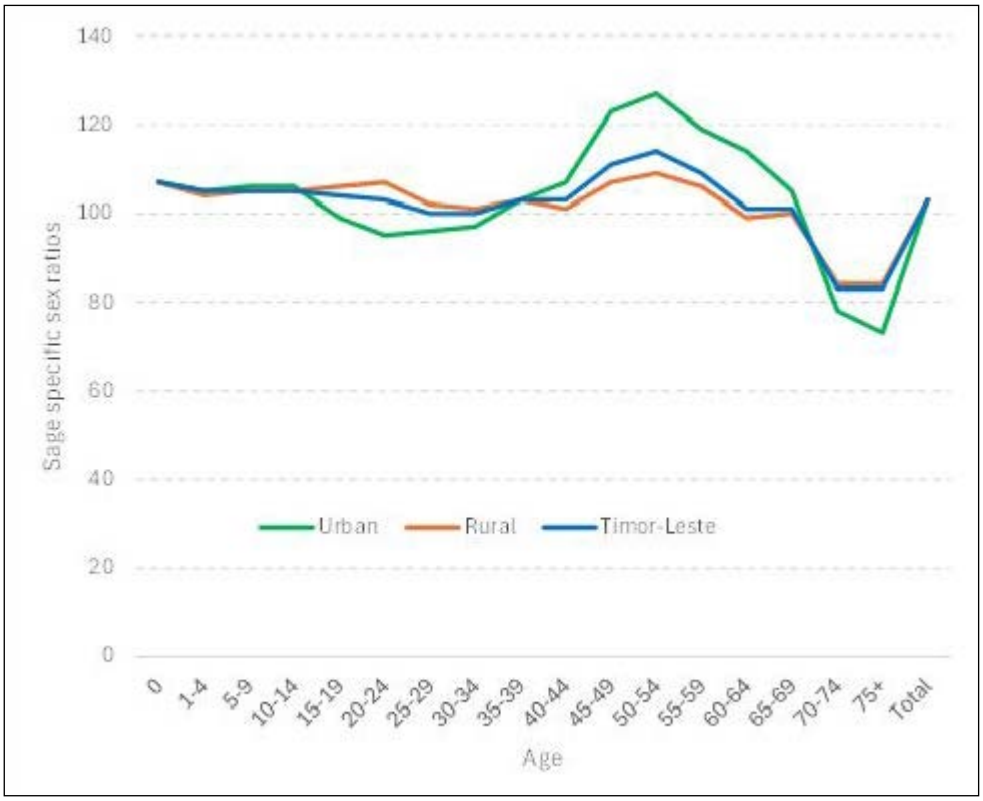
In 2022, the sex ratio for all ages was 103.3, i.e. for every 100 females, there were 103.3 males in Timor-Leste. Note that only in the age groups 70-74 and 75 years and older there were more females present than males. Figure 2. 3 shows that in all municipalities except Lautém , all ages considered, males tend to outnumber females. The lowest sex ratio is 98.8 males per 100 females in Lautém , while the highest sex ratios are found in Manufahi (108.7) and Aileu (107.1).

There are only minor differences between urban and rural areas. The respective sex ratios are 102.7 males per 100 females in urban areas and 103.3 in rural areas. There is some difference with the results of the 2015 census when the levels were more contrasted between urban and rural areas (105 for urban compared to 102 for rural) (Gardner, 2018). The decrease in the sex ratio for urban areas originates dominantly from the decrease of the sex ratio for the capital, Dili, from 107 to 103 between the two last censuses. The decrease in the sex ratio in Dili may be due to the return of male migrants to their home villages because of the COVID-19 pandemic.

The age-specific sex ratios by type of residence show an interesting pattern (Figure 2. 4). In rural areas, the age-specific sex ratios remain more or less the same from birth until age 15. After that age, there is a dip, reaching 101 males per 100 females in the age group 30 to 34. After age 45, there is a slight increase to reach 109 males per 100 females in the age group 50 -54. After that age, there is a decrease, which is related to the higher mortality among men at more advanced ages. In urban areas, the fluctuations in the age-specific sex ratios are much more dramatic. Up to age 15, the sex ratios remain quite stable, but between ages 15 and 34, there is a large decrease. In this broad age group, more females than males are residing in Timor-Leste's urban areas. It is well known that tertiary education is highly concentrated in urban centres in the country. The thematic report on education showed that since 2010, the number of female students in tertiary education surpassed that of male students. In 2010, there were 13,612 male students in tertiary education, against 10,176 female students. The 2022 census enumerated 22,464 male tertiary students against 28,081 female students. This resulted in a drop in the sex ratio among tertiary students from 133.8 in 2010 to 80.0 in 2022 (INETL, 2024) . As students have to move to urban centres for tertiary education, there is an impact on the sex ratios in these areas. Chapter 7 discusses this in further detail.

After age 35, there is a rise in the sex ratio in urban areas, with the highest values between ages 40 and 59. In the age group 50 - 54, the sex ratio is as high as 127 in urban areas. The high sex ratios in these age groups are probably due to the level of employment among men living in urban areas. The even balance of males and females occurs in the 65-69 age groups (and even before in rural areas). After 70 years old, females outnumber males in both urban and rural areas. Such observations can be explained by differences in mortality by sex.

Figure 2. 4. Age-specific sex ratios by type of residence



Source: Timor-Leste Population and Housing Census 2022

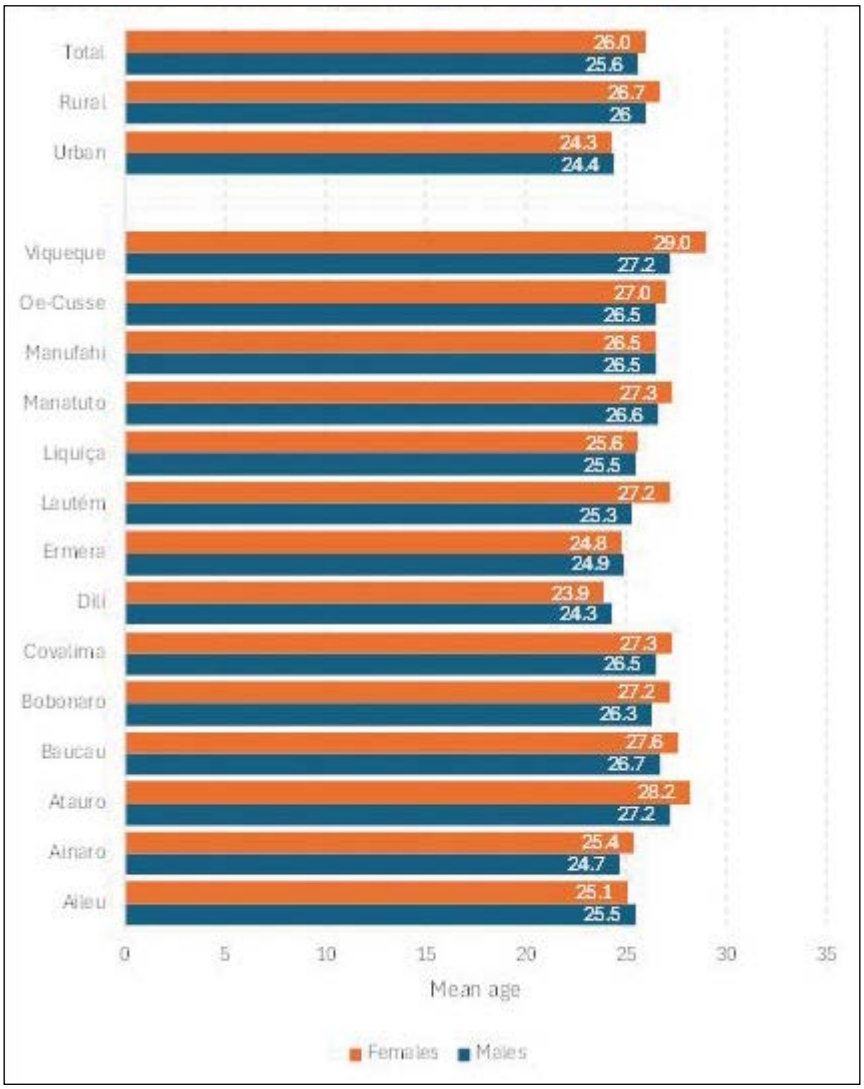
Mean/median age of the population

The mean age for males in Timor-Leste is 25.6 years. Dili has the lowest male mean age (23.9 years) among the municipalities, while Atauro and Viqueque have the highest (27.2 years). The national average age for females is 26.0 years, with Viqueque having the highest mean age for females at (29.0 years). Overall, the mean age for females in Timor-Leste is higher than for males, reflecting the country's longer life expectancy for females. The mean age for males is notably lower in urban areas (24.4 years) compared to rural areas (26.0 years) (Figure 2. 5).

The median age for males in Timor-Leste is 20.0 years. The lowest values (19.0 years) were observed in Atauro, Ermera and Lautém . The median age for females in Timor-Leste is 21.0 years. The highest value of 22.0 years is in Bobonaro. Median age values for all municipalities are higher for females than males, thanks to their longer life expectancy.

It should be noted that median age values for all municipalities are markedly lower (of about five years) than the mean age values, both for males and females. The observed difference is due to the rapid population growth (1.8 percent per year), leading to a higher proportion of young than elderly persons.

Figure 2. 5. Mean age of the population by municipality and type of residence

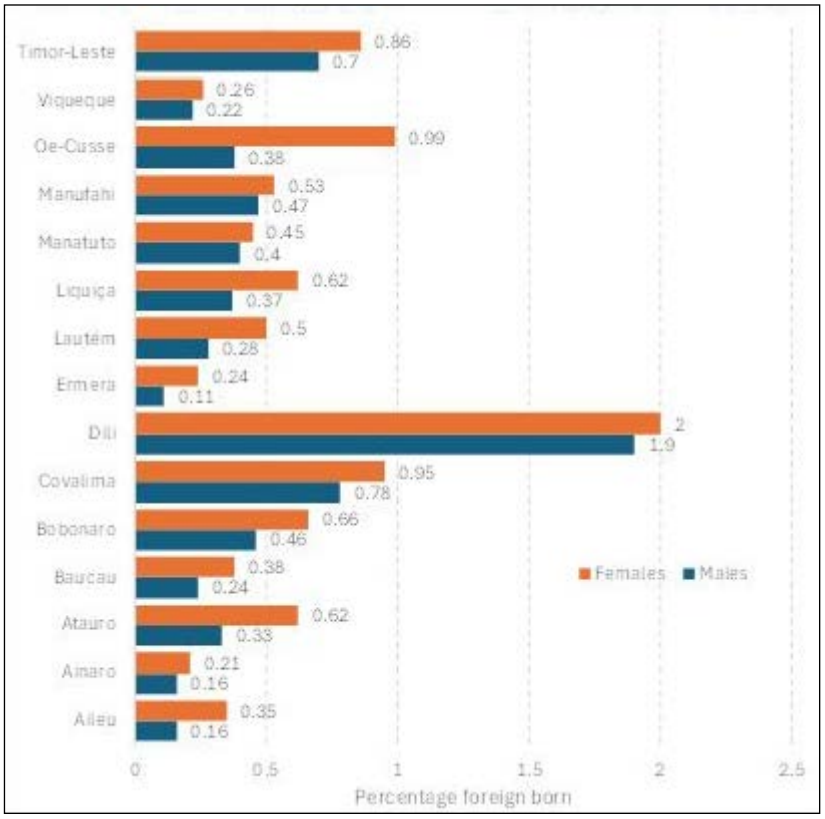


Source: Timor-Leste Population and Housing Census 2022

2.2. Country of birth

The overwhelming majority of the population was born in Timor-Leste, and less than one percent of the total population was born in other countries. In the foreign-born population, there are relatively more females than males. Figure 2. 6 shows the percentage of the population that is foreign-born by sex and municipality. It shows that a higher percentage of foreign-born females was observed in each municipality. Dili has the highest percentage of foreign-born persons. One in fifty females who live in Dili were not born in Timor-Leste. The percentage of foreign-born males residing in Dili is slightly lower than that of foreign-born females, 1.9 and 2.0 percent, respectively. The lowest percentage of males born abroad is in Ermera (0.11 percent), while Ainaro has the lowest percentage of females born abroad (.21 percent).

Figure 2. 6. Percentage of population born abroad, by sex and municipal



Source: Timor-Leste Population and Housing Census 2022

The large majority of foreign-born females (80.8 percent) are lifetime migrants from Indonesia. The second and third most important countries of birth are China (4.4 percent) and Angola (3.6 percent). The proportion of enumerated males born in China was much larger than that of females born in China (11.36 percent of foreign-born males, compared to 4.35 of foreign-born females). This can be explained by the fact that immigration from China is composed predominantly of foreign workers without their families.

2.3. Population trends and dynamics

Population dynamics of the male and female population were assessed by comparing the indicators obtained from the results of the 2022 census with those available from the 2015 and 2010 censuses.

Population size by municipality and gender for censuses conducted in 2010, 2015 and 2022 are listed in Table 2.2. There are no data for Atauro for the years 2010 and 2015. Administratively, Atauro (Kambing Island) is a newly created municipality of Timor-Leste since the 1st of January 2022, and hence only covered by the 2022 TLPHC. Atauro was one of the administrative posts (formerly subdistricts) of Dili Municipality until it became a separate municipality, effective on 1 January 2022. The population size of the Atauro municipality in 2022 was 10,295, which is only 3 percent of the population of Dili, and hence, the creation of the new municipality does not substantially influence the estimated further trends for Dili.

Table 2. 2. Population size over the last three censuses by municipality and sex

Municipality	Census 2010	Census 2010	Census 2010	Census 2015	Census 2015	Census 2015	Census 2022	Census 2022	Census 2022
	Males	Females	Total	Males	Females	Total	Males	Females	Total
Aileu	22902	21423	44325	24799	23755	48554	28053	26190	54243
Ainaro	30183	28992	59175	33488	32909	66397	37390	35693	73083
Atauro							5174	5121	10295
Baucau	56374	55320	111694	61706	62355	124061	68131	66699	134830
Bobonaro	45915	46134	92049	49653	49279	98932	53671	52855	106526
Covalima	29982	29473	59455	32021	32529	64550	37486	36313	73799
Dili	124388	109638	234026	130271	122613	252884	164765	159973	324738
Ermera	59099	57965	117064	63459	63824	127283	70139	67450	137589
Lautém	29404	30383	59787	31512	32623	64135	34733	35137	69870
Liquiça	32240	31163	63403	37378	35649	73027	42367	41200	83567
Manatuto	21844	20898	42742	22967	22574	45541	25919	24940	50859
Manufahi	25060	23568	48628	26783	25463	52246	31599	29066	60665
Oe-Cusse	31831	32194	64025	36248	35982	72230	40991	39694	80685
Viqueque	34976	35060	70036	38276	39126	77402	40363	39813	80176
Urban	166163	149923	316086	167982	160299	328281	194 002	188 960	382 962
Rural	378035	372288	750323	420579	418382	838961	486 779	471 184	957 963
Timor-Leste	544198	522211	1066409	588561	578681	1167242	680781	660144	1340925

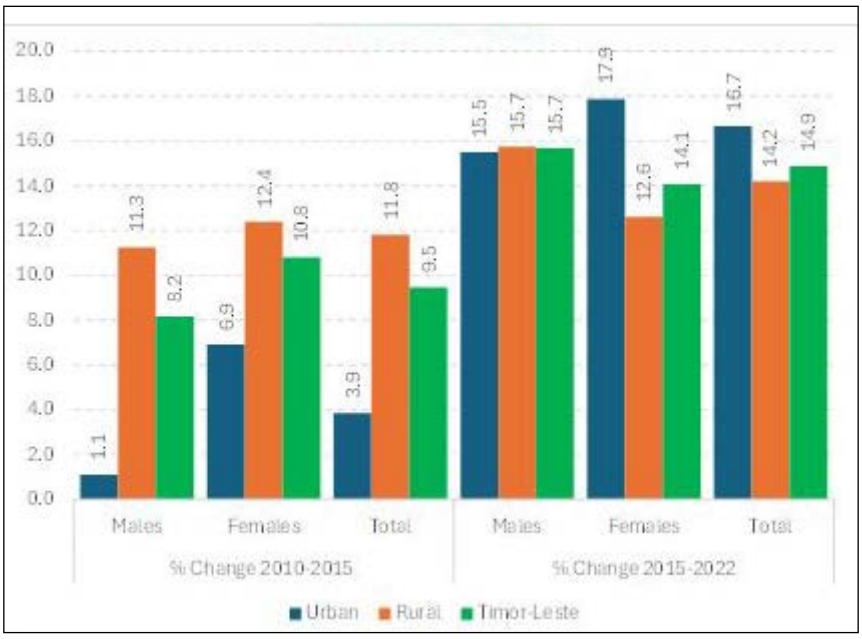
Source: Timor-Leste Population and Housing Census 2022

Table 2. 2 shows that the sizes of municipalities vary greatly from only 10,295 persons in Atauro to 324,738 in Dili. The population in Dili constitutes almost 25 percent of the total population of Timor-Leste (1,340,925).

Figure 2. 7 shows the percentage growth of the male and female population during the intercensal periods 2010 – 2015 and 2015 – 2022. Note that the second period is two years longer than the first because the 2020 census had to be postponed due to the COVID-19 pandemic. The census figures of the last three censuses show that during the period 2010 – 2015, the growth of the female population (10.8 percent) was higher than the growth of the male population (8.2 percent). During the last seven years before the current survey, male growth was higher than female growth, 15.7 percent against 14.1 percent, respectively. It is unclear what exactly caused this pattern.

An important aspect is the difference between the growth percentage between rural and urban areas and the role males and females play in these differential growth percentages. Between 2010 and 2015, the population in rural areas grew more rapidly than in urban areas. While rural areas grew by 11.8 percent, urban areas only increased by 3.9 percent. The period 2015 and 2022 saw higher growth in urban areas (16.7 percent) compared to rural areas (14.2 percent). The growth in urban areas was higher for females than males, 17.9 percent against 15.5 percent, respectively. As will be shown in the education chapter, the higher participation of young females in higher education plays an important role in this trend.

Figure 2. 7. Percentage growth of the population by sex and type of residence, for the periods 2010 - 2015 and 2015 - 2022



Source: Timor-Leste Population and Housing Census 2022

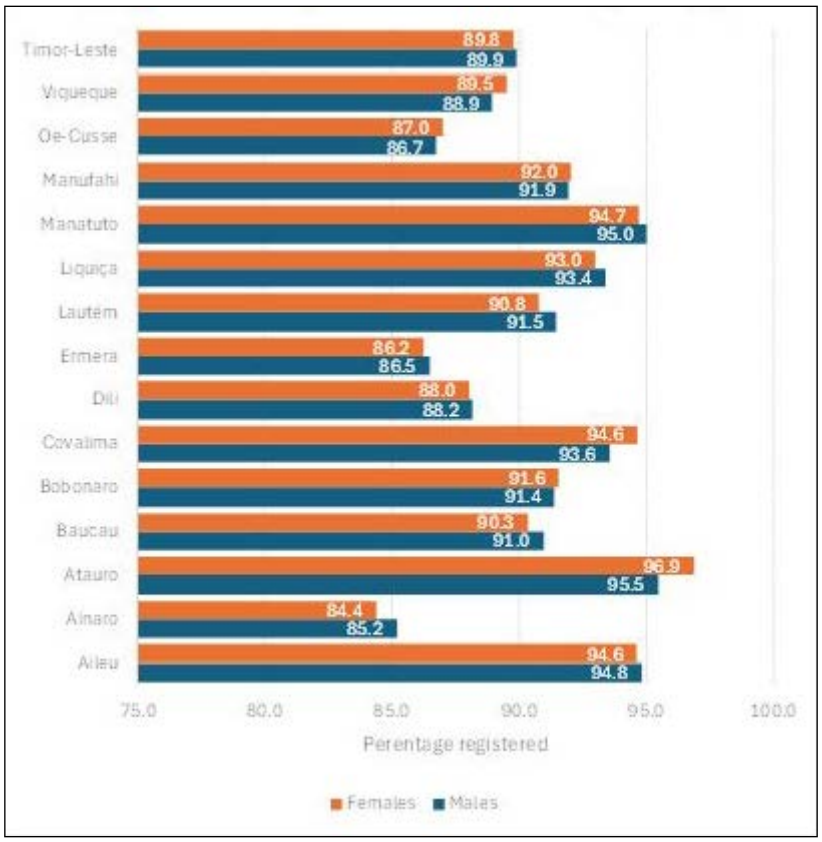
2.4. Birth registration

Birth registration can help ensure young children's protection and equal rights. In many instances, birth registration may be required to obtain basic services such as health and education (UNICEF, 2013). Many countries require birth certificates to enrol in schools and obtain health care services. For adolescents and young females, not having a birth certificate may make it more challenging to obtain reproductive and maternal health services. Birth registration may also give protection against exploitation and injustice. For young girls, it can play a role in preventing child marriage, child labour and exploitation. Not having a birth certificate may mean that children and adolescents may enter into marriage, the labour market, or even military service before the legal age. In case of a crime, they may be prosecuted as an adult and not as a child (UNICEF, 2013).

In its concluding observations on the fourth periodic report of Timor-Leste, the Committee on the Elimination of Discrimination against Women (CEDAW) (2023) advises the government to '*Strengthen its mobile birth registration units, in particular in rural and remote areas, including through the use of modern information and communications technology, and assess the impact of the birth registration campaign'*. The 2022 census shows the current coverage of birth registrations among boys and girls in the whole country and in the different municipalities. In the 2022 PHC, for all children 0 to 5 years old it was asked whether their birth had ever been registered. If the answer was positive, then the place of registration was asked, as well as whether the child had a birth certificate from the civil authorities.

The registration rates by municipalities and sex are depicted in Figure 2. 8. At the country level, 89.9 percent of male children and 89.8 percent of female children are registered. For 0.2 percent of boys and girls, it is not known whether they are registered or not. It is important to note that no real gender differences are observed. Within the municipalities, all registration differences between boys and girls are less than one percent, except for Atauro and Covalima, but in both municipalities, registration for girls is higher than for boys. The highest value for the percentage of 0-5 years old without birth registration is observed in Ainaro (14.8 percent for males and 15.6 percent for females). Perhaps this is due to the hardly accessible terrain in high mountains.

Figure 2. 8. Percentage of children 0 - 5 years old whose birth was registered, by sex and municipality



Source: Timor-Leste Population and Housing Census 2022

3. Marital Status

In various ways, marital status is important for the position of women and girls. In many countries, marital status is closely connected to the socio-economic position of women. It is related to the property and hereditary rights of women. Marital status also affects the participation of women in the labour market (UNFPA, n.d.).

One of the most extreme links between marital status and violation of gender rights is through child marriage.'*Child marriage refers to any formal marriage or informal union between a child under the age of 18 and an adult or another child*' (UNICEF, n.d.). A series of negative connections exist between child marriage and the well-being of young girls, and it is one of the most pervasive global human rights violations. Child marriage has a direct effect on the girl's physical and mental health. Many young brides struggle with stress, isolation, and societal pressures to manage households and families, often without emotional or social support. Higher infant deaths and maternal mortality rates are related to the young age at which the girl gives birth. Married girls run higher risks of dropping out of school, affecting their chances of having a successful professional career and economic independence (UNICEF, 2021). Dropping out of school due to marriage also hinders their awareness of healthy nutrition, hygiene, and reproductive health. Their lack of autonomy prevents child brides from seeking adequate healthcare (Seta, 2023). Child marriage is also closely related to gender-based violence. Globally, girls who were married before the age of 15 are 50 percent more likely to have experienced physical or sexual violence than women married after the age of 18 (Girls not brides, n.d.).

Also, widowhood and separation/divorce are linked to some negative consequences for women in developing countries due to societal norms, economic systems, and gender inequalities. These life events often reveal or exacerbate the vulnerabilities women face, including social stigma, economic dependence, and lack of autonomy. Widowhood or divorce often leads to a loss of income and access to resources like land or property. Polygamy is another aspect that has a direct impact on the vulnerability of women in society. Vulnerability often stems from unequal power dynamics, societal norms, and systemic issues, such as jealousy and rivalry, unequal distribution of resources among co-wives, increased exposure to sexually transmitted infections, etc. In the 2022 TLPHC, no question was asked about polygamy. Therefore, the topic cannot be discussed in this report. The 2016 DHS (General Directorate of Statistics (GDS) & ICF, 2017) indicated that four percent of females indicated to be in a polygamous relationship.

According to the Timor-Leste Civil Code, the minimum age for marriage is 17 years. However, marriages can be conducted at the age of 16 with parental consent. This minimum age is valid for civil, catholic and traditional bride-price (kaben adat) marriages (Cummins, 2017).

In the 2022 census, all respondents aged 14 and older were asked a question on marital status. Five categories were discerned:

1. Never married
2. Married
3. Separated
4. Divorced
5. Widowed

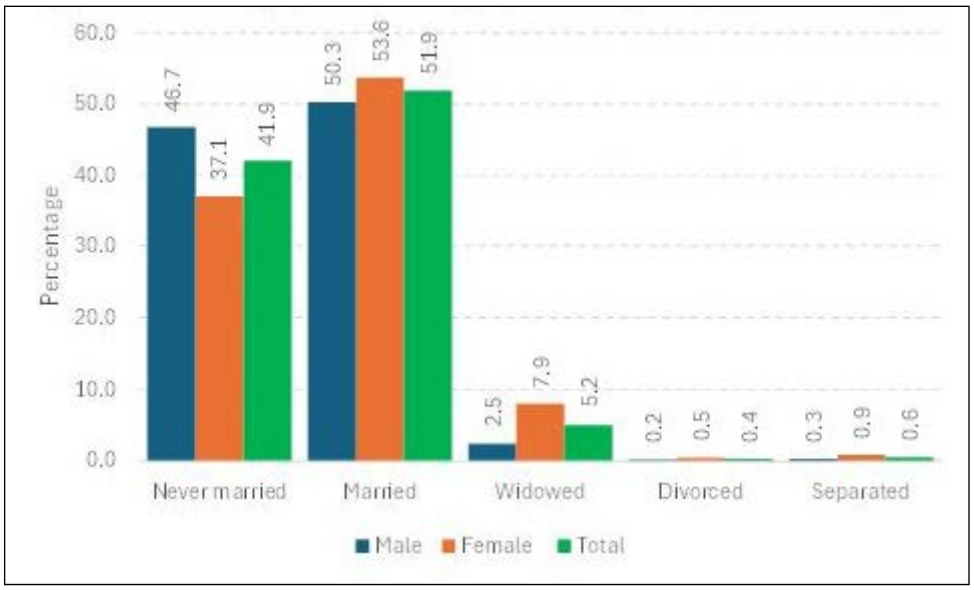
3.1. Marital status by sex

The distribution of marital status by sex is depicted in Figure 3.1. There are noticeable differences between males and females. Among males 14 years of age and older, 46.7 percent are never married, compared to 37.1 percent for females. In contrast, the proportion of married males is 50.3 percent, lower than the 53.6 percent for females.

The percentage of widowed persons is slightly less than eight percent for females, compared to less than three percent for males. This is because there are more older females than males. This means that females have a higher chance than men to become widowed, certainly because, most often, the age at marriage of the wife is lower than that of the husband. Also, the chance of females remarrying after widowhood is lower than that of males.

Regarding the dissolution of unions, divorces and separations are a marginal phenomenon in Timor-Leste, with about one percent for both sexes combined. However, when looking at each gender separately, we can see that men declare being separated or divorced in 0.5 percent of cases, whereas females declare being separated or divorced in 1.4 percent of the cases. Despite being marginal, this gender gap marks again a difference in the position of females regarding remarriage, as they stay more often single than men.

Figure 3. 1. Percentage of marital status for persons 14 years of age and older by sex

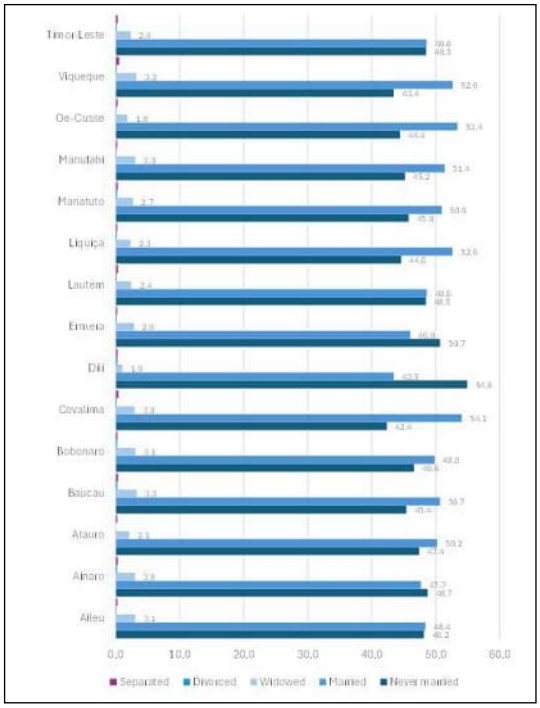


Source: Timor-Leste Population and Housing Census 2022

3.2. Marital status by municipality and sex

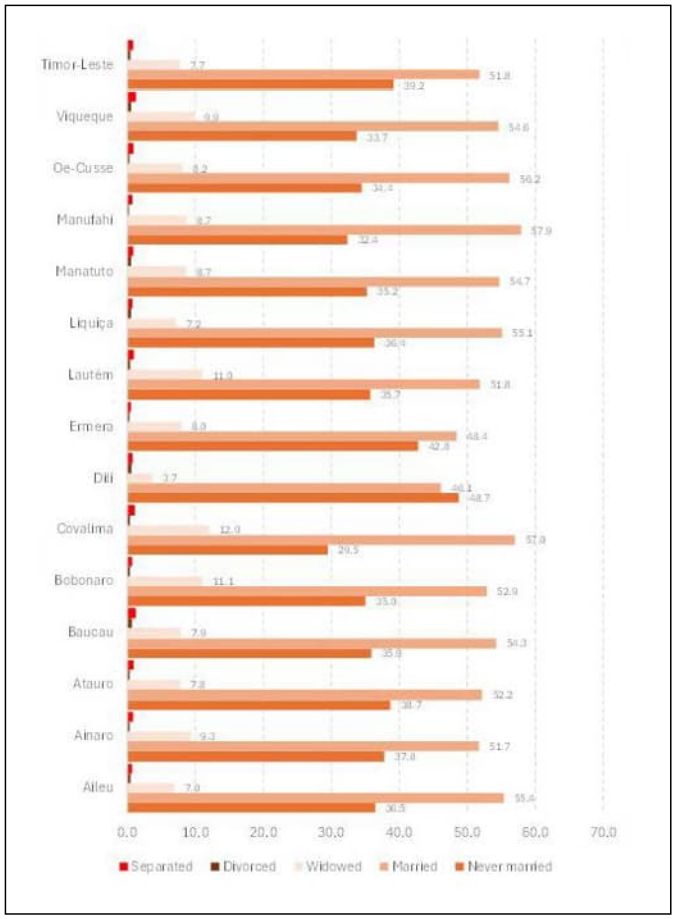
When looking at marital status at the municipality level, results show some variations by areas of residence, as is presented for resident males in Figure 3. 2 and for resident females in Figure 3. 3. In all the municipalities, the percentage of never-married females are lower than proportions of never married males, due to the lower age at marriage for females than for males.

Figure 3. 2. Percentage of males 14 years of age and older by marital status and by municipalities



Source: Timor-Leste Population and Housing Census 2022

Figure 3. 3. Percentage of females 14 years of age and older by marital status and by municipalities



Source: Timor-Leste Population and Housing Census 2022

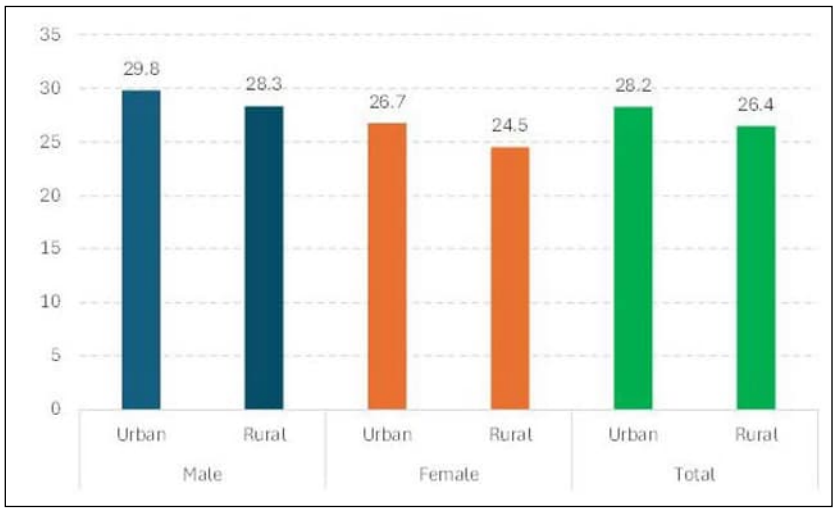
The lowest percentage of never married is found in Covalina (42,4 percent of males and 29.5 percent of females). In comparison, the highest percentages of never-married individuals are found in Dili (54.9 percent of males and 48.7 percent of females), the municipality with the highest degree of urbanisation in Timor-Leste. As is often the case globally, it appears that in Timor-Leste, the attitude towards marriage also changes with the degree of urbanisation. Indeed, as seen later, the proportion of those never married tends to be higher in urban areas than in rural areas, with a later age at first marriage. The widest gender gap for those who have never married is seen in Manufahi, Covalima, , and Lautém, with a difference of more than 12 percentage points. Looking at those who are currently married, the municipalities with a notable difference in percentage by sex are Aileu and Manufahi, with a seven percentage-point gap. Note the specific situation in Dili, the only municipality where the percentage of never-married females is considerably higher than that of married persons. Among men in Dili, the percentage of those who are never married is about the same as those who are married.

3.3. Age at first marriage

In a census, not everyone is married. Calculating the average age at marriage from the entire population would skew the results, as it would include individuals who have not yet married or may never marry. For this reason, the preferred way to calculate the mean age of marriage from census data is to use the Singulate Mean Age at Marriage (SMAM). The SMAM is the average length of never-married life for those who subsequently marry before age 50 and is calculated from the proportions never married in five-year age groups from a census or survey (Hanjal (1953).

The 2022 census thematic report on fertility calculated the singulate mean age at marriage, which stood at 27.0 years for both sexes. The SMAM for males was 28.8 years, while the SMAM for females was 25.3 years, a difference of 3.5 years (Timor-Leste National Institute of Statistics (INETL), 2024) (Figure 3.4).

Figure 3. 4. SMAM by sex and type of residence

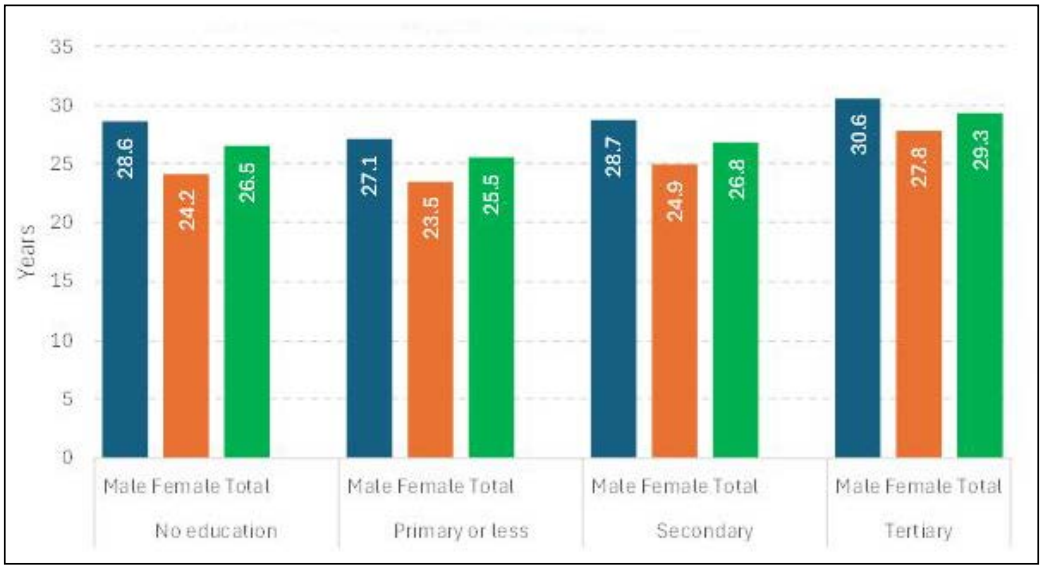


Source: Timor-Leste Population and Housing Census 2022

For males and females, the singulate mean age at marriage is higher in urban than in rural areas. While young females, on average, marry at age 24.5 in rural areas, they do so more than two years later in urban areas (26.7 years). For men, the difference is smaller. They marry on average at age 29.8 in urban areas against 28.3 in rural areas. The differences between rural and urban mean age at marriage are attributed mainly to the differences in educational attainment between urban and rural areas. As indicated before, most higher education is concentrated in urban areas, mainly in the municipality of Dili.

Figure 3. 5 shows that females with tertiary education marry on average 4.3 years later than females with primary education or less. However, there is less difference between females with secondary education and those with primary or no education.

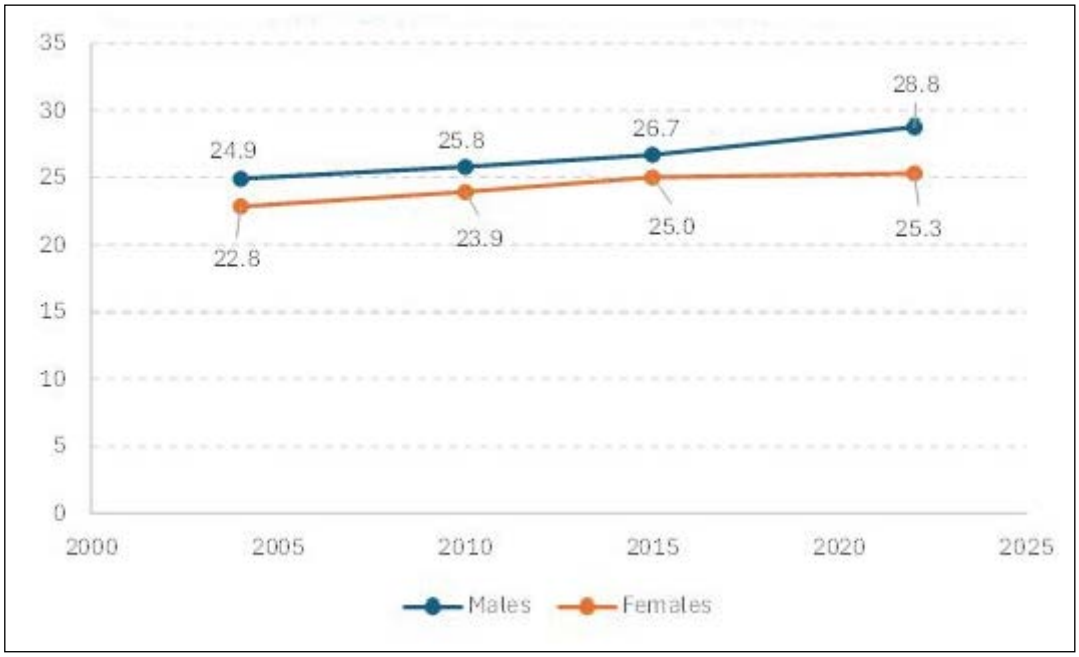
Figure 3. 5. SMAM by attained educational level and sex



Source: Timor-Leste Population and Housing Census 2022

The 2022 census thematic report on fertility and nuptiality (Timor-Leste National Institute of Statistics (INETL), 2024) presented the data in Figure 3. 6 for the period 2004 to 2022. The graph clearly shows that the mean age at first marriage for males and females has increased over the years. According to the 2004 TLPHC, the mean age at marriage was 24.9 years for males and 22.8 years for females. Gradually, the mean age has increased. Males now marry on average 3.9 years later than they did in 2004. The increase in the mean age at first marriage was a bit less prominent for females, from 22.8 to 25.3 years, an increase of 2.5 years. The fact that the SMAM for males increased more rapidly than for females means that between 2004 and 2022 the gap between male and female mean age at first marriage has gone up from 2.1 years in 2004 to 3.5 years in 2022. Most of the growth in the difference between age at marriage between males and females took place in the intercensus period 2015 – 2023.

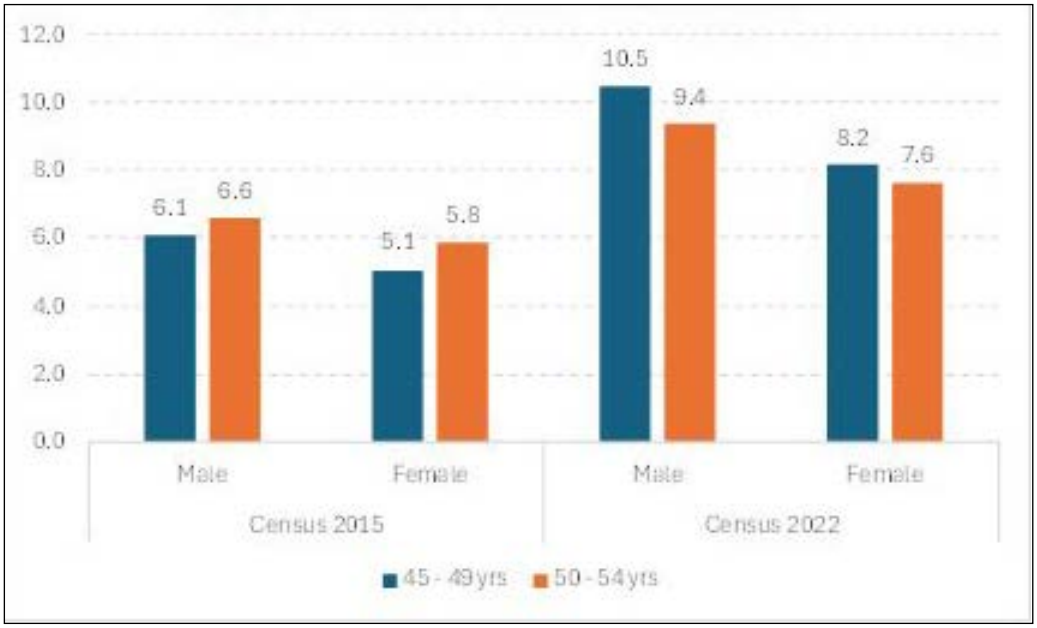
Figure 3. 6. Singulate mean age at marriage by sex, 2004, 2010, 2015, 2022



Source: Timor-Leste Population and Housing Census 2022

Next to the difference between the age at first marriage for males and females, the percentage of males and females who never married is also different. In the age group, 45 – 49, 10.5 percent of males and 8.2 percent of females have never been married (Figure 3.7). In the age group 50 – 54, these percentages are 9.4 for males and 7.6 percent for females, respectively. This would mean that by the exact age of 50, the percentage of those who have never married would be approximately 9.9 for males and 7.9 for females. In the 2015 census, the percentage of never-married persons aged 45 – 49 and 50 – 54 was lower than in the 2022 census. At that time, 6.6 percent of females in the age group 45 – 49 and 5.8 percent in the age group 50 -54 were never married. Among males, these percentages were 6.1 and 5.1 percent, respectively.

Figure 3. 7. Percentage of the population in age groups 45 - 49 and 50 - 54, who were never-married, by sex according to the 2015 and 2022 TLPHC



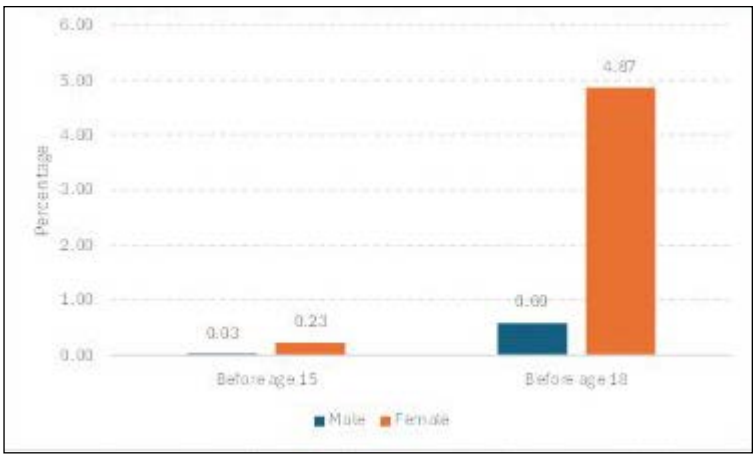
Source: Timor-Leste Population and Housing Census 2022

3.4. Child marriage

Target 5.3 of the Sustainable Development Goals aims to eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation. The analysis of child marriage in the 2022 TLPHC was already done in the thematic report on children and youth in Timor-Leste (Timor-Leste National Institute of Statistics (INETL), 2024). To some degree, the analysis below relies on the findings of this analysis.

The 2022 TLPHC allows the calculation of the SDG indicator 5.3.1: '*Proportion of women aged 20-24 years who were married or in a union before age 15 and before age 18'.* This indicator allows for the monitoring of progress to eliminate child marriage. According to the census, 0.2 percent of all females 20 – 24 years old at the time of the census were married before age 15, and 4.9 percent before age 18 (Figure 3.8). These percentages are much lower for males, 0.03 and 0.6, respectively. According to the 2016 DHS (General Directorate of Statistics (GDS), Ministry of Health and ICF, 2018), the percentage of women 20 – 24 years old who were married before age 15 was 2.6 percent, and those who were married before age 18 was 14.9 percent. The child marriage indicators in the DHS seem to be out of line with the censuses of 2022 and 2015. In the 2015 census, almost 7 percent of all women in the age group 20 – 24 had married before age 18. The 2022 census data show that since 2015, child marriage has reduced.

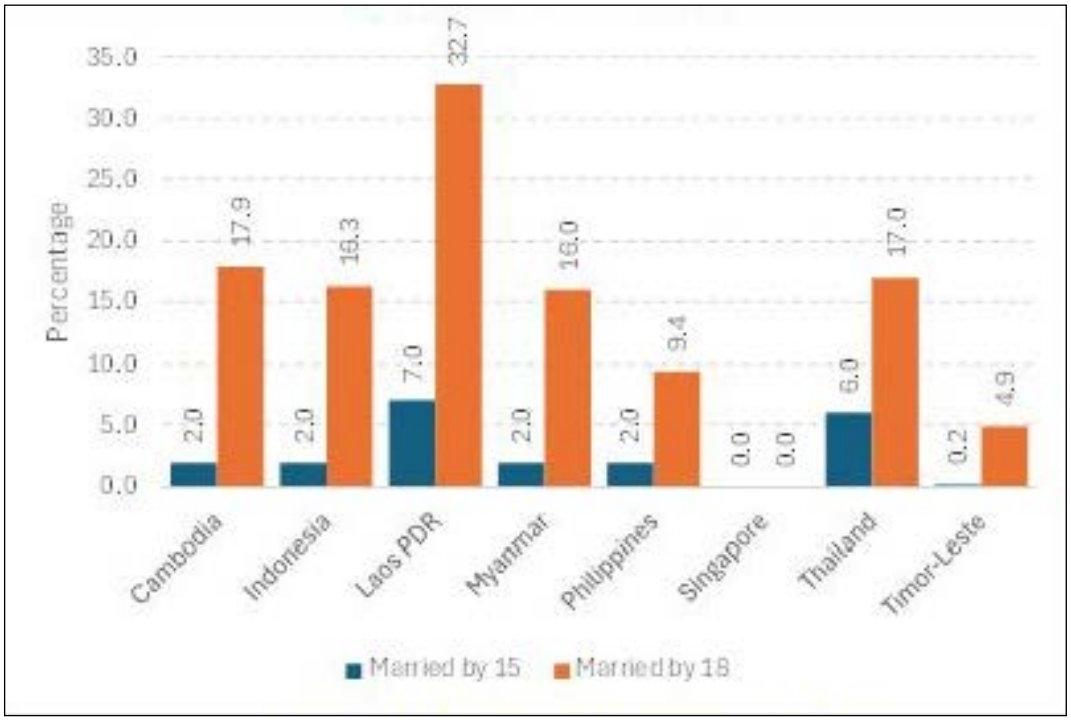
Figure 3. 8. Percentage of persons 20 - 24 years old, who were married before age 15 and 18



Source: Timor-Leste Population and Housing Census 2022

When the percentages of child marriage in the 2016 DHS were still in line with the other countries (except Singapore), the 2022 census data showed that Timor-Leste is at the lower end in the region for child marriage (The Child Marriage Data Portal, 2024). However, one has to be careful that some of the data in Figure 3. 9 refer to years before COVID-19, which could have affected the levels of child marriage[1] . It will be seen if this drop in the level of child marriage in Timor-Leste is permanent or only a dip because of the extraordinary circumstances during the pandemic.

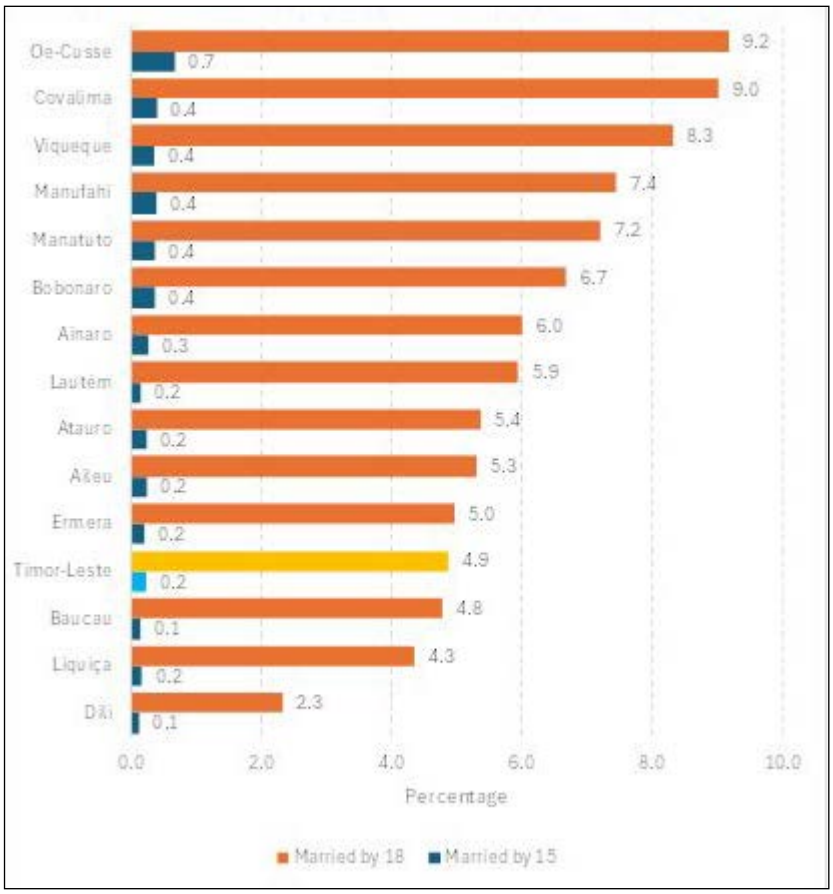
Figure 3. 9. Percentage of women 20 - 24 years old who were married before age 15 and before age 18 in Southeast Asian countries



Source: https://childmarriagedata.org/country-profiles/

[1] The data in the graph refer to the following years: Cambodia (2022), Indonesia (2017), Lao PDR (2018), Myanmar (2016), the Philippines (2022), Singapore (n.d.), Thailand (2022), Timor-Leste (2022). No data were found for Brunei, Malaysia and Vietnam.

Figure 3. 10. Percentage of women aged 20 -24 who are married before age 15 and 18



Source: Timor-Leste Population and Housing Census 2022

The percentage of women 20 – 24 years old who married before age 15 and 18 varies considerably between the different municipalities in the country. As in the 2015 TLPHC, the highest degree of child marriages in the country is in Oe-Cusse, where 9.2 women aged 20 – 24 were married before the age of 18. The lowest level is in Dili, where only 2.3 percent of these women were married by the time they turned 18. The level of child marriage in Dili is almost twice as low as in the second lowest municipality (Liquiça, 4.3 percent). Covalima at 9.0 percent and Viqueque at 8.3 percent are at the higher end of the spectrum.

In the thematic report on children and youth, a logit regression analysis was performed to examine differentials in child marriage (Timor-Leste National Institute of Statistics (INETL), 2024). The dependent variable was whether a person who was 20 – 24 years old in the census was married before 18 or not. The interested reader is referred to this report. For the gender analysis, it is important to note that the analysis showed that after controlling for other intervening factors, women in the age group 20 – 24 had more than 10 times the odds of being married before the age of 18 than men in the same age group. Another important factor was education. The odds for a young person who attended at least some secondary general education to marry before 18 are more than three times lower than a person who never attended school. Also, the odds of child marriage were higher for those belonging to the lowest wealth quintile.

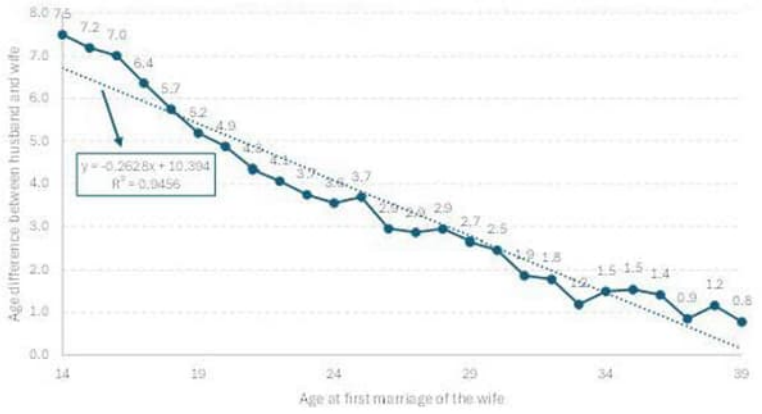
3.5. Age difference between spouses

Large age differences between a groom and his bride, especially if the bride is very young, can impact the young woman's life in various ways. A possible consequence of a large age gap may be an unequal power dynamic between both spouses, where the older husband has more control over decisions, finances, social contacts, health decisions and reproductive choices. This may lead to social isolation of the young bride and, in some cases, impact her mental health and the risk of abuse and domestic violence. The following analysis examines the association between female age at (first) marriage and a larger age difference with her husband.

In the individual questionnaire of the 2022 TLPHC, next to the question on age at first marriage, a question was asked who in the household was the person's partner. This allows a linkage with the information from both spouses together. There are a couple of shortcomings in working with census data on age differences between spouses. First, the information gathered is on the age of the first marriage, which may, in some cases, not be the age of the current marriage. However, this is not a serious problem as divorce and separation are very low. As is often the case with censuses, some errors were present in the data. For a number of cases, the age of marriage was unknown. For others, the wrong person was indicated as the husband, which sometimes created very large age differences between the indicated spouses. Therefore. all cases with missing values were removed from the analysis, as well as cases where the age difference between the spouses was more than 25 years. This may create some slight bias, but it is preferable to include cases with age differences that are too large erroneously.

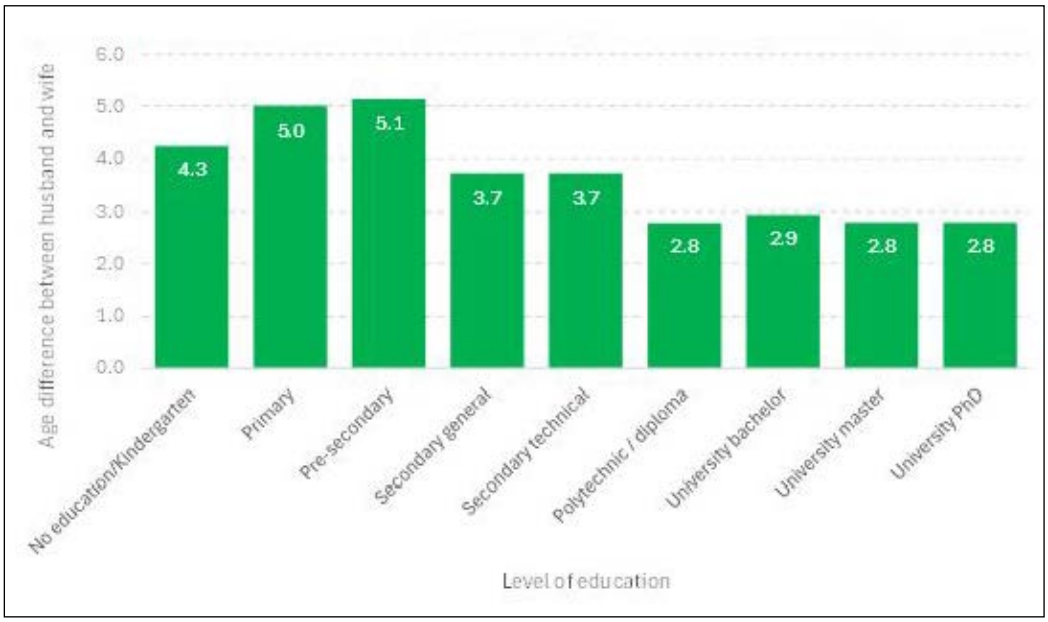
Figure 3. 11 shows the average age difference between husbands and wives by age at the first marriage of females. The analysis is restricted to women who married before the age of 40, as few women marry after 40. The graph shows a clear trend, with women who married at younger ages on average having much higher age differences than women who married at a somewhat older age. On average, women who married at ages 14, 15 and 16 had an age difference of more than seven years with their husbands. Women who first married at age 20 had a husband 4.9 years older. The older the age at first marriage, the less the difference between the spouses: 3.7 years at marriage age 25, 2.5 at age 30, 1.5 at age 35 and 0.8 at age 39. A trendline was drawn to see the average decline in age difference. The coefficient of determination (R2) is 0.9456. This means that 94.6 percent of the variability of the age difference between the spouses is explained by the age at first marriage of the female. The trendline shows that for each additional year of age of first marriage for women, the age difference with the husband is about three months less (.2628 year ≈1/4 year).

Figure 3. 11. Average age difference of husbands compared to wives by age at first marriage for wives



Source: Timor-Leste Population and Housing Census 2022

Figure 3.12. Mean age difference of husbands compared to wives by educational level of wife



Source: Timor-Leste Population and Housing Census 2022

Figure 3.12 shows that female education level is also closely related to the age difference between spouses in Timor-Leste. The average age difference between the spouses is the largest for women with primary or pre-secondary education, 5.0 and 5.1 years, respectively. Their age difference is even higher than among women with no education or only kindergarten. On average, women with secondary (general or technical) education are 3.7 years younger than their husbands. Women with tertiary education have about the same average age difference as their husbands (2.8 – 2.9 years).

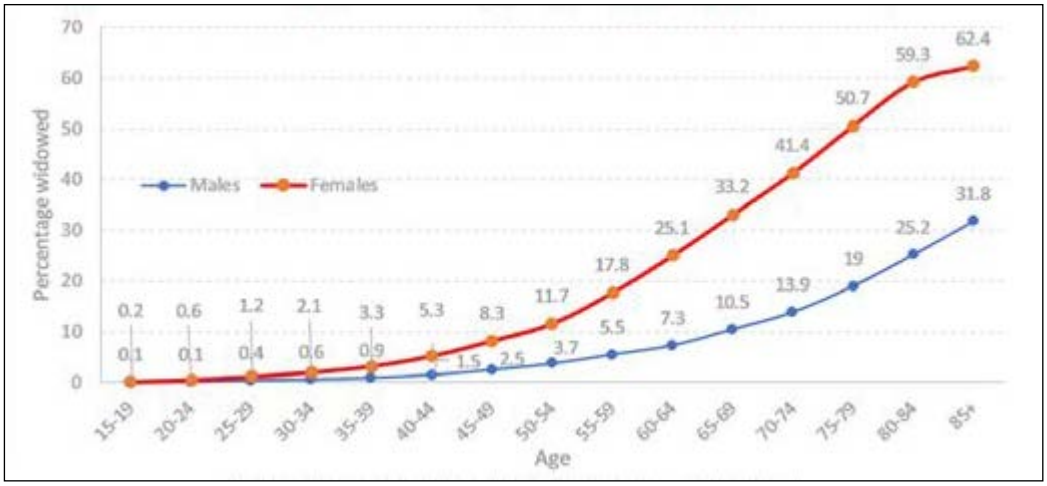
3.6. Widowhood

Widows are one of the most vulnerable groups in society because of a number of intertwining social, economic, cultural and legal factors. Widows often find themselves at the intersection of poverty, grief and depression, lack of resources and gender discrimination. Widowhood may change a woman's social status and cause her to be excluded from social and community networks. The loss of income, access to land and unfavourable inheritance laws may cause serious economic deprivation and poverty. Widows are vulnerable to gender-based violence, both at the hands of family members and outsiders. The children of widows may also suffer in various ways. They may be withdrawn from school because of poverty, may get involved in child labour and may suffer physical and mental harm (The Advocates, 2011). For these reasons, it is important to look into the position of widows in Timor-Leste.

Widowhood by age and sex

As we saw before, female life expectancy is about four years higher for females than for males, and wives are several years younger than their husbands. As such, it should not come as a surprise that widowhood among females is considerably higher than among males: 7.9 percent against 2.5 percent. Figure 3. 13 shows that for all ages, the percentage of widowed females is considerably higher than that of widowed males. Between ages 60 and 64, already a quarter of all females are widowed, against only 7.3 percent of males. It is possible that there is also an effect that males remarry more easily after the death of their spouse, but the census does not provide information on this.

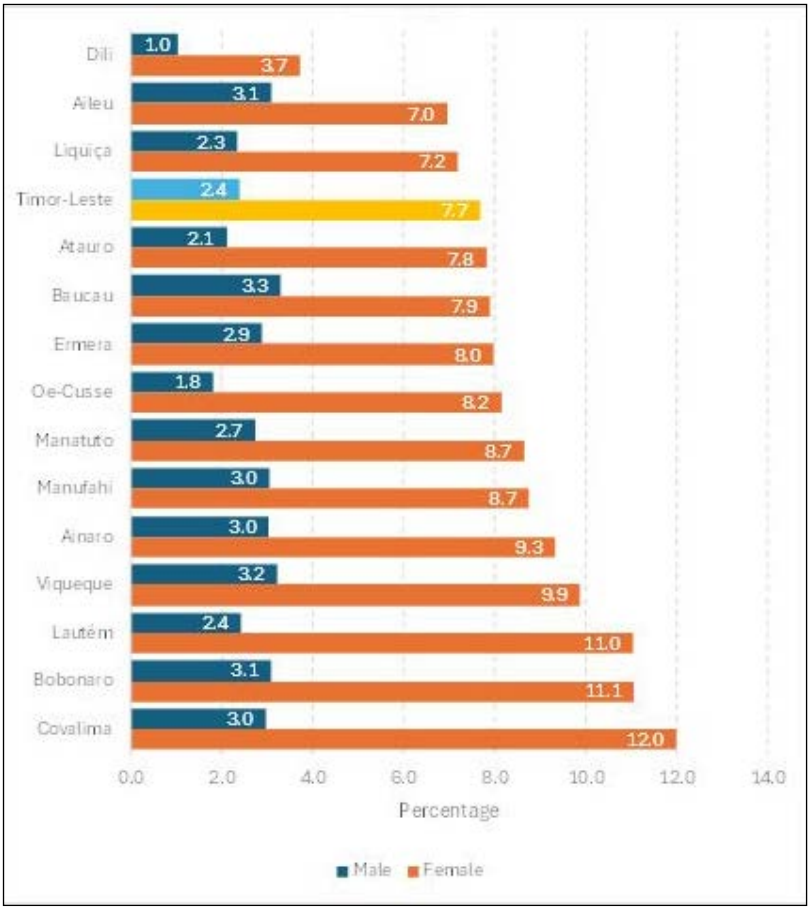
Figure 3. 13. Percentage of widowhood by five-year age groups, for males and females



Source: Timor-Leste Population and Housing Census 2022

Overall, the proportion of widows in urban areas (2.9 percent) is lower than in rural areas (6.13 percent). Covalima has the highest percentage of widows. Among all women 14 years of age and older in Covalima, 12.0 percent are widowed. By contrast, in Dili, this is only 3.7 percent. Other municipalities with high percentages of widows are Bobonaro (11.1 percent) and Lautém (11.0 percent).

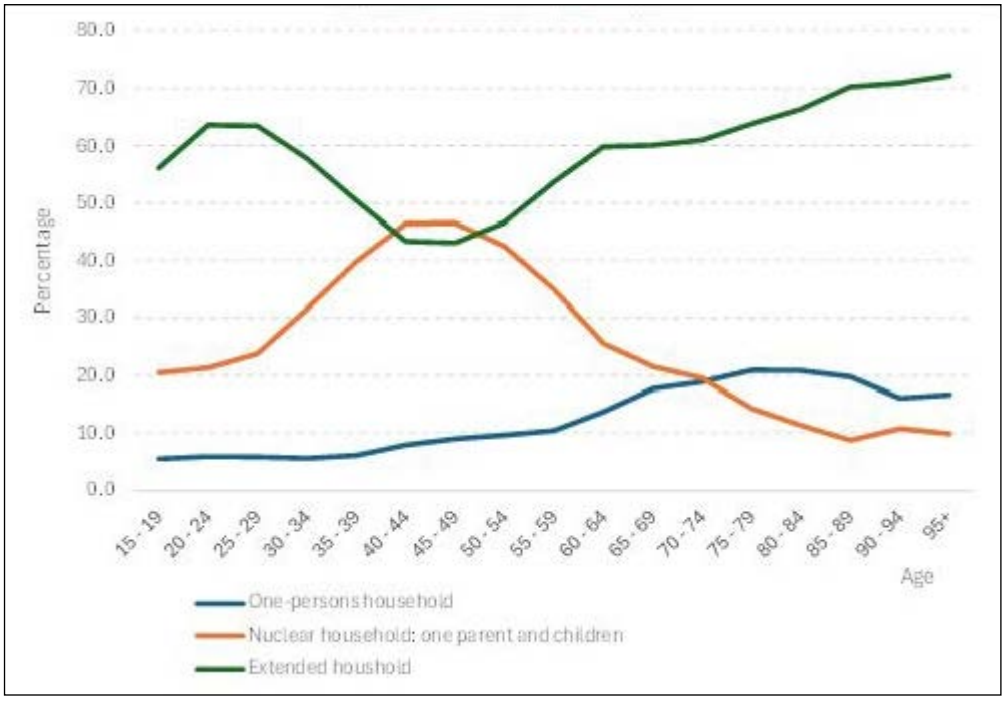
Figure 3. 14. Percentage of all persons 14 years of age and older who are widowed, by sex and municipality



Source: Timor-Leste Population and Housing Census 2022

An important aspect of the well-being of widows is the household in which they reside. Older widows, in particular, may need support from family members. Figure 3.15 shows the percentage of widows by five-year age groups in three different types of households: a) one-person households, b) nuclear households consisting of one parent and one or more children and c) extended households[2]. Note that other household types were not included as they were not applicable (nuclear household with husband and wife, no children) or had too few cases (Composite household, only 160 cases). The graph clearly shows how the type of households widows reside in changes by the age of the female. Throughout their lives, the majority of widows live in an extended household. Among all ages, 57.9 percent live in an extended household. The percentage is highest among the older age group. After age 65, more than 60 percent of widows live in an extended family, and more than 70 percent after age 85. Among all widows, 25.8 live in a one-parent household with children. The one-parent obviously being themselves. The highest proportion of widows living in nuclear households with one parent (themselves) and children is highest in the age groups 35 to 54, ages when the women typically have children who are growing up. A special vulnerable group consists of widows who live on their own, especially if they already have a more advanced age. According to the 2022 PHC, in Timor-Leste, 4,575 widows above age 65 live independently. This number constitutes 19.4 percent of all widows above age 65.

Figure 3. 15. Percentage of widows 14 years of age and older by five-year age groups and the type of household in which they reside



Source: Timor-Leste Population and Housing Census 2022

[2] An extended household is defined 'as a household consisting of any of the following: a single family nucleus and other persons related to the nucleus, for example, a father with child(ren) and other relative(s) or a married couple with other relative(s) only; two or more family nuclei related to each other without any other persons, for example, two or more married couples with child(ren) only; two or more family nuclei related to each other plus other persons related to at least one of the nuclei, for example, two or more married couples with other relative(s) only; two or more persons related to each other, none of whom constitute a family nucleus. (United Nations, 2017)

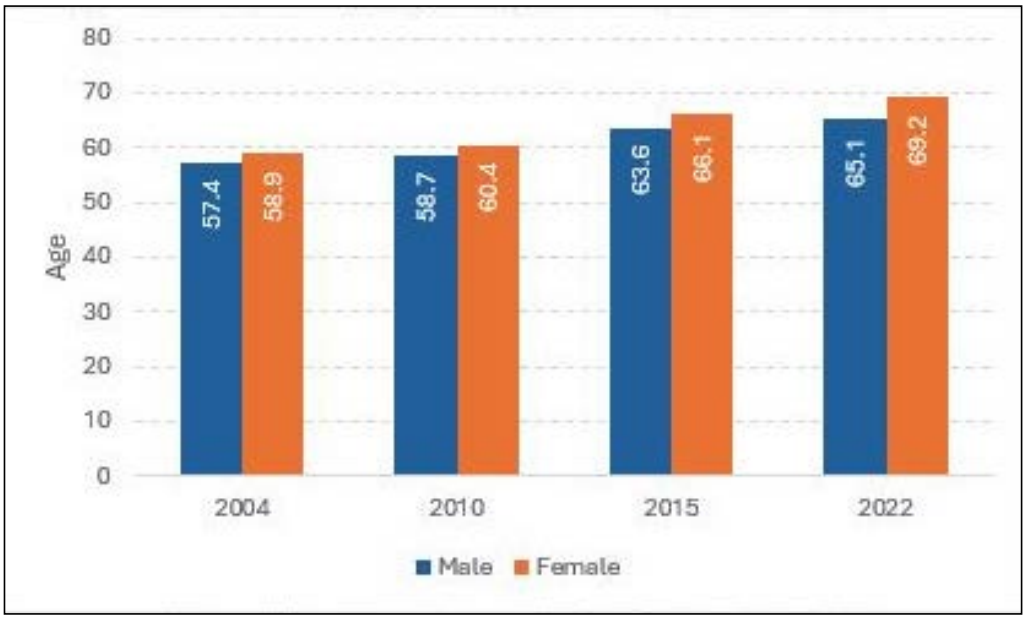
4. Mortality and Health

Mortality data collected through the 2022 TLPHC provide essential insights into the health and demographic dynamics of the Timorese population. By analyzing information on deaths, the PHC helps estimate mortality rates, identify trends in life expectancy, and uncover disparities based on factors such as gender, age, and location. This chapter presents health and mortality through a gender lens by building on the results published in the Thematic Report on Mortality ((INETL, 2024)). The 2022 TLPHC was not equipped to obtain detailed information on health, however, as the primary purpose was to provide a broad overview of the demographic, social, and economic characteristics of the population. Additionally, the scope of the PHC questionnaire was generally constrained to ensure data collection was feasible and efficient for collecting data in all households, leaving more complex health assessments to specialized surveys like the Demographic and Health Survey or health information systems. The most recent DHS was conducted in 2016, with the next DHS planned for 2025. The census included some interesting questions related to health, including water and sanitation, cooking fuel source, and birth attendance, which are briefly touched upon in this chapter.

4.1 Life expectancy at birth

Life expectancy at birth represents the average number of years a person is expected to live, assuming they experience the prevailing age-specific mortality rates throughout their lifetime. It reflects the overall mortality conditions of a population at a given time, serving as a key indicator of health and well-being (UNFPA, 2014). In Timor-Leste, life expectancy at birth for males stood at 65.1 in 2022. At 69.2 years, female life expectancy exceeds male life expectancy at birth by about four years. Figure 4. 1 indicates the increasing trend in life expectancy at birth over the years in Timor-Leste for both males and females. Between 2004 and 2022, male life expectancy at birth increased by 7.7 years. In comparison, female life expectancy at birth increased at a steeper rate, from 58.9 years to 69.2 years. This represents an increase of 10.3 years.

Figure 4. 1. Trends in life expectancy at birth by sex, 2004-2022 census

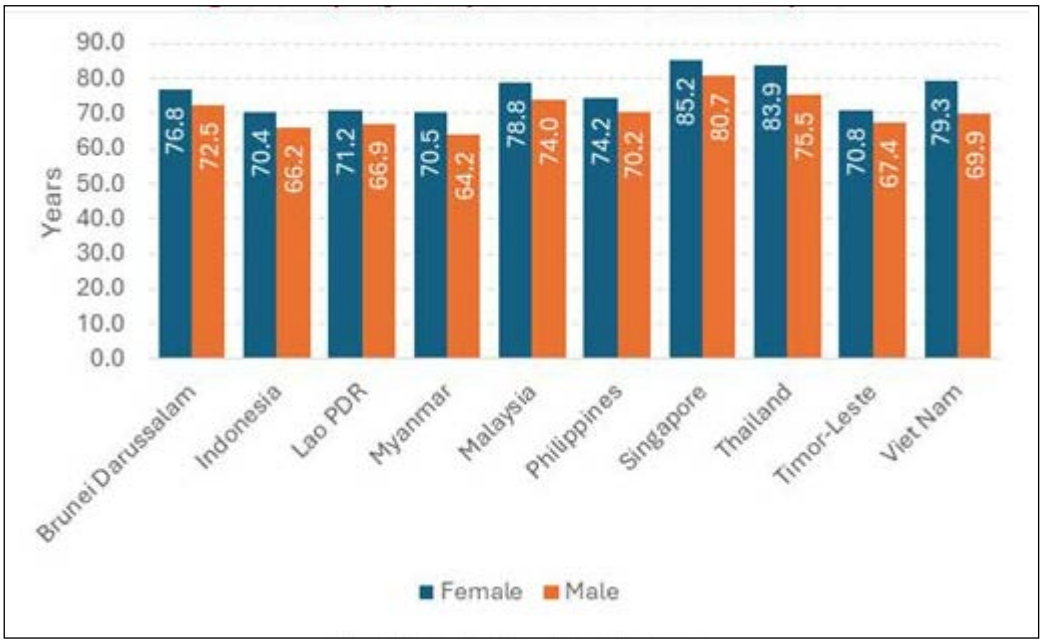


Source: Timor-Leste Population and Housing Census 2022

For both males and females in Timor-Leste, life expectancy at birth is about five years higher among those living in urban areas compared to rural areas. The female life expectancy in urban areas was 71.1 years compared to 65.7 years in rural areas. For males, this was 68.7 years and 63.2 years, respectively. Male life expectancy in Covalima (61.2), Aileu (62.8) and Ainaro (64.6) were the lowest and below the national average of 65.1 years. Female life expectancy was the lowest in the municipalities of Manufahi (64.2), Covalima (66.3) and Atauro (66.7). For both sexes, those living in Dili, Oe-cusse and Bobonaro had the highest life expectancy at birth.

Global life expectancy at birth for both sexes stood at 72 years in 2022, rising again after a drop to 71 years during the COVID-19 pandemic. Life expectancy for females stood at 75.4 years, more than five years higher than for males (70.0 years) at the global level (UNited Nations Population Division, Department of Economic and Social Affairs, 2024). Figure 4.2 indicates the life expectancy at birth in various countries in the region. Although the UN Population Division data presented in this figure slightly vary from the TLPHC data, they are presented here with the purpose of comparing Timor-Leste's figures with regional data. Timor-Leste joins Indonesia (70.4 years) and Myanmar (70.5 years) with the lowest female life expectancy in the region. Male life expectancy in Timor-Leste is also at the lower end of the region, standing at 67.4 years. Myanmar, Indonesia and the People's Democratic Republic of Lao had lower male life expectancies than Timor-Leste, standing at 64.2 years, 66.2 years and 66.9 years, respectively (World Bank, 2022).

Figure 4. 2. Life expectancy at birth in South East Asia, by sex



Source: World Bank Database, 2024

The sex gap in life expectancy at birth in Timor-Leste comes from higher death rates among males than females across age groups, an occurrence seen globally. Males have higher infant and child mortality, are more likely than females to engage in risky behaviour, and women generally have healthier diets and lifestyles, resulting in a longer life for females (Max Planck Institute, n.d.). The following section will provide further insights into age-specific mortality and its causes

4.2 Patterns of mortality

Infant mortality

The Thematic Report on Mortality (2024) presented indirect mortality estimations among infants (younger than one year) in the 12 months before the census. Results show that the total infant mortality rate stood at 42.4 deaths per 1,000 live births based on June 2021 estimates. Infant mortality was higher among males than females, estimated at 46.3 males versus 38.3 female infant deaths per 1,000 live births (INETL, 2024). Table 4. 1 provides indirect estimates linked to various points in time. The estimates indicate that male infant mortality rates are consistently higher than those for females. A general decline in mortality is observed over time, with the 2017 estimate standing out as significantly lower than the estimates from other years. Further details on the methodology of the PHC estimations can be found in the Thematic Report on Mortality (INETL, 2024).

It is important to note that the infant mortality rate based on the 2016 DHS is estimated at 30, which is much lower than the estimate from the 2022 TLPHC. However, in the 2016 DHS, the male infant mortality rate (34 per 1,000 live births) was also considerably higher than the female infant mortality rate (25 per 1,000 live births).

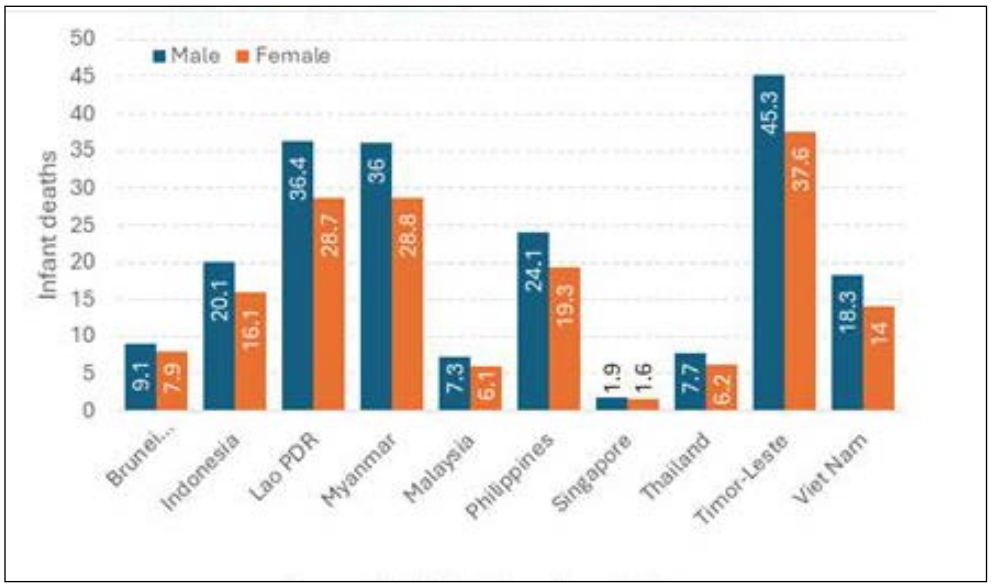
Table 4. 1. Adjusted infant mortality by sex, 2009-2021

Time Reference	Both sexes	Male	Female
June 2021	42.4	46.3	38.3
May 2020	45.0	49.5	39.7
January 2019	41.7	46.5	36.3
March 2017	24.1	27.2	20.7
March 2015	42.4	48.3	35.9
August 2012	46.5	51.4	41.1
June 2009	55.6	61.3	49.2

Source: Timor-Leste Population and Housing Census 2022

Mortality rates among male infants are higher than those among females, regardless of residence. In urban areas, male infant mortality is 37.1 deaths per 1,000 live births compared to 30.1 for females. In rural areas, the gap is 51.6 male infant deaths per 1,000 live births compared to 43.2 for female infants (INETL, 2024). World Bank data for Timor-Leste show similar infant mortality rates (45.3 for males and 37.6 for females) to the June 2021 figures. Timor-Leste ranks highest for both male and female infant mortality in the region, with numbers much greater than in other countries. Almost ten more male infant deaths per 1,000 live births occurred in Timor-Leste in comparison to Lao PDR and Myanmar, the countries with the second and third highest male infant mortality (Figure 4.3). Note that the infant mortality rates or Timor-Leste based on World Bank data presented in figure 4.3. are slightly different than in Table 4.1.

Figure 4. 3. Infant mortality in South East Asia, by sex



Source: World Bank Database, 2024

Child mortality

The child mortality rate refers to the probability for a child aged 1 to die before reaching the exact age of five years. It is expressed per 1,000 live births that occurred one year prior to the census. As with the infant mortality rate, different time references were included for the indirect estimations. When considering the last one (June 2021), child mortality among males was somewhat higher than among females: 8.1 deaths per 1,000 live births compared to 6.8 (Table 4. 2).

Table 4. 2. Adjusted estimates of child mortality rates, by sex

Time Reference	Both sexes	Male	Female
June 2021	7.5	8.1	6.8
May 2020	8.1	8.9	7.2
January 2019	7.6	8.5	6.7
March 2017	4.4	4.9	3.7
March 2015	7.8	8.9	6.6
August 2012	8.5	9.4	7.6
June 2009	10.2	11.2	9.0

Source: Timor-Leste Population and Housing Census 2022

Under-five mortality

SDG 3.2 aims to end preventable deaths among newborns and children under five years by 2030. The under-five mortality rate (indicator 3.2.1.) should be reduced to 'at least as low as 25 per 1,000 live births' (United Nations, 2017). Under-five mortality remains a challenge in Timor-Leste despite the fact that it is declining. The adjusted under-five mortality stood at 54.5 deaths per 1,000 live births based on PHC 2022 data. This is about double the 25 per 1,000 live births aimed for in the SDGs. The under-five mortality rate estimated by the 2016 DHS stood at 41 deaths per 1,000 live births in the 5-year period before the survey (GDS, Ministry of Health and ICF, 2018), lower than the PHC estimate.

Table 4. 3 shows that different time references all indicate under-five mortality well above the SDG target of 25. Under-five mortality is higher in males than females and in rural compared to urban areas, showing consistency with the patterns for infant mortality. When comparing data from August 2012 to June 2021, for example, mortality among under-five males in urban areas was 53.2 compared to 47.8 in rural areas. In comparison, a total of 42.4 female under-five deaths occurred in urban areas (August 2012) compared to 38.9 June 2021.

Table 4. 3. Adjusted under-five mortality by rural/urban and sex, 2009-2021

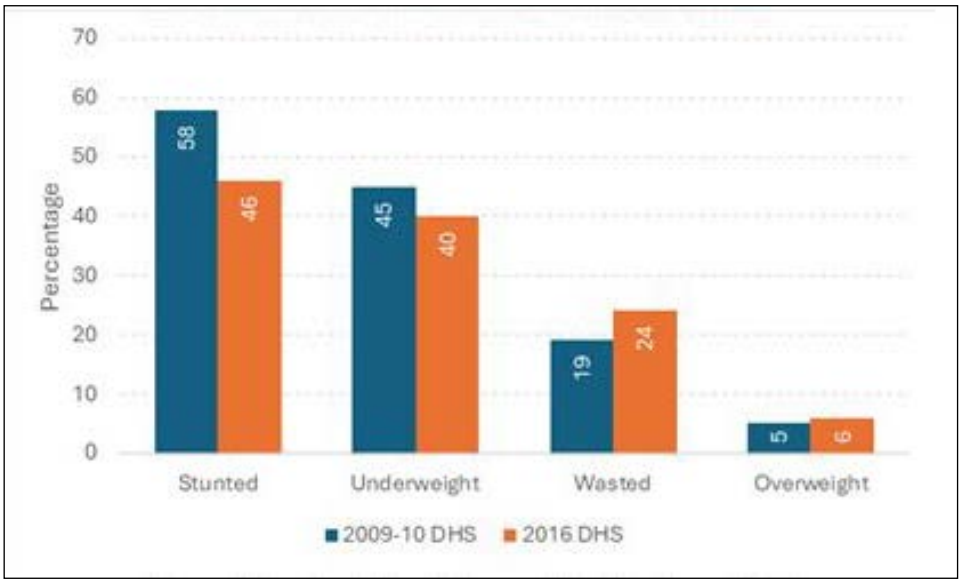
Time Reference	Both sexes		Male		Female	
	Urban	Rural	Urban	Rural	Urban	Rural
June 2021	43.5	60.9	47.8	66.0	38.9	55.4
May 2020	43.9	64.1	51.6	68.6	34.8	58.5
January 2019	45.5	59.2	52.1	65.0	38.0	52.7
March 2017	39.6	56.3	46.5	62.1	31.8	49.9
March 2015	45.3	63.0	53.4	70.1	36.2	55.0
August 2012	48.0	70.2	53.2	77.3	42.4	62.4
June 2009	60.1	81.7	66.3	90.0	53.1	72.5

Source: Timor-Leste Population and Housing Census 2022

The under-five mortality rate, based on the latest DHS was lower than the figures estimated in the TLPHC. The total under-five mortality rate was estimated at 41 deaths per 1,000 live births in the 5 years preceding the survey, 46 for males and 36 for females (GDS, Ministry of Health and ICF, 2018). The 2016 DHS provides insights into several risk factors associated with infant/child mortality, notably:

- The highest infant mortality is seen among mothers in their forties;
- Mortality is higher for firstborns;
- As the education level of the mother increases, mortality generally declines;
- As household wealth increases, mortality decreases;
- Mortality is highest among births after short birth intervals (of less than 2 years);
- The severe malnutrition crisis affects young children and women, as shown by the high level of malnutrition in Figure 4.4.

Figure 4. 4. Trends in nutritional status of children



Source: Timor-Leste Population and Housing Census 2022

Maternal mortality

Explaining the Maternal Mortality Ratio

The maternal mortality ratio (MMR) is calculated by dividing the number of women who die while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy, by the total number of live births in the same period and multiplying this by 100,000. It shows the maternal deaths relative to the number of live births (**UNFPA, 2014**).

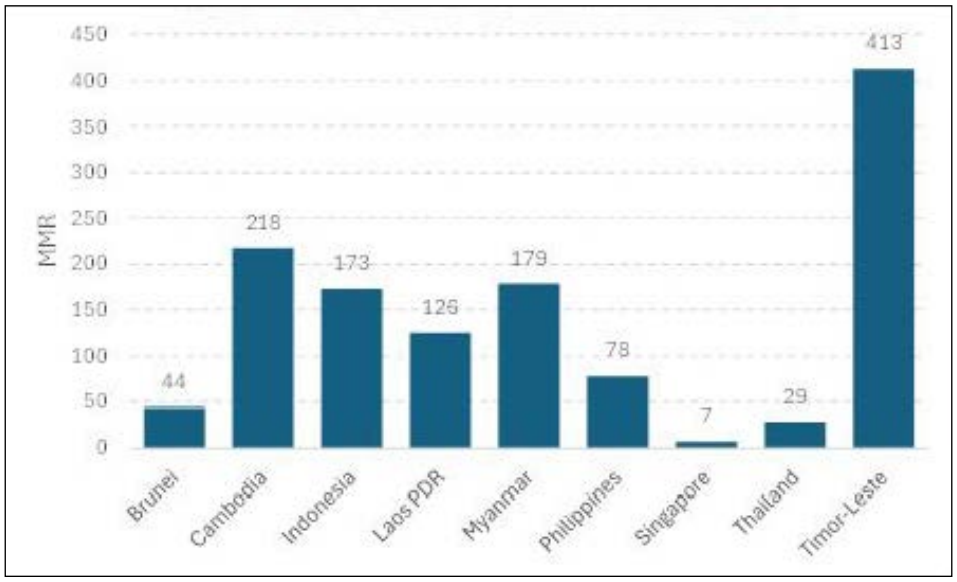
Maternal mortality is widely regarded as one of the most avoidable causes of death, as the majority of maternal deaths can be prevented with timely, adequate, and accessible healthcare.

Reducing the global maternal mortality ratio (MMR) to less than 70 maternal deaths per 100,000 live births by 2030 is SDG target 3.1, which forms part of the third SDG goal of 'Good Health and Well-being' (United Nations, 2017). Various sources can be used to estimate the MMR, including civil registration and vital statistics, the Demographic and Health Surveys (DHS) and the PHC. Calculating the maternal mortality ratio using census data is particularly advantageous because it reflects information from the entire population rather than relying on a sample. The 2022 TLPHC included questions to heads of households on maternal mortality: Did *<Deceased> die while giving birth or having an abortion or a miscarriage? 'Was <Deceased> pregnant at the time of her death?' and 'Did <Deceased> die within 6 weeks after the end of pregnancy or childbirth?* Heads of households were also requested to ascertain whether the cause of death was resulting from an accident or not.

Based on the TLPHC, the 2022 MMR in Timor-Leste stood at 413 deaths per 100,000 live births. This is a slight decrease compared to 2015, when it was 426 deaths per 100,000 live births. In 2010, the MMR stood at 570 maternal deaths per 100,000 live births. Variations in maternal mortality estimates arise depending on the data sources and methodologies used, and underreporting and misclassification of deaths may also impact data quality. Further details on how maternal mortality was estimated can be found in the Thematic Report on Mortality (INETL, 2024).

Timor-Leste has the highest MMR among all countries in Southeast Asia. Its MMR is almost twice as high as the MMR in Cambodia (218 deaths per 100,000 live births), which has the second highest MMR. Figure 4.5 clearly shows how maternal mortality is closely connected to socio-economic development. Singapore, Thailand and Brunei all have very low MMRs. The estimated global MMR in 2020 stood at 223 maternal deaths per 100,000 live births (World Bank Group, 2024), almost half of the level in Timor-Leste. Maternal mortality is widely considered one of the most avoidable causes of death, as it is closely related to quality prenatal, obstetric and post-natal care, proper nutrition for pregnant women and timely interventions.

Figure 4. 5. Maternal mortality ratio in Southeast Asia



Source: Timor-Leste Population and Housing Census 2022

Maternal mortality can also be measured by the maternal mortality rate, defined as the number of women who die from maternal-related causes per 1,000 women of reproductive age (15-49 years). The estimated maternal mortality rate was 0.4 maternal deaths per 1,000 women aged 15-49 years. In 2015, the rate was 0.5 and in 2010, it stood at 1.0.

Whilst progress has been made in terms of improving women's access to healthcare services, particularly in rural and remote areas, and raising awareness of sexual and reproductive health and rights. TLPHC data shows that maternal mortality remains much higher than the SDG goal of 70 maternal deaths per 100,000 live births and that much more remains to be done. The CEDAW 4th periodic report for Timor-Leste expresses concern about '*the persistently high rates of maternal mortality, early pregnancy and malnutrition among women, women's limited access to antenatal and postnatal healthcare services and the low rate of births attended by skilled health personnel, particularly in rural areas*' (United Nations, 2023).

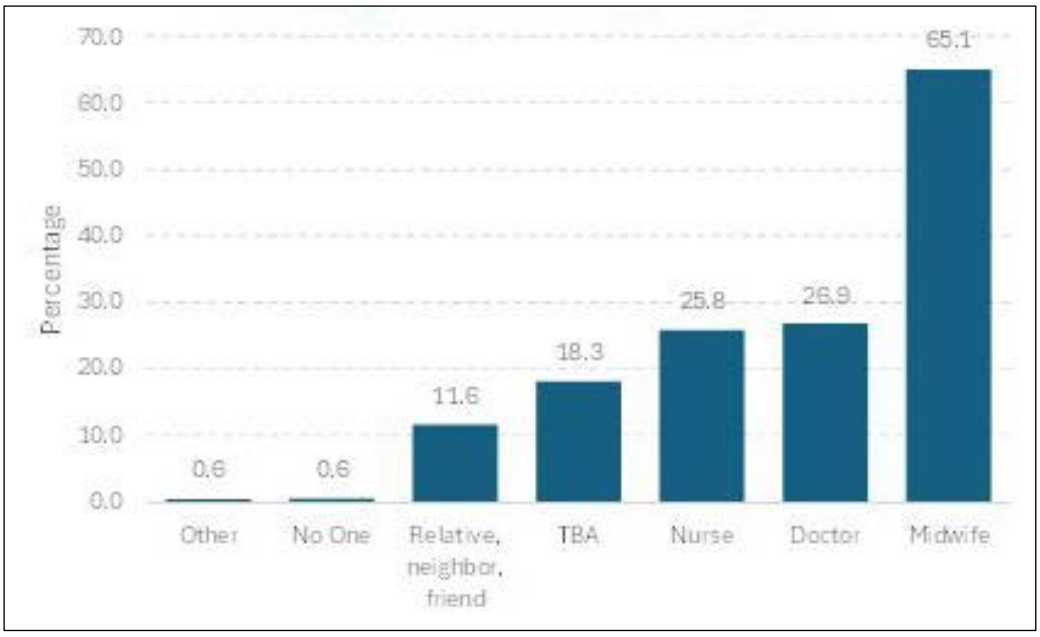
Birth attendance

Skilled birth attendance is a critical factor for safe childbirth and reducing maternal mortality and long-lasting morbidity. Given its importance, SDG target 3.1 on reducing global maternal mortality includes an indicator (3.1.2) on the percentage of births attended by skilled health personnel. Skilled health personnel are doctors, nurses or midwives who provide childbirth care. In this analysis, the three

aforementioned professions were included. It should be noted that this indicator does not offer insight into the availability or accessibility of services, nor does it reflect the quality of care provided (United Nations, 2024).

About 68.5 percent of women aged 15 years and over, who had a birth in the last five years before the census were assisted by skilled birth attendants (SBA). This is an increase compared to the latest DHS data when skilled birth attendance was 57 percent (2016) and 30 percent (2009-2010). At that time, numerous births were occurring at home (GDS and UNFPA, 2018). Considerable differences were seen across municipalities, with the percentage of skilled birth attendance ranging from 93.3 percent in Dili to 41.0 percent in Ermera. Skilled birth attendance in rural areas was also much lower than in urban areas, 59.2 percent versus 91.8 percent, respectively. Midwives were the most common skilled health professionals who attended births, attending 65.1 percent of all deliveries, followed by doctors, traditional birth attendants, and nurses (Figure 4.6). Nearly one in five births was attended by traditional birth attendants, and about a quarter (26.9 percent) were attended by doctors. It should be noted that births could be attended by more than one health professional (INETL, 2023).

Figure 4. 6. Female population aged 15 years and over who had delivered a birth in the last five years, by type of assistance during last delivery

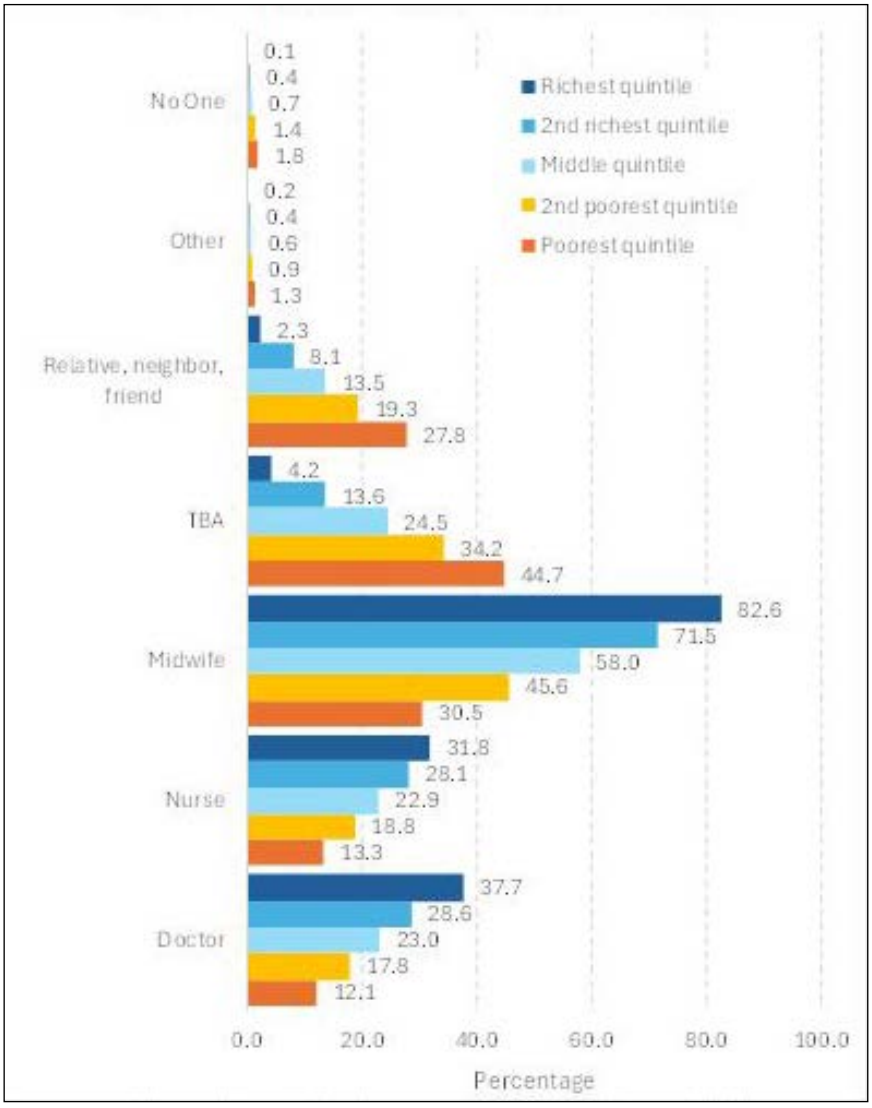


Source: Timor-Leste Population and Housing Census 2022

The 2015 PHC included questions on access to safe delivery facilities for women giving birth, revealing that 58 percent of births were at home, compared to 42 percent in health facilities (INETL, 2023). This information was not asked in the 2022 TLPHC, and therefore, comparisons cannot be made. An analysis was made to determine whether a mother's highest level of education was associated with the type of health professional attending her birth. Table 4. 4 indicates that as the attended education level increases, more midwives attend the births. Midwives are the most popular health professionals attending births, regardless of the level of a mother's education, which makes sense, providing their function. Among those who had a university degree, midwives were the most popular. Among those whose highest educational level was kindergarten, midwives (44.1 percent) and traditional birth attendants (33.4 percent) were the most common during births. In general, one can see that the higher the attended educational level, the higher the percentage of highly skilled birth attendance.

The household's wealth is also associated with the type of health professional attending births. Wealth was measured by the wealth quintile, which basically divided the household into five equal groups, ranging from lowest wealth to highest wealth. As the wealth of a household increases, a higher percentage of doctors and midwives attend births, whilst relatives, neighbours, or friends are less likely to attend, as shown in Figure 4.7. Those in the poorest households have a higher percentage of traditional birth attendants helping with the delivery. In the quintile of the highest wealth, a traditional birth attendant hardly assists any mother during childbirth.

Figure 4. 7. Birth attendance and wealth index quintile



Source: Timor-Leste Population and Housing Census 2022

Table 4. 4. Birth attendance by mother's highest attended educational level

	Kindergarten	Primary	Pre-secondary	Secondary general	Secondary technical	Polytechnic/ diploma	University bachelor	University master	University PhD	Total
Doctor	21.3	18.9	21.3	28.0	24.0	33.9	37.2	45.7	35.7	26.9
Nurse	20.0	19.3	22.0	27.3	24.3	29.8	32.0	31.1	36.7	25.8
Midwife	44.1	46.5	54.9	69.7	64.7	79.9	81.3	77.3	76.5	65.1
TBA	33.4	32.5	26.0	15.0	21.9	6.6	5.5	3.9	1.0	18.3
Relative, neighbor, friend	18.7	20.3	16.6	9.5	12.0	5.2	3.8	2.8	2.0	11.6
Other	0.6	1.1	0.7	0.4	0.4	0.4	0.2	0.3	0.0	0.6
No one	1.1	1.3	0.9	0.5	0.3	0.4	0.2	0.0	0.0	0.6

Source: Timor-Leste Population and Housing Census 2022

4.3 Causes of mortality

In the 2022 TLPHC, limited information is available on the cause of death besides causes related to childbirth. The TLPHC included a question on whether the person had died because of an accident or act of violence, and 4,740 males were reported to have died during the 12 months before the census. Out of this group, 424 died because of an accident or act of violence, which is 9.0 percent of all deceased males. The percentage of all deaths caused by accidents or violence was 4.6 percent, nearly half the percentage for males. Among females, 3,699 deaths were recorded, with 176 caused by accidents and acts of violence.

4.4 Health

As mentioned, the census is not a great source of individual health data. However, it does gather some information at the household level on basic facilities that can impact individual health and gender equity. The lack of basic facilities, such as water, sanitation and hygiene (WASH), safe cooking fuels or electricity, can disproportionately impact males and females and particularly affect females and girls due to patriarchal norms and social roles and expectations in Timor-Leste. Limited access to these facilities can be closely tied to increased time burden (e.g., fetching water or firewood), health risks, reduced socioeconomic opportunities, safety concerns, reinforcement of traditional gender norms, and intergenerational impacts.

TLPHC data collected at the household level– rather than at the individual level – means that they look at all household members in the same way, essentially introducing gender-blind data. In other words, differences between women and men are not taken into account. The TLPHC only allows for comparison between households headed by males or females, and a brief analysis was done to assess whether there were any stark differences between these households and their access to basic facilities. Using the sex of the head of household as a way to analyse gender issues comes with a number of theoretical and practical shortcomings (see section 9.2 on Household headship). However, with a lack of alternatives, the results are presented hereunder.

Water, sanitation and hygiene

Access to safe drinking water, sanitation and hygiene (WASH) is critical to realize gender equality. Special attention is paid to women and girls in SDG target 6.2, which aims to achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, for example. The 2022 TLPHC shows that the majority of households have access to an improved water source that can deliver safe water through its design or construction, relying on public taps or public piped water (39.5 percent), piped or pumped to the yard/plot (11 percent), piped or pumped into the dwelling (10.2 percent), or other improved sources. About 8.7 percent of households get their water from an unimproved river, stream, lake, pond or irrigation channel. An analysis of TLPHC data to determine whether there was a difference in access to an improved water source showed that male- and female-headed households have essentially the same drinking water sources. The latest DHS data showed that 79.8 percent of the population used safely managed drinking water services (GDS, Ministry of Health and ICF, 2018). In addition, data on toilet facilities for male- or female-headed households showed similar results. The greatest difference – yet still very small – was seen in households with no toilet facility, resorting to the use of bushes, fields, shores, oceans, rivers, ponds or lakes. About 8.8 percent of male-headed households and 10.3 percent of female-headed households fell into this category, with those in the poorest quintile having the highest percentages. The municipality with the highest percentage of households lacking toilet facilities was Oe-Cusse, at 23.5 percent. Furthermore, about 3.6 percent of households had their toilet run-off into an open sewer, the street or the environment. Percentages were also similar between male- and female-headed households. Exposed faecal matter can present numerous public health challenges, including food, water and environmental contamination and the spread of dangerous diseases like diarrhoea, cholera and hepatitis that impact infant and child morbidity and mortality (UNICEF, 2022).

Regarding water access, about 87.3 percent of the population takes less than half an hour to get it. Of those living in urban areas which have better infrastructure, 98.4 percent take less than 30 minutes, and 83.5 percent of rural households take this much time to fetch water. No time differences were found between male- and female-headed households. Numerous sources indicate that women, adolescent girls and children remain responsible for collecting water, which takes up valuable time away from studies or paid employment (UNICEF, 2022). It would, therefore, be interesting to consider adding a question on this in the next TLPHC to better understand who fetches water in the household and what socioeconomic impact it has.

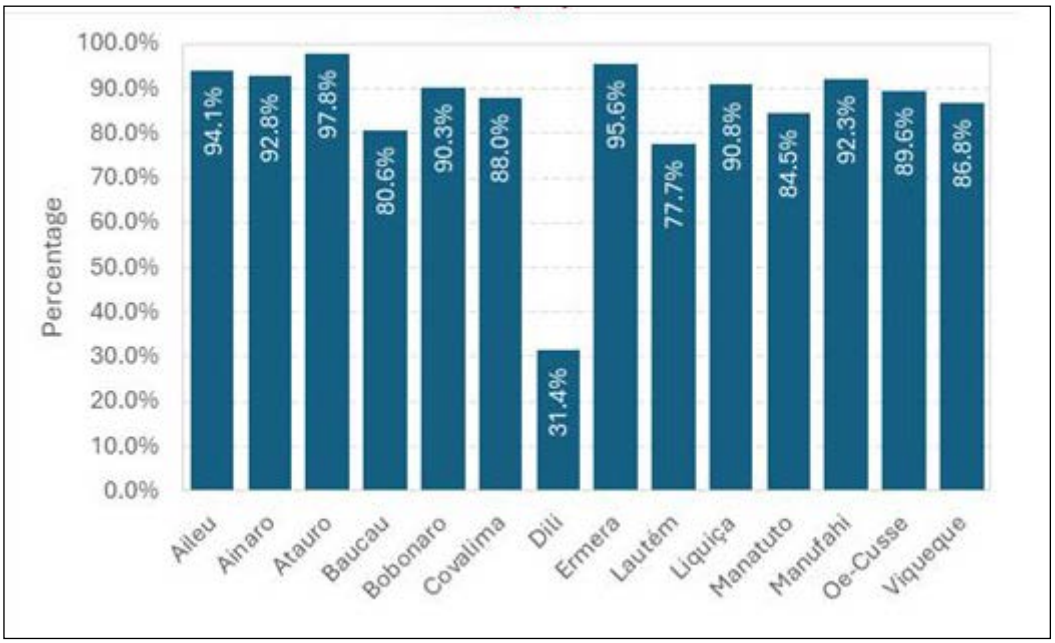
Household air pollution

Over two billion persons rely on open fires or inefficient stoves powered by kerosene, biomass (such as wood, animal dung, and crop waste), and coal for cooking. Women and children face the most significant health risks from household air pollution due to their roles in cooking, gathering firewood, and other domestic tasks. They are often exposed to harmful smoke from inefficient stoves and polluting fuels for extended periods, increasing their vulnerability to non-communicable diseases and numerous other health issues. In 2020, household air pollution was linked to an estimated 3.2 million global deaths annually, including more than 237,000 deaths among children under the age of five. Cooking with clean fuels, such as electricity, biogas, natural gas, liquified petroleum gas, solar or alcohol fuels, is considered better for indoor as well as outdoor air quality and a healthier option for households (World Health Organization, 2024).

Similarly, polluting fuels and devices are also used for electricity. An example is the use of kerosene lamps for lighting, which exposes a person to high levels of fine particulate matter that is harmful to health (World Health Organization, 2024). In this regard, the TLPHC had questions about households' main source of cooking fuel and energy for lighting. Approximately 78.4 percent of households rely

on polluting fuels for cooking, with 2.6 percent using kerosene, 0.2 percent using charcoal, and 75.5 percent relying on wood. In urban areas, 46.6 percent use polluting fuels (7.3 percent kerosene and 39 percent wood), compared to 90.4 percent in rural areas, where 89.4 percent use wood. Using wood as the energy source for cooking is most common in Atauro, where 97.8 percent use this source, followed by Ermera (95.6 percent) and Aileu (94.1 percent) (see Figure 4.8). Little difference was observed in the 2022 TLPHC in the use of material for energy and cooking between male and female-headed households. The predominant use of wood poses significant health risks, especially for women, who typically handle cooking. Polluting fuels such as wood are major contributors to respiratory diseases, natal complications, heart disease, and premature deaths among children (World Health Organization, 2022). As for lighting, the majority of households use electricity from the grid (84.7 percent), followed by electricity from solar panels (11.0 percent).

Figure 4. 8. Percentage of households which use wood as the energy source for cooking by municipality



Source: Timor-Leste Population and Housing Census 2022

5. Fertility and reproductive health

Fertility is an important gender issue that strongly reflects the position of women in society, along with their health and living conditions. In general, high fertility rates are related to low living standards and an unfavourable position of women in society (Sumeeth Lal, 2021). As such, fertility is inherently a gender issue because it is closely tied to gender roles, norms, and inequalities in society.

There are many themes related to fertility that are important for a gender study. These are, among many others, general levels of fertility, reproductive autonomy and decision-making, the difference between wanted and actual fertility, fertility trends and gender norms, access to reproductive health and family planning services, fertility and gender norms, aspects related to infertility, fertility and adolescent girls, and maternal health and mortality. Unfortunately, a census does not collect information to shed light on the many aspects of gender themes related to fertility. Within the limited availability of data on the interaction between fertility and gender aspects in the census, this chapter will deal with the following topics:

- Fertility indicators
- Sex ratios at birth
- Adolescent fertility
- Women who have never given birth

According to the 2016 DHS, women, on average, wanted 3.7 children, while men wanted 3.3 children (General Directorate of Statistics (GDS) & ICF, 2017). The wanted fertility rate stood at 3.5 children per woman. The total fertility rate was 4.2 children, meaning that women in 2016, had 20 percent more children than they wanted. The government uses various channels to allow couples to have the number of children they want at the time they decide. Recently, the government launched a family planning campaign to promote birth intervals of three years or more. The initiative was directed to reduce maternal and infant mortality, which are closely connected to short birth intervals.

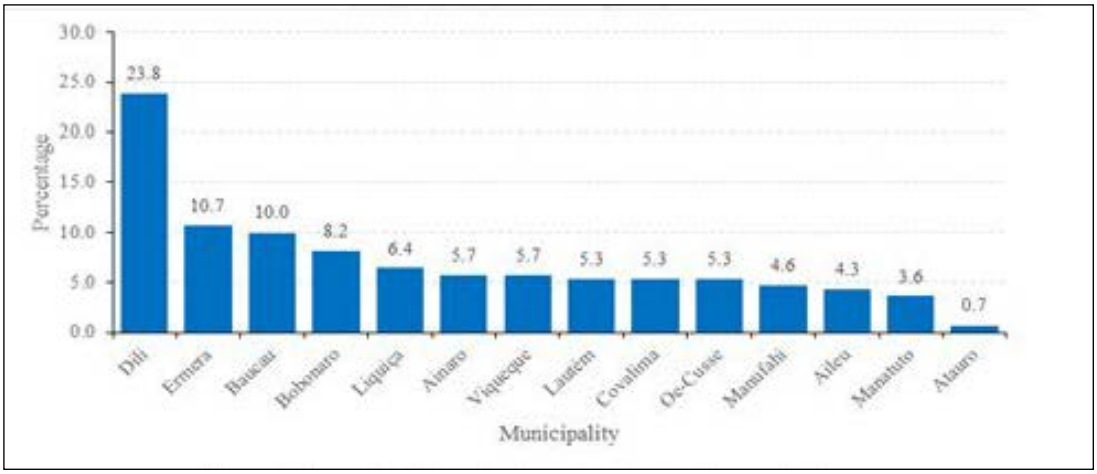
However, despite these efforts, there is still a high unmet need for family planning. The planned 2025 DHS will shed light on the magnitude of the unmet need. In 2016, the unmet need among married women was 25 percent, down from 32 percent in 2009-2010 (General Directorate of Statistics (GDS), Ministry of Health and ICF, 2018). The use of modern contraceptive methods was 24 percent among married women.

5.1. Fertility indicators

Recent live births

The 2022 TLPHC collected information on the month and year of the last-born child of women who had ever given birth. According to the census, 28,316 children were born in the 12-month period before the census. The percentage distribution of recent births by municipality is presented in Figure 5. 1. Almost a quarter of all births in the year before the census (23.8 percent) were born in Dili, while each of the other municipalities had 10 percent or less of the overall number of births. The lowest percentage of recent births was in Atauro (0.7).

Figure 5. 1. Percentage distribution of births in the 12-month period before the census among women aged 15-49, by municipality



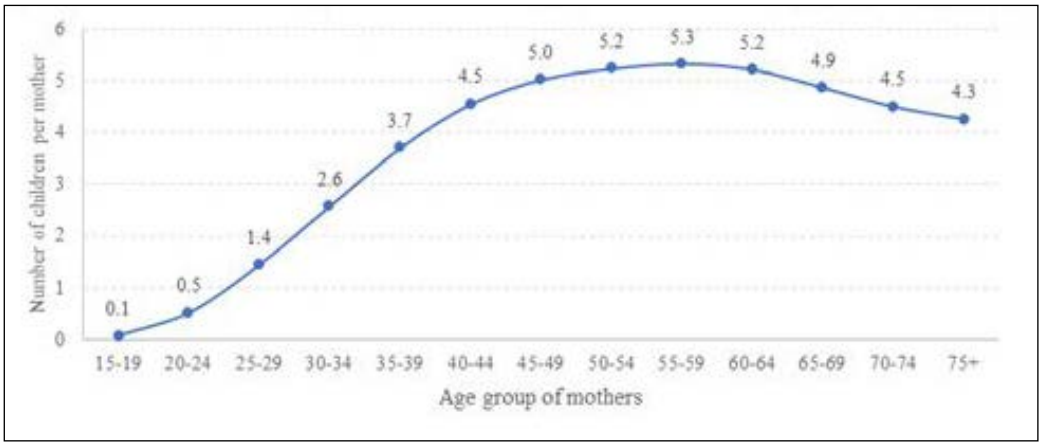
Source: Timor-Leste Population and Housing Census 2022

According to the last three censuses, the number of births in the year before the census has gone down. In 2010 and 2015, there were 29,889 reported births and 32,818 births reported in the 12 months before the census, respectively. (Timor-Leste National Institute of Statistics (INETL), 2024). In 2022, this number reduced to 28,100.

Children ever-born

A first, very general indication of the fertility level in a country is the mean number of live births among females 15 years of age and older by five-year age categories (Figure 5. 2). The graph clearly shows the high levels of fertility in the past. In the age groups 45 to 65, the average number of children ever born is five or higher. At younger ages, the total number of children ever born is lower due to reduced fertility and the fact that these women did not yet have the chance to complete their ultimate number of children. Note that after age 60, the total number of children declines. It is quite common in censuses that older women underreport the number of children they have. This may be due to several factors, such as non-reporting of children who died, memory lapse or social norms.

Figure 5. 2. Mean number of children ever born by females 15 and over, by 5-year age group



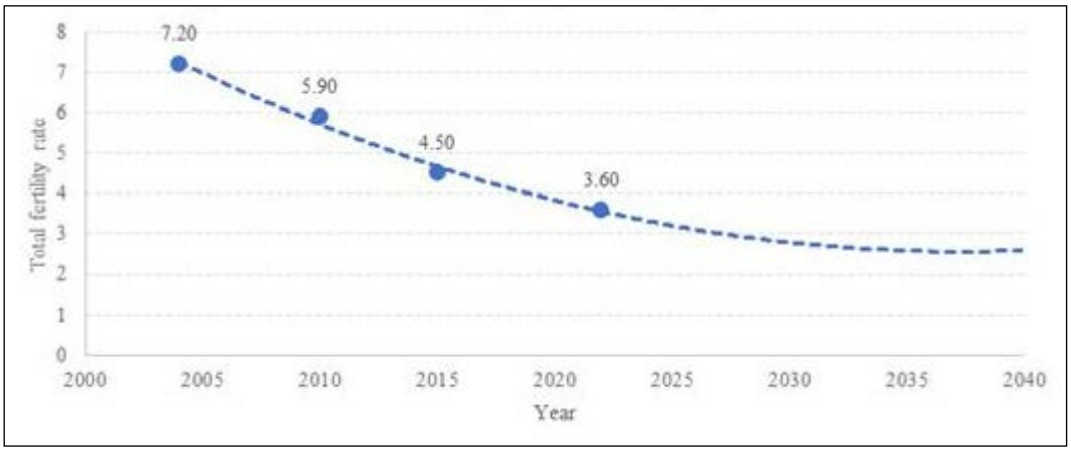
Source: Timor-Leste Population and Housing Census 2022

Total Fertility Rate

The best measure to describe the level of fertility in a country is the total Fertility Rate (TFR), as it provides a comprehensive and standardized representation of the reproductive behaviour of the population. The TFR is '*the average number of live births a woman would have by age 50 if she were subject, throughout her life, to the age-specific fertility rates observed in a given year. Its calculation assumes that there is no mortality*' (SDSN, n.d.)

In the 2022 TLPHC, various indirect estimation techniques were used to estimate the TFR for Timor-Leste. The TFRs using the different estimation methods varied from 2.8 to 5.0 children per woman. In the end, the author decided to choose the estimate of the TFR of 3.6 children per woman, as it was best in line with the observed and expected fertility decline rate. Since 2004, the TFR has been halved from a level of 7.2 in 2004 to the current 3.6 children per woman. In 2010, the census showed a TFR of 5.9. In 2015, the TFR had declined to 4.5 children per woman (Timor-Leste National Institute of Statistics (INETL), 2024). The decline In TFRs is more or less in line with the estimated TFRs from the DHS. In 2016, the TFR was estimated to be 4.2 children per woman by the DHS (General Directorate of Statistics (GDS) & ICF, 2017). According to the projection presented in the fertility thematic report, the TFR is expected to continue to decline to reach a level of 2.6 children per woman by 2040, i.e. if the current decline continues at the same pace.

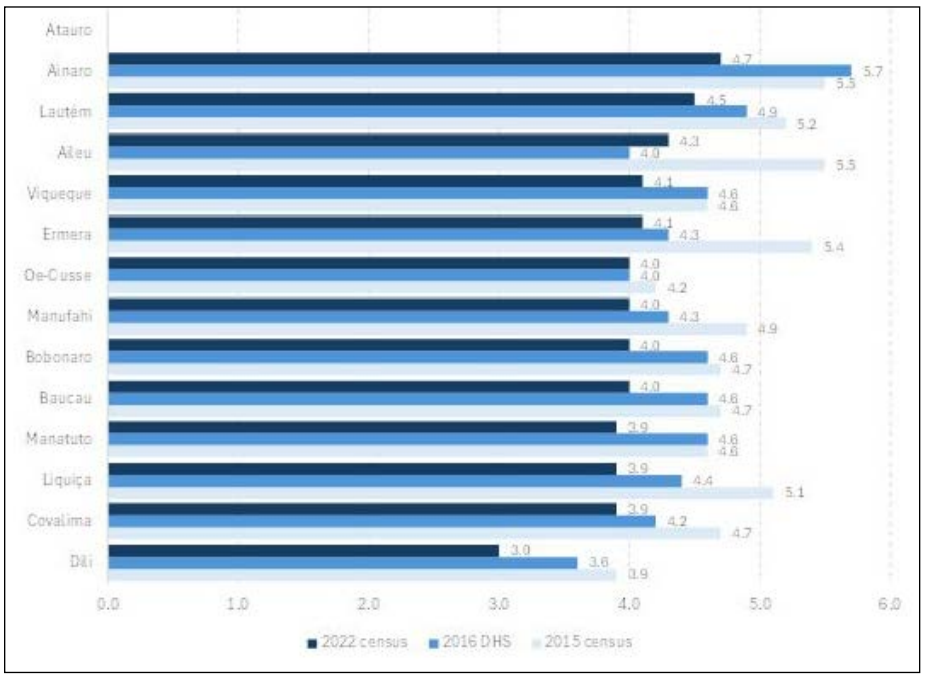
Figure 5. 3. Trend in the total fertility rate and projection until 2040



Source: Timor-Leste Population and Housing Census 2022

Total fertility in rural areas (4.0. children per woman) is higher than in urban areas (3.0 children per woman). Figure 5. 4 depicts the TFRs by municipalities for the censuses of 2015 and 2020 and the 2016 DHS. The municipalities were ordered according to the height of the 2022 TFR. The graph shows large significant differences between the TFRs by municipality. In 2022, the TFRs fluctuated between 3.0 children per woman in Dili and 4.7 children per woman in Ainaro. Note that no TFR could be calculated for Atauro. TFR has come down from 2015 to 2022 in each of the municipalities. The biggest reduction in TFR has taken place in Ermera, where the TFR is 1.3 fewer live births than seven years ago. Other municipalities with a reduction in fertility were Liquiça and Aileu, each with a reduction of 1.2 children. Oe-Cusse had the lowest fertility reduction, with only 0.2 less live births than in 2015. Currently, the TRF in Oe-Cusse stands at 4.0 children per woman.

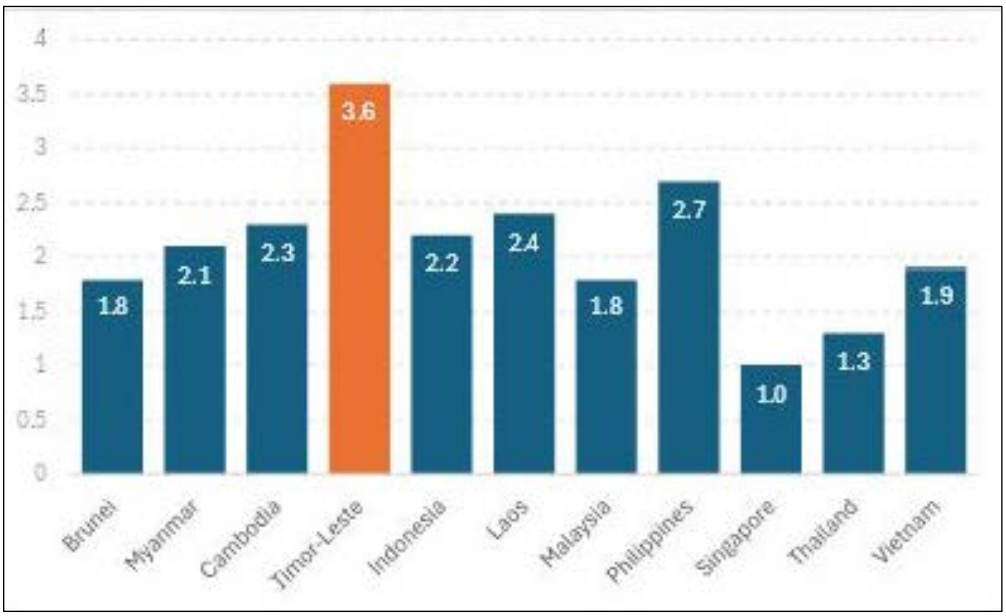
Figure 5. 4. Total Fertility Rate by Municipality, 2015 – 2022



Source: Timor-Leste Population and Housing Census 2022

Figure 5. 5 shows that by far, Timor-Leste has the highest TFR in the Southeast Asian region. The Philippines has the second-highest fertility with a TFR of 2.7. For most populations, the replacement level is around 2.1 children per woman. Replacement level is the average number of children a woman would need to have during her reproductive years to ensure that a population replaces itself from one generation to the next without accounting for migration. It should be noted that replacement level fertility is a demographic concept intended for population analysis and planning, not meant to dictate individual choices or family size which are personal decisions.

Figure 5. 5. Total fertility rates for countries in Southeast Asia, 2022



Source: World Bank Database, 2024

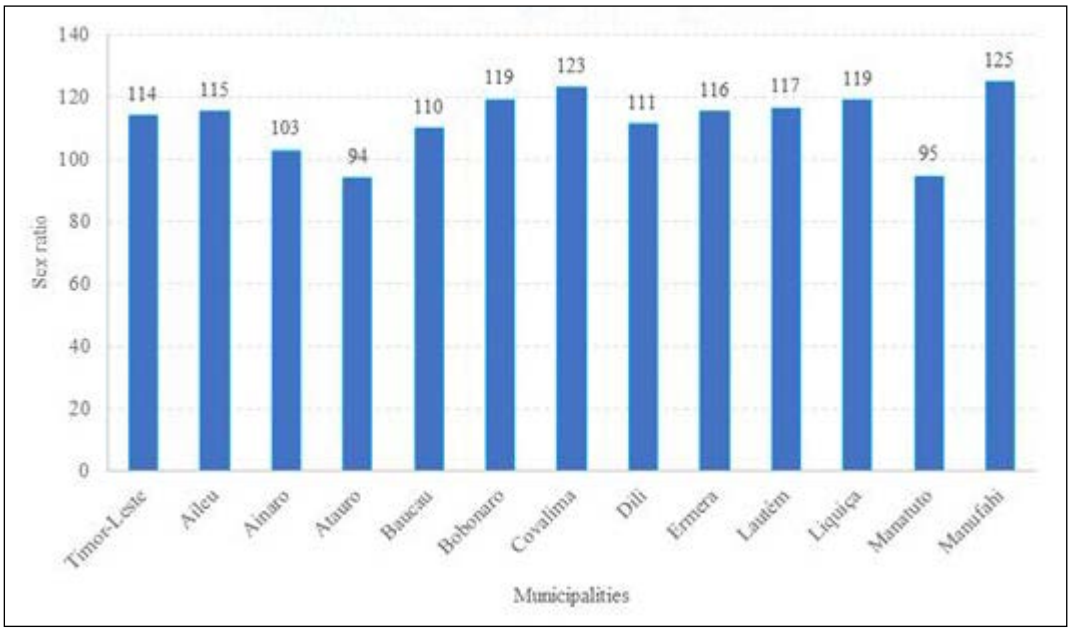
Figure 5. 5 shows that in 2022, among all 11 countries in Southeast Asia, five are below the replacement level. Singapore (TFR 1.0) and Thailand (TFR 1.3) are far below replacement levels. This means that in the near future, both will witness a steady decline in their population sizes. With the current rate of decline in fertility, Timor-Leste still seems to be years away from reaching replacement levels in fertility.

5.2. Sex ratio at birth

Calculating the sex ratio at birth – the number of male births per 100 female births—is important for several reasons. Imbalances in the sex ratio at birth may be an indicator of practices such as prenatal sex determination and selective abortion, which in some countries reflects a strong societal preference for male children. The natural sex ratio at birth usually is 105 boys per 100 girls, with some regional variations. The natural range of the sex ratio at birth can be between 103 and 107 (Ritchie & Roser, 2024).

According to the 2022 TLPHC, the sex ratio is 113.8 male births per 100 female births. Figure 5. 6 shows the sex ratios at birth by municipality. The census data show a wide variety of sex ratios at birth between the various municipalities. The sex ratio at birth is lowest in Atauro (94 boys per 100 girls) and Manatuto (95). The highest sex ratios are in Manufahi (125) and Covalima (123). Note that the difference between the highest and lowest sex ratios at birth is more than 30. Nine out of the twelve municipalities have a sex ratio at birth of 110 male births or higher against 100 female births.

Figure 5. 6. Sex ratios at birth by municipalities



Source: Timor-Leste Population and Housing Census 2022

Also in the 2010 and 2015 TLPHCs, the sex ratio of children born in the last 12 months before the census was high: 111.5 in 2010 and 113.0 in 2015. Although it is possible that indeed the sex ratio in Timor-Leste is high, some arguments can be made to look at the sex ratio more suspiciously. First, the 2016 DHS found for the years 2016 and 2015, sex ratios at birth of 104.1 and 107.3 (General Directorate of Statistics (GDS), Ministry of Health and ICF, 2018). As the DHS used a detailed birth history, it can be assumed that the data quality on births is better than the census's. Moreover, in the census, the sex ratio of children below age 1 was 107 in the 2022 TLPHC. About the same values were observed in the 2015 and the 2010 censuses (Timor-Leste National Institute of Statistics (INETL), 2024).

As mentioned, high sex ratios at birth may be an indication of sex-selective abortion, as has been common across countries in Asia. Given the restricted policy on abortion in Timor-Leste and the limited available technologies to determine the sex of the foetus, it is unlikely that sex-selective abortion is widespread, if at all, exists in Timor-Leste. This means that either there is an error in the reporting of the sex of newly born children or that another factor is at play. More in-depth research is needed to find the reason for the elevated sex ratios at birth in the TLPHC.

5.3. Adolescent fertility

In the thematic report on children and youth in Timor-Leste, an in-depth analysis of adolescent fertility was made (Timor-Leste National Institute of Statistics (INETL), 2024). The text in this section is based on the children and youth report.

Adolescent fertility and teenage pregnancies have profound and wide-ranging consequences, preventing young individuals from realizing their full potential. Teenage mothers are at a significantly higher risk of health complications such as preeclampsia, anaemia, and postpartum haemorrhage. They also face an increased likelihood of poverty, driven by limited access to education and employment opportunities. Many pregnant young girls are forced to leave school, often ending up with lower academic achievements. These effects extend to their children, who are more susceptible to low birth weight and elevated rates of neonatal mortality. At a broader societal level, adolescent fertility contributes to

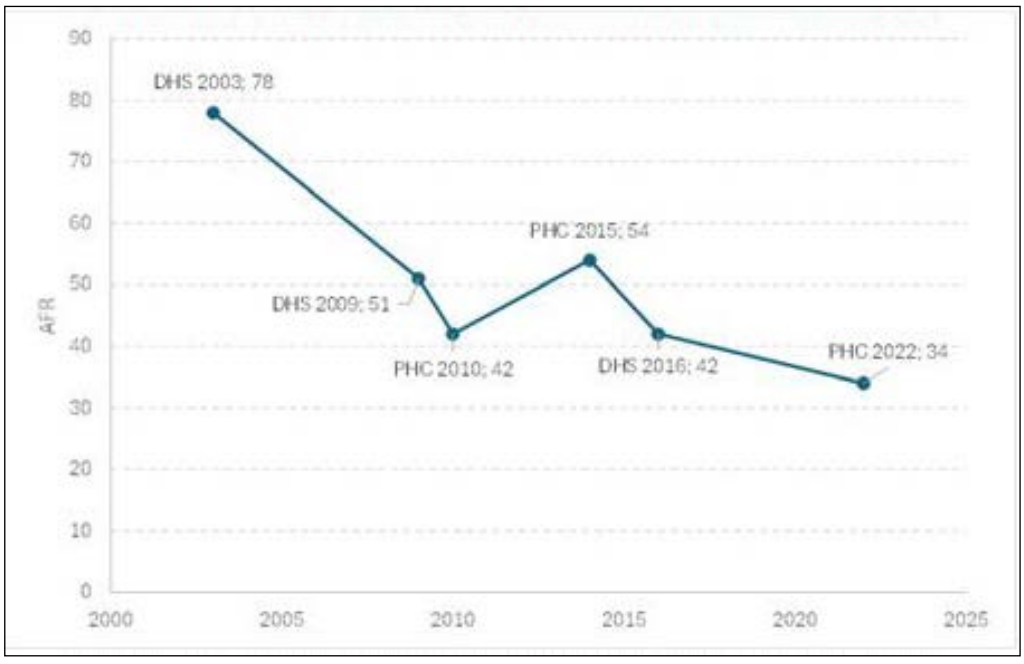
a less skilled workforce and imposes a substantial burden on communities, including higher healthcare expenses, increased dependency on welfare systems, and loss of economic productivity.

The Adolescent Fertility Rate (AFR) is the standard indicator for measuring adolescent fertility. It is defined as the number of births per 1,000 women aged 15–19 years in a given year, providing a clear measure of adolescent childbearing prevalence within a population. Currently, the AFR stands at 34 births per 1,000 adolescent women.

Over time, adolescent fertility has shown a significant downward trend. Figure 5. 7 shows data from the subsequent censuses and DHS surveys. According to the 2003 DHS, the AFR was 78 births per 1,000 adolescent women. Over the past two decades, this figure has more than halved, reaching 34 births per 1,000 adolescent women in 2022.

The most pronounced decrease occurred during the first decade of the 21st century. Between the 2003 and 2009 DHS surveys, the AFR dropped sharply from 78 to 51 births per 1,000 adolescent women. However, census data from 2010 and 2015 reveal a reversal, with the AFR rising from 42 to 54 births per 1,000. Whether this increase represents a genuine trend or is due to data quality issues in the 2010 or 2015 TLPHC remains uncertain.

Figure 5. 7. Trend in adolescent fertility rates based on censuses and DHS



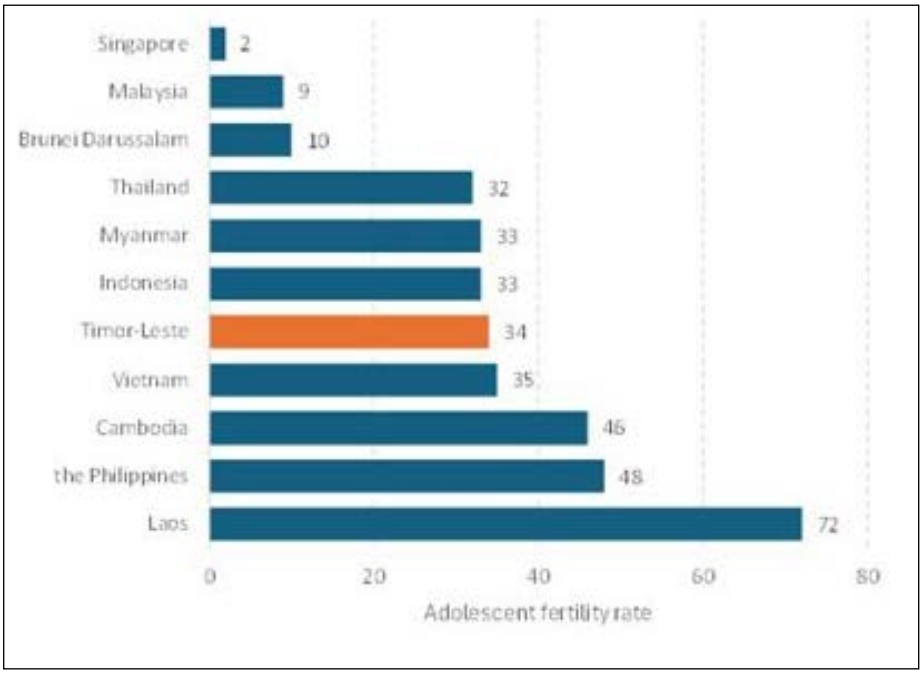
Source: Timor-Leste Population and Housing Census 1015 and 2022, DHS 2016

Adolescent fertility rates vary widely across Southeast Asia (Figure 5. 8). In 2022, at the lower end of the spectrum, Singapore reports just two births per 1,000 women aged 15–19, followed by Malaysia (9) and Brunei Darussalam (10), which also maintain very low levels of adolescent fertility. In contrast, Laos has the highest adolescent fertility rate in the region, with 72 births per 1,000 adolescent girls. Timor-Leste falls in the middle of this range, with an AFR of 34 per 1,000. This rate is similar to those of Thailand, Myanmar, Indonesia, and Vietnam, reflecting a clustering of countries with moderate levels of adolescent fertility in the region.

Significant variations in adolescent fertility levels exist within Timor-Leste. A logit regression was done to explore these differences, using a dependent variable indicating whether a woman aged 15–19 had ever given birth. The following explanatory variables were used: municipality, educational attainment, wealth quintile, type of residence and disability status. The relative risk ratios from this regression are displayed in Figure 5. 9. Even after controlling for intervening factors, notable municipal disparities in adolescent fertility remain. For example, women aged 15–19 in Oe-Cusse have a 1.8 times higher likelihood of having a baby compared to those in Aileu, the reference category. Atauro shows the lowest relative odds ratio (0.679), followed closely by Ermera (0.736) and Lautém (0.732).

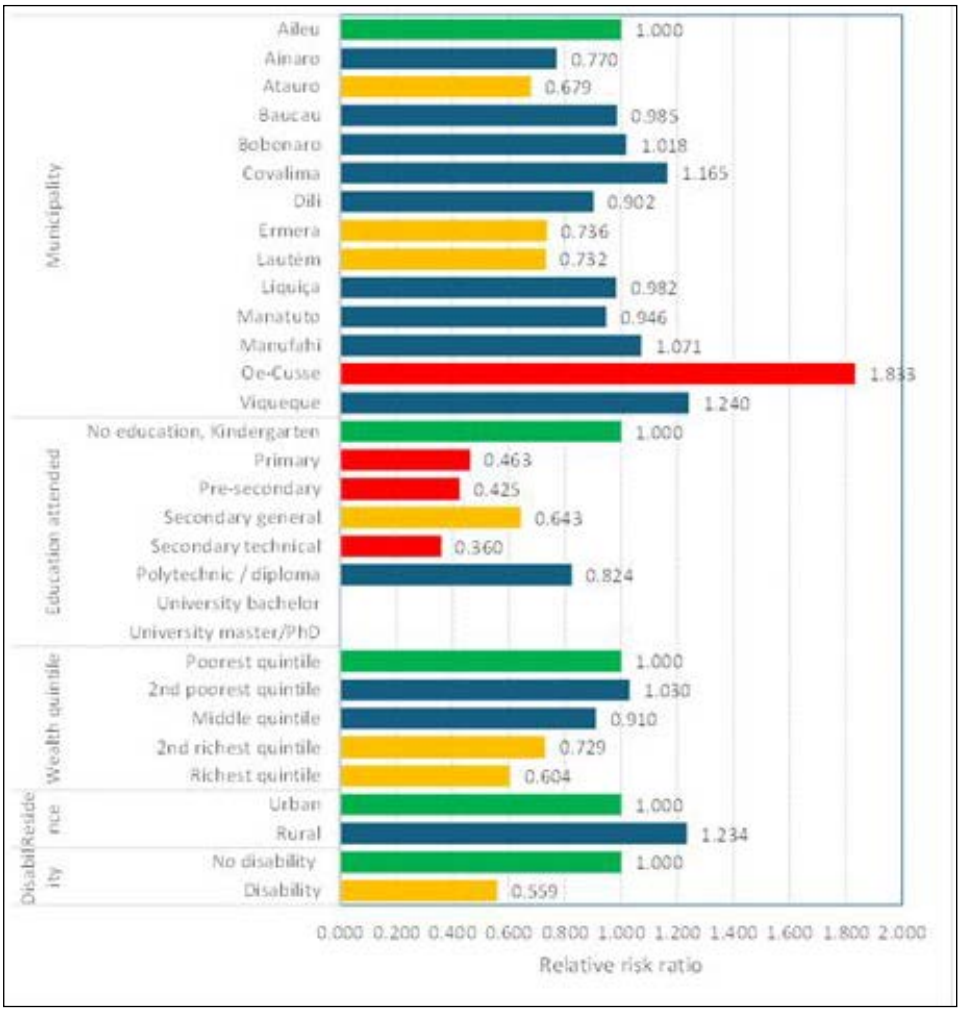
Education emerges as a key determinant. Adolescent women with no education have significantly higher fertility rates compared to those with any level of formal education. The most striking contrast is between women with no education and those with primary education, where the relative risk of giving birth for the latter group is less than half.

Figure 5. 8. Adolescent fertility rates in Southeast Asian countries



Source: World Bank Database, 2024

Figure 5. 9. Relative risk ratios, logit regression on adolescent fertility



Source: Timor-Leste Population and Housing Census 2022

Color codes for the graph see footnote below [3]

Economic status also plays a critical role. Women in the two lowest wealth quintiles are more likely to give birth before age 20 compared to their wealthier counterparts. Similarly, place of residence and disability status are influential. Adolescents living in rural areas have 20 percent higher odds of giving birth (1.234), whereas those with a disability are substantially less likely to do so, with a relative risk ratio of 0.559.

5.4. Women who have never given birth

In many developing countries, stigma and discrimination are connected to infertility and childlessness. Infertility is often linked to social exclusion, marital difficulties, psychological problems (e.g., feeling guilt, shame, depression) and loss of economic security (Rouchou, 2013). In Timor-Leste, the situation of women who face infertility is no different. In the 2016 DHS, a question was asked whether the husband is justified to act violently towards his wife if certain hypothetical events occurred. One of the hypothetical categories was 'If she cannot get pregnant/cannot have children?'. To this question, 44.5 percent of females and 18.8 percent of males, within the age group 15 – 59 answered affirmatively (Spotlight Initiative Timor-Leste, 2021). These figures show that women who cannot get pregnant are an important vulnerable group. In this section, we will describe women who never gave birth. Note that the census does not have information on fertility/infertility status, and we have to rely on information on women who never gave birth.

Two types of infertility can be discerned: primary and secondary infertility. 'Primary infertility is when a pregnancy has never been achieved by a person, and secondary infertility is when at least one prior pregnancy has been achieved' (WHO, 2024). The current section only deals with primary infertility. Note the difference between infertility and infecundity. Demographers define infertility as childlessness in a population, while infecundity relates to the biological incapacity to conceive (UNFPA, n.d.). In this section, we will only deal with the demographic notion of infertility.

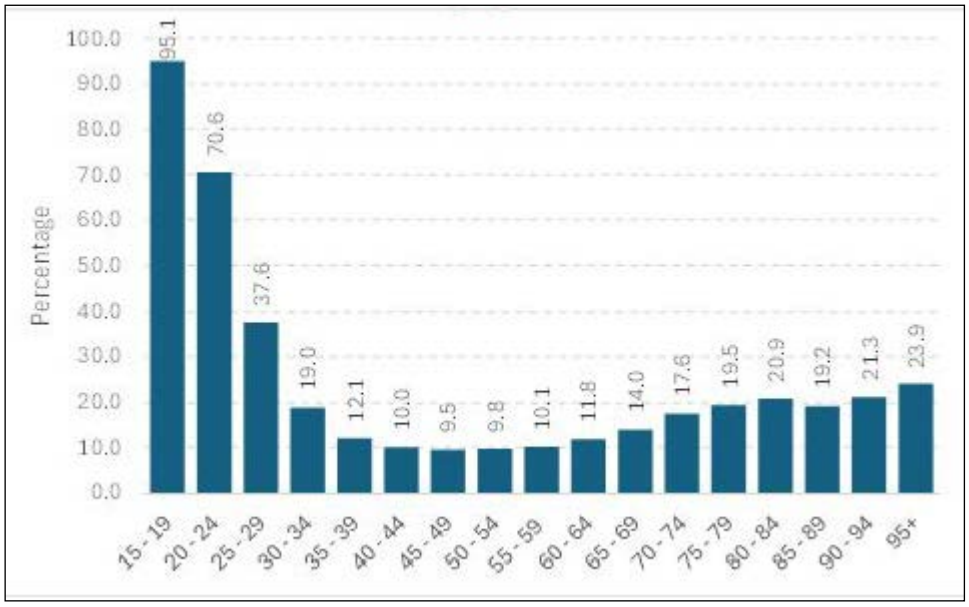
Figure 5. 10 depicts the percentage of all women, 15 years of age and older, who are childless by five-year age groups. Among all women, 39.8 percent never had a live birth. The graph shows an interesting pattern. As expected, women in the youngest age groups have the highest percentage of childlessness. Among all women between the ages of 15 and 19, 95.1 percent never had a child. With rising age, the percentage of women who are childless decreases rapidly. The lowest level of childlessness is between the ages 45 – 49, at which age 9.5 percent of women never gave birth to a (live-born) child. However, after age 50, the percentage of childless women increases. Among women 75 years of age and older, 20.9 percent indicated in the census that they had never given birth. This is twice as high as among women 45 – 49. Although it is possible that in the past, more women did not have children, it is more likely that these high figures are caused by the underreporting of births by the oldest group of women. As indicated before, in censuses, it is quite common for older women to underreport the number of children.

The percentage of women by age who are childless may not be the best way to estimate the level of infertility in a country, as it misses essential information to make a detailed estimate, including those who simply do not want to have children. In a research paper on primary infertility in African censuses, Garenne (Garenne, 2015) proposes to use the proportion of women aged 40 - 49 who never had a live birth. Using this method, Garenne found infertility in South Africa to be 9.8 percent in 2007 and 8.9 percent in 2011. Using the same methodology, the Timor-Leste census would also show an infertility rate of 9.8 percent.

Another way to look at infertility is to look at the percentage of women without a live birth by the duration of marriage. In the census, next to the current age, the age at first marriage was asked. Subtracting the age at first marriage from the current age gives a good estimate of the duration of marriage. In fact, there will be a slight bias as both ages are in completed and not exact years. Figure 5. 11 shows the percentage of married women without a live birth by duration of marriage. The graph shows about the same curve as Figure 5. 10. As only women who are in a marital union are included, the percentages are much lower than in the previous graph. Note that after 15 years of marriage and 20 years of marriage, the percentage of childless women remains more or less the same and stays between 3.0 and 3.5 percent. This would probably be an estimate of infecundity in Timor-Leste, although it does not account for the women who do not want to have children.

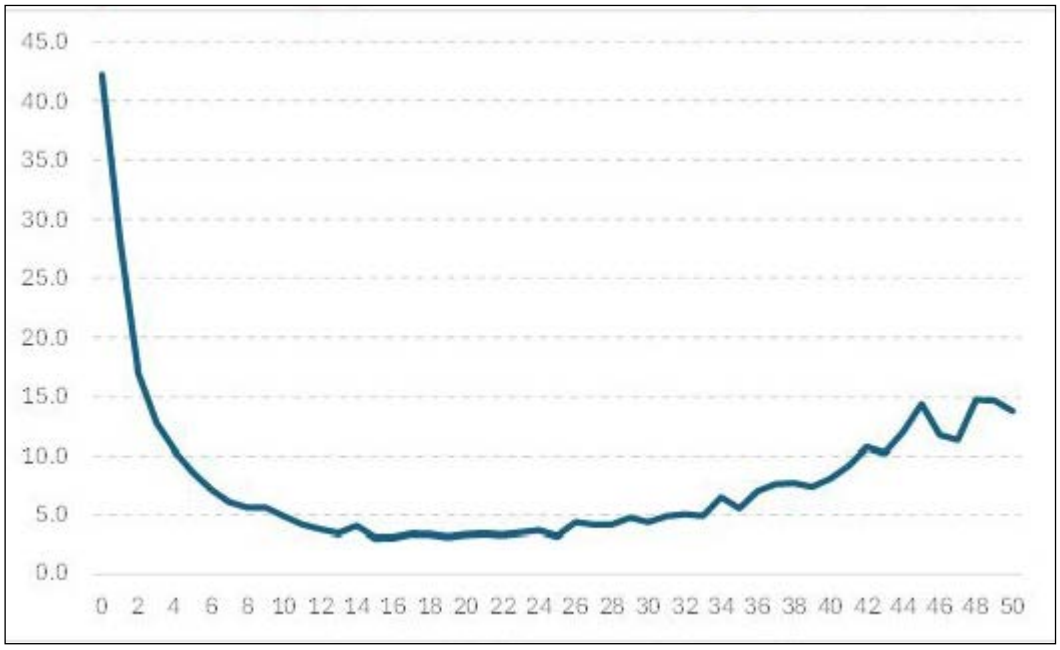
[3] The reference categories for each explanatory variable are assigned a value of "1". They are depicted in green unless they represent a high-risk group. High-risk categories are shown in red, medium-risk categories in orange, and categories with little or no effect are represented in blue.

Figure 5. 10. Percentage of women, 15 years of age and older, who are childless, by 5-year age group



Source: Timor-Leste Population and Housing Census 2022

Figure 5. 11. Percentage of married women with no live births by duration of marriage



Source: Timor-Leste Population and Housing Census 2022

6. Education

Timor-Leste's Strategic Development Plan 2011-2030 emphasizes that education and training are essential for enhancing life opportunities and empowering individuals to achieve their full potential (Government of Timor-Leste, 2011). Education is a vital driver of social and economic progress, playing a key role in reducing gender disparities. Timor-Leste's education system comprises various levels: pre-primary, primary, pre-secondary, secondary, post-secondary and non-tertiary, and tertiary education. Annex 3 provides an overview of the educational structure and its different levels.

> Explaining the Gender Parity Index (GPI)
>
> The GPI is calculated as the ratio of a specific indicator for females to that for males. A value distinctly less than one indicates disparity in favour of men or boys, whereas a value distinctly greater than one indicates disparity in favour of women or girls (UNFPA, n.d.)

The Basic Education Law No. 14/2008 defines the overall legal structure of the educational system. It underscores the importance of providing equal educational opportunities for all persons in Timor-Leste (Government of Timor-Leste, 2008). The National Education Strategic Plan (NESP) 2011-2030 aims to ensure gender parity across all levels of education and to increase the number of female teachers and administrative and managerial staff at the Ministry of Education (Ministry of Education, 2011). Furthermore, a specific policy was developed to address inequalities in education. The National Policy on Inclusive Education, approved in 2017, recognized disparities in access to and success at school and the need to implement specific interventions, including for pregnant females, young mothers, and those living in poverty and remote areas (Government of Timor-Leste, 2017). On a global scale, Sustainable Development Goal 4 underscores the importance of gender equality by striving to '*ensure inclusive and equitable quality education and promote lifelong learning opportunities for all by 2030*' (UNESCO, 2018).

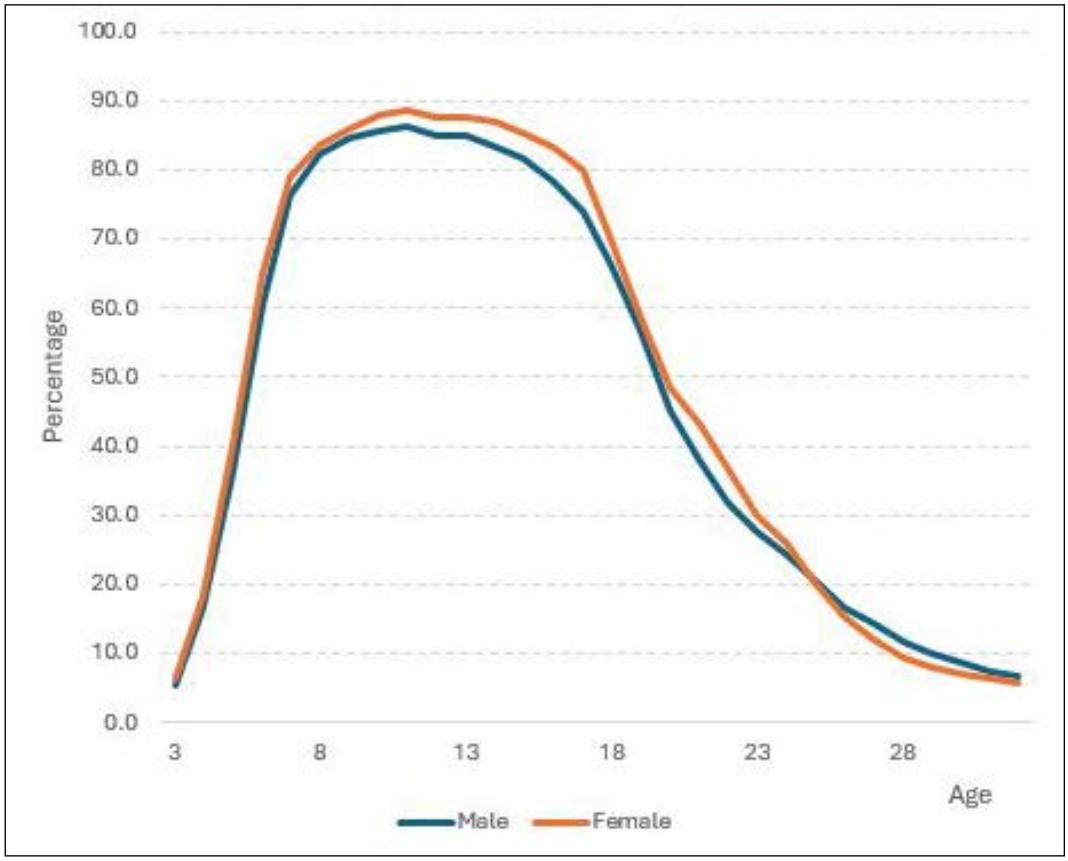
The 2022 Timor-Leste Population and Housing Census thematic report on education paints the educational landscape for females and males and highlights achievements and challenges in education (INETL, 2024). This chapter builds on the analysis conducted in this thematic report, focusing specifically on education through a gender lens. While efforts to expand access to education have benefited both genders, this section will show that gaps in school attendance, literacy and educational attainment remain. Analyzing these patterns is crucial for designing effective policies that advance gender equality, empower women and females, and build a more inclusive society.

6.1. School Attendance

School attendance is defined as' *regular attendance of any regular, accredited programme of organized learning, either public or private, at the time of the census data collection, or alternatively, during the last school year*' (UNFPA, 2014). The population in the 3-34 age group stood at 867,972 persons at the time of the census, of which 440,697 were males against 427,275 females. Approximately half of the population aged 3-34 years were attending school, with a nearly equal number of males (214,565) and females (214,495), resulting in a sex ratio of 100.0. The gender parity index (GPI) was 103.1, as 48.7 percent of all males and 50.2 percent of all females were attending school. This reflects an important shift that took place in male/female school attendance. Both in 2010 and 2015, more males than females attended school, but this was no longer the case in 2022.

Figure 6. 1 shows that in the age group 12-18 and in their early twenties, school attendance is somewhat higher among females than males. Slightly more males currently attended school in their mid-twenties.

Figure 6. 1. Population 3-34 years old, by gender and current school attendance

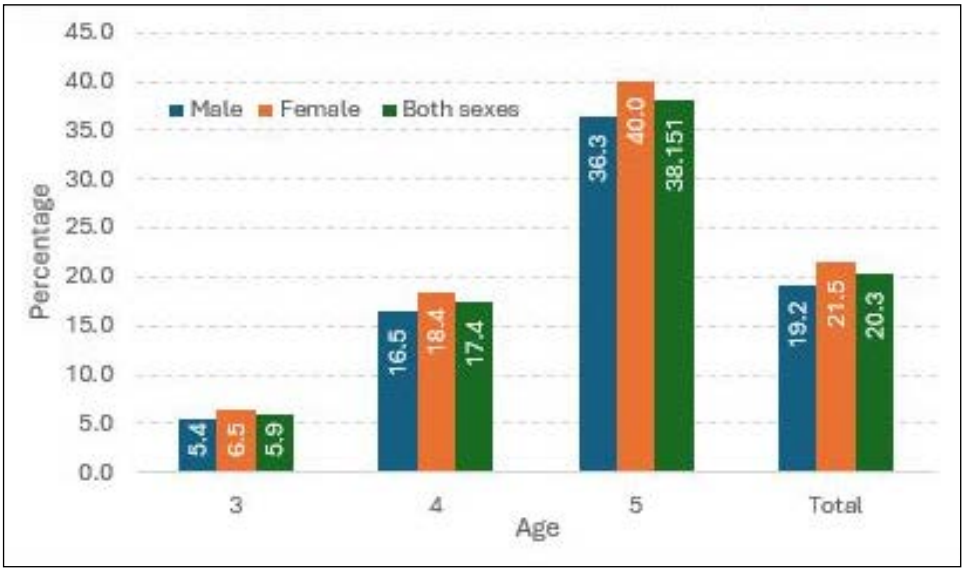


Source: Timor-Leste Population and Housing Census 2022

Pre-primary education

The 2022 TLPHC recorded a total of 100,535 children aged 3-5 years living in Timor-Leste, including 51,324 males and 49,211 females. About 20 thousand children, or one in five, were attending pre-primary education. Although there were more males than females in this age group, the number of females attending pre-primary education was higher than that of males. As age increases, the gender gap widens, whereby more females than males attend school. By age five, 38.2 percent of children were attending school, 40 percent of females versus 36.3 percent of males (Figure 6. 2). This is well below the SDG target 4.2 (Early childhood development and universal pre-primary education), which aims for '*all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education*' (UNESCO, 2018).

Figure 6. 2. Percentage of children aged 3-5 attending school, by age and sex



Source: Timor-Leste Population and Housing Census 2022

The net attendance ratio (NAR) for pre-primary education is calculated by dividing the number of 5-year-old children in kindergarten by the total number of children five years old minus the number already in primary education. It stood at 31.8 percent for both sexes, 30.4 percent for males, and 33.3 percent for females. This implies a GPI of 1.10, as a higher percentage of females attended pre-primary education compared to males. In the education thematic report a logit regression analysis restricted to five-year-old children was done to examine differentials in pre-primary education. The dependent variable was whether the child was currently in pre-primary school (value 1) or not in school (value 0). The results showed that girls were 1.16 times more likely than boys to attend pre-primary school. The municipality where a child lives or the condition of their dwelling were much more telling factors regarding pre-primary school attendance. This result showed there is no real gender difference in pre-primary education attendance.

Primary education

Of the 183,821 children of primary school age (6-11 years), 79.9 percent were attending school at any level. The percentage of females at this age who attend school is again slightly higher than for males: 81.1 percent compared to 78.8 percent, respectively. Of those attending school in this age group, 94 percent went to primary school. There are more overaged males than females in primary education, with a sex ratio of 108.5 compared to the overall sex ratio in the same age group of 104.7.

Table 6. 1 presents the NAR and gross attendance ratio (GAR) and the GPI for primary education. Often, the GAR is higher than 100, which clearly indicates overaged children (older than 11 years) attending primary education. The NAR for primary education was 75.2 percent, slightly higher for females (76 percent) than males (74.4 percent). In 2015, the NAR for both sexes was higher at 80.8 percent (General Directorate of Statistics, 2017). The decrease in NAR is likely due to a drop in attendance related to the COVID-19 pandemic and parents not enrolling their children at the appropriate starting age. Compared to the 2010 census, net attendance slightly increased for both sexes from 71.2 percent for males and 72.1 percent for females (National Statistics Directorate (NSD) & United Nations Population Fund (UNFPA), 2012). In all municipalities and rural/urban residences, the GPI is slightly higher than one, indicating a somewhat more favourable position for girls. Conversely, the GAR was higher for males

than females: 101.2 percent compared to 97.6 percent. This directly reflects the greater number of overaged males attending primary education compared to females. The out-of-school rate for children 6 – 11 years old is high (23.8 per cent). It is slightly higher for boys than for girls (24.8 percent versus 22.7 percent) and has increased since 2015, when it was 14.8 percent for girls and 15.3 percent for boys. The COVID-19 pandemic led to school closures and contributed to the increase in these numbers (Asian Development Bank, 2021).

Table 6. 1. Net and Gross attendance ratio and Gender Parity Indices for primary education according to residence and municipality, by sex

Background characteristic	Net attendance ratio				Gross attendance ratio			
	Male	Female	Total	Gender parity index	Male	Female	Total	Gender parity index
	Primary school							
Total	74.4	76.0	75.2	1.02	101.2	97.6	99.5	0.96
Residence								
Urban	81.2	81.9	81.6	1.01	98.0	95.0	96.6	0.97
Rural	71.8	73.9	72.8	1.03	102.4	98.6	100.5	0.96
Municipality								
Aileu	76.9	77.3	77.1	1.01	106.8	102.3	104.6	0.96
Ainaro	68.6	71.1	69.8	1.04	101.7	97.7	99.7	0.96
Atauro	76.0	74.4	75.2	0.98	104.9	93.2	99.1	0.89
Baucau	78.6	80.0	79.3	1.02	101.8	98.0	100.0	0.96
Bobonaro	68.8	72.7	70.7	1.06	95.1	93.7	94.4	0.99
Covalima	73.7	77.8	75.7	1.06	98.2	96.4	97.3	0.98
Dili	81.1	81.7	81.4	1.01	97.0	93.2	95.1	0.96
Ermera	66.2	67.3	66.7	1.02	101.1	97.0	99.1	0.96
Lautém	76.9	77.7	77.3	1.01	106.3	100.0	103.2	0.94
Liquiça	71.7	72.3	72.0	1.01	100.8	97.4	99.2	0.97
Manatuto	78.7	79.9	79.3	1.01	111.9	103.4	107.8	0.92
Manufahi	78.2	79.4	78.8	1.02	105.3	99.4	102.5	0.94
Oe-Cusse	61.7	66.9	64.2	1.08	101.4	106.3	103.8	1.05
Viqueque	76.3	77.4	76.9	1.01	108.1	102.7	105.5	0.95

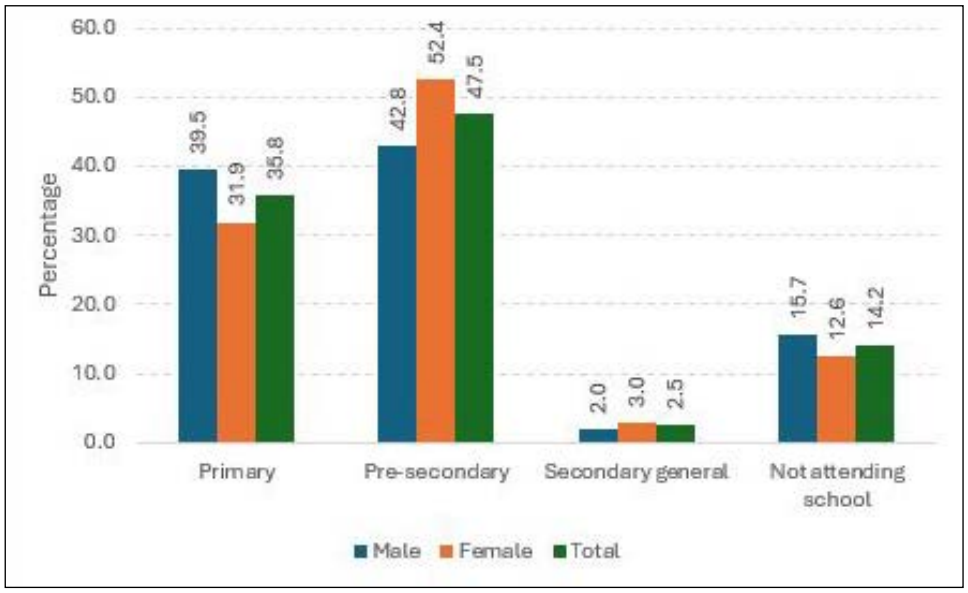
Source: Timor-Leste Population and Housing Census 2022

Pre-secondary education

Pre-secondary education forms part of basic education in Timor-Leste and is usually attended by those aged 12-14 years. The NESP envisages 75 percent of children completing pre-secondary education. The overall net attendance ratio for pre-secondary education remains low, increasing only slightly from 44.2 percent in 2015 to 47.5 percent in 2022. The NEPS indicated '*by 2030, boys and girl alike, will be able to complete a full course of quality basic education' and that 'by 2015, 95 percent of eligible students will be enrolled and receive quality basic education*…'. The 2022 TLPHC revealed that the

country still has significant progress to make in reaching these targets by 2030. Girls demonstrate a notably higher NAR than boys: 52.4 percent compared to 42.8 percent. A persistent challenge across all education levels, including pre-secondary education, is the high proportion of overaged students. Among children aged 12 to 14 years, the typical age for pre-secondary education, 35.8 percent are still attending primary school. A higher percentage of females in this age group are in pre-secondary and secondary education compared to males, as shown in Figure 6. 3. The lower percentage of females not attending school – 12.6 percent compared to 15.7 percent of males – indicates the needed attention for males in primary and (pre-) secondary level education.

Figure 6. 3. Percentage of children 12-14 years old, by current educational level and sex



Source: Timor-Leste Population and Housing Census 2022

Secondary education

Secondary education is divided between general and technical/vocational programmes, which those between the ages of 15 and 17 years are supposed to attend. The total NAR for 2022 was 40.1 percent, a considerable difference compared to 2015, when it was 32.8 (General Directorate of Statistics, 2017). Secondary education attendance was considerably higher for females compared to males, standing at 45.6 percent compared to 34.8 percent in 2022. The GPI for NAR was 1.31 for secondary education, much greater than the GPI for primary education (1.02), where about an equal percentage of males and females attended school at that level. The biggest disparities between males and females in the NAR were seen in Bobonaro, Manatuto and Covalima, where more females attended secondary education. Males and females in rural areas both struggle much more than their urban counterparts in attending secondary education, as reflected in both the GAR and NAR. Interestingly, when considering gross attendance, only Atauro and Oecusse still had more males than females at any age attending secondary education. By ages 15 to 17, one in five adolescents (19.7 percent) were not attending school, with higher rates among males than females: 22.1 percent versus 17.2 percent, respectively (Table 6. 2).

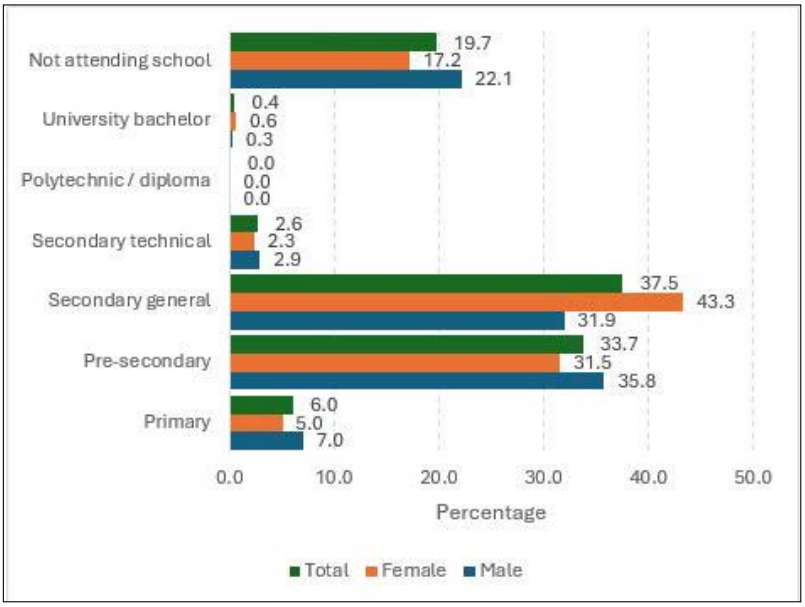
Table 6. 2. Net and Gross attendance ratio and Gender Parity Indices for secondary education according to residence and municipality

Background characteristic	Net attendance ratio				Gross attendance ratio			
	Male	Female	Total	Gender parity index	Male	Female	Total	Gender parity index
	Secondary school							
Total	34.8	45.6	40.1	1.31	91.1	96.2	93.6	1.06
Residence								
Urban	53.7	64.6	59.1	1.20	113.3	116.9	115.1	1.03
Rural	27.9	38.4	33.0	1.38	82.9	88.3	85.6	1.07
Municipality								
Aileu	26.6	39.0	32.7	1.46	95.6	100.2	97.8	1.05
Ainaro	30.5	40.9	35.6	1.34	80.8	90.7	85.7	1.12
Atauro	46.3	48.0	47.1	1.04	108.7	103.8	106.4	0.95
Baucau	39.7	52.1	45.8	1.31	95.7	104.6	100.1	1.09
Bobonaro	25.3	39.5	32.2	1.56	71.8	83.4	77.4	1.16
Covalima	30.2	45.1	37.5	1.49	79.5	88.3	83.8	1.11
Dili	54.0	64.6	59.2	1.20	113.4	117.8	115.5	1.04
Ermera	23.8	29.8	26.8	1.25	81.7	82.3	82.0	1.01
Lautém	31.2	43.5	37.3	1.39	89.9	96.4	93.1	1.07
Liquiça	27.3	35.1	31.1	1.29	81.7	84.7	83.2	1.04
Manatuto	29.9	45.2	37.5	1.51	93.3	99.5	96.4	1.07
Manufahi	36.2	51.2	43.4	1.41	92.7	97.1	94.8	1.05
Oe-Cusse	18.3	24.3	21.3	1.33	72.2	65.0	68.6	0.90
Viqueque	35.1	45.9	40.2	1.31	91.8	100.6	95.9	1.10

Source: Timor-Leste Population and Housing Census 2022

Figure 6. 4 provides further details on the current education level among all 15- to 17-year-olds. Similar to the NESP goals on primary education, the secondary education goal of having all boys and girls be able to select and enrol in quality and relevant secondary education is far from being reached. Similarly, this highlights that achieving SDG target 4.1, which calls for universal completion of primary and secondary education for all girls and boys, remains a significant challenge.

Figure 6. 4. Percentage of children 15-17 years old, by current educational level and sex



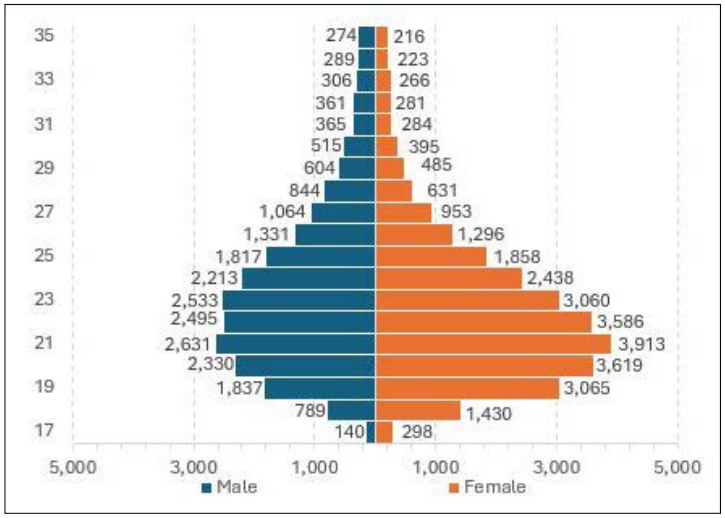
Source: Timor-Leste Population and Housing Census 2022

Tertiary education

Tertiary education in Timor-Leste comprises general tertiary education (Bachelor's, Master's or Doctorate degree) and a polytechnic diploma. The typical age for attending tertiary education is between 18 and 23 years old. Figure 6. 5 portrays the population aged 17-35 years in tertiary education by sex, showing that more females than males in their early twenties are attending tertiary institutions. The figure also shows that many students are overaged. Tertiary education attendance is predominantly concentrated in the Dili municipality, where 74.2 percent of all students aged 18 to 23 years are enrolled in tertiary education.

The NAR for tertiary education is currently higher for females than males, standing at 22.2 percent compared to 14.5 percent, respectively (Table 6. 3). As with other educational levels, the GARs are higher due to overaged students. Tertiary education is concentrated in urban areas, and therefore, attendance ratios are much higher in urban areas than in rural areas for both males and females.

Figure 6. 5. Population aged 17-35 years old in tertiary education by sex



Source: Timor-Leste Population and Housing Census 2022

Table 6. 3. Net and Gross attendance ratio and Gender Parity Indices for tertiary education according to residence and municipality

Background characteristic	Net attendance ratio				Gross attendance ratio			
	Male	Female	Total	Gender parity index	Male	Female	Total	Gender parity index
	Tertiary education							
Total	14.5	22.2	18.3	1.52	29.2	35.5	32.3	1.22
Residence								
Urban	31.4	44.0	37.9	1.40	57.9	67.5	62.9	1.17
Rural	6.2	9.8	7.9	1.59	15.0	17.4	16.2	1.16
Municipality								
Aileu	5.3	8.9	7.0	1.67	14.4	16.9	15.6	1.18
Ainaro	3.9	6.7	5.2	1.71	12.3	15.4	13.8	1.25
Atauro	7.1	6.2	6.7	0.87	20.7	13.6	17.2	0.65
Baucau	7.7	12.8	10.1	1.67	17.1	22.0	19.4	1.29
Bobonaro	4.0	8.3	6.0	2.08	10.9	14.8	12.7	1.36
Covalima	2.0	4.7	3.3	2.33	6.1	8.5	7.2	1.39
Dili	36.1	48.9	42.8	1.35	66.6	74.9	70.9	1.12
Ermera	7.1	8.4	7.7	1.19	17.3	15.5	16.4	0.89
Lautém	3.7	5.7	4.7	1.54	11.0	11.4	11.2	1.04
Liquiça	6.7	11.8	9.2	1.77	16.8	21.5	19.1	1.28
Manatuto	5.9	12.3	8.9	2.09	13.4	20.0	16.5	1.49
Manufahi	8.7	13.5	11.0	1.54	17.3	20.9	19.0	1.21
Oe-Cusse	5.2	5.6	5.4	1.08	11.9	9.9	10.9	0.83
Viqueque	1.8	3.1	2.4	1.73	6.0	7.5	6.7	1.24

Source: Timor-Leste Population and Housing Census 2022

When it comes to the level of tertiary education, more females than males attended polytechnic/ diploma and bachelor's programmes than males. However, the highest levels of education (Master's and PhD) are slightly more often attended by males (Table 6. 4).

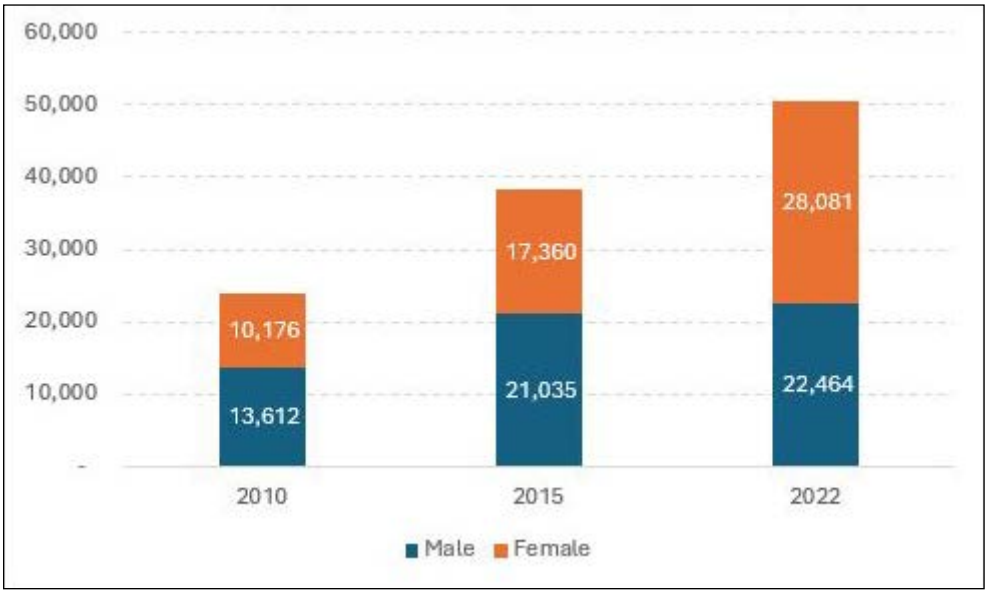
Table 6. 4. Number of students in tertiary education by level and sex

	Male	Female	Total
Polytechnic/diploma	897	1,219	2,116
University bachelor	21,317	26,661	47,978
University master	189	148	337
University PhD	61	53	114
Total	22,464	28,081	50,545

Source: Timor-Leste Population and Housing Census 2022

Figure 6. 6 indicates the progress that has been made in the total number of students attending tertiary education since 2010. The orange blocks (representing females) in the bar graph become disproportionally larger compared to the blue block (representing males), indicating more progress among females than males when it comes to tertiary education attendance.

Figure 6. 6. Number of students in tertiary education by sex and year of census

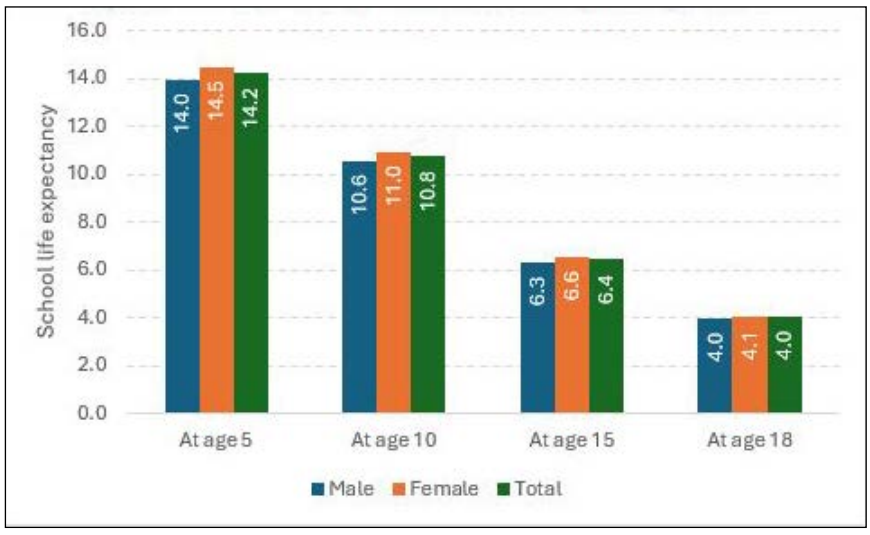


Source: Timor-Leste Population and Housing Census 2022

School life expectancy

School life expectancy indicates the average number of years a person will remain in school if current trends continue. When considering the school life expectancies at age five, Figure 6. 7 shows that females are expected to stay in school half a year longer than their male counterparts. A similar trend can be seen for those aged 10 and 15, whereby females stay in school slightly longer than males on average.

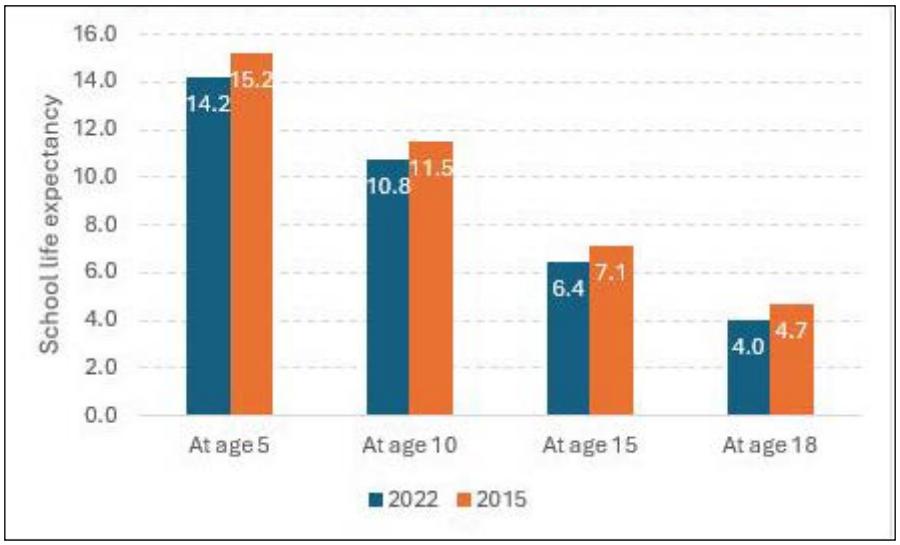
Figure 6. 7. School life expectancy in years at specific ages by sex



Source: Timor-Leste Population and Housing Census 2022

This was different in 2015 when males stayed in school longer on average than females (Figure 6. 8). At the age of ten, males were expected to stay in school for another 12 years on average, compared to 11.1 years for females. School life expectancy decreased between 2015 and 2022, which was likely due to the COVID-19 pandemic. At age five, the school life expectancy decreased from 15.2 years in 2015 to 14.2 years in 2022.

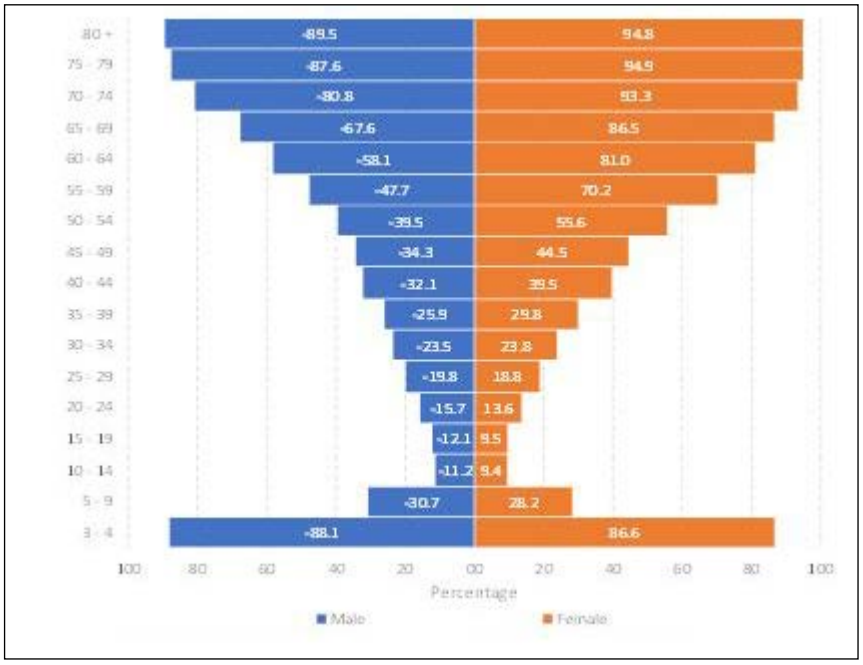
Figure 6. 8. School life expectancy by age, 2015 and 2022



Source: Timor-Leste Population and Housing Census 2022

Figure 6. 9 indicates the progress which has been made over the years in ensuring more females are able to attend education. The figure clearly shows that a larger percentage of females never attended school in older age groups. As age decreases, this gap closes. In fact, among the youngest age groups, females overtake school attendance and represent a larger percentage of the school-going population than males.

Figure 6. 9. Percentage of persons who never attended school by age and sex



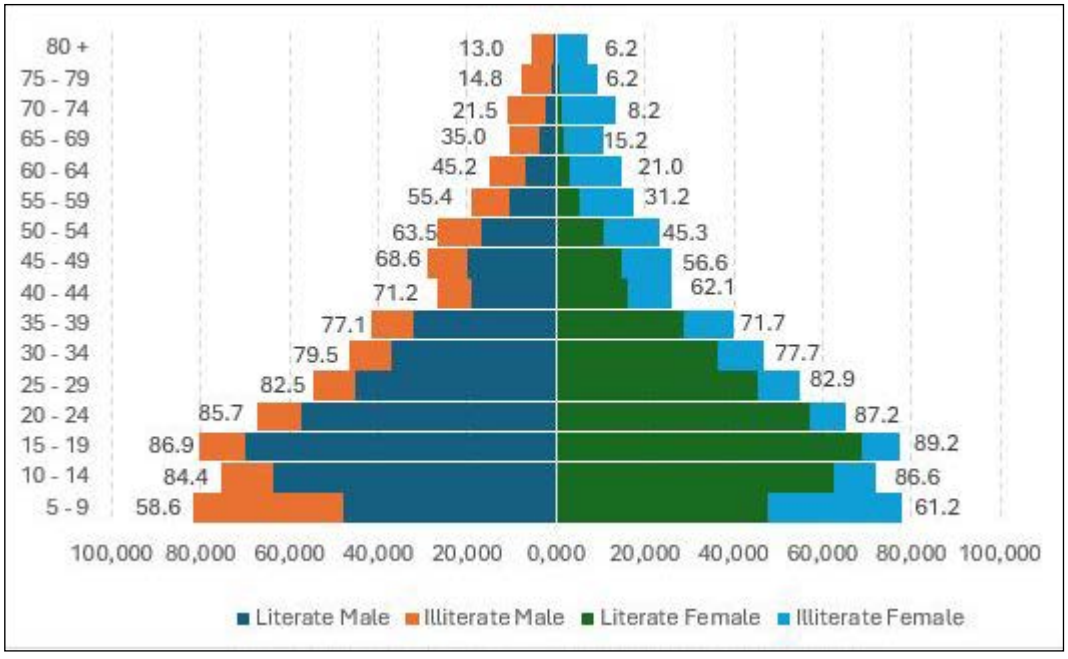
Source: Timor-Leste Population and Housing Census 2022

6.2. Literacy

In 2022, the literacy rate for individuals aged five and above was 70.7 percent. Literacy was slightly higher among males (72.5 percent) compared to females (68.8 percent). Notably, for those aged 25 and older, literacy levels for both genders showed significant improvement compared to 2015 and earlier years. For example, male literacy increased from 72.6 percent in 2015 to 77.1 percent in 2022, while female literacy rose from 62.1 percent to 71.7 percent during the same period. These numbers indicate that Timor-Leste is on the right path to achieving SDG 4.6 '*ensuring that all youth and a substantial proportion of adults, both men and women, achieve literacy and numeracy*', though further advancements are still needed.

Illiteracy in Timor-Leste varies significantly by age. Figure 6.10 illustrates the number of literate and illiterate persons by age and sex, with literacy rates shown alongside the bars. Literacy is low among children aged 5–9, as many do not start primary education at the age of six. According to the 2022 TLPHC, the youth literacy rate was 87.3 per cent, 86.4 per cent for males and 88.3 per cent for females aged 15-24 years. This is an improvement compared to the 2015 TLPHC, when youth literacy stood at 84.4 per cent. Despite efforts to reduce illiteracy, a notable proportion of the population remains unable to read or write, even among younger age groups—13.1 percent of males and 10.8 percent of females aged 15–19 are illiterate. Females have higher literacy rates than males up to age 30, but this trend reverses thereafter. Between the ages of five and 29 years, females have consistently higher literacy rates than males. Starting from the age group 30-34 years and older, males are consistently more literate than females. Illiteracy is especially high after age 50, with fewer than 10 percent of females over 70 able to read and write. In comparison, males aged 70-74 years have a literacy rate of 21.5.

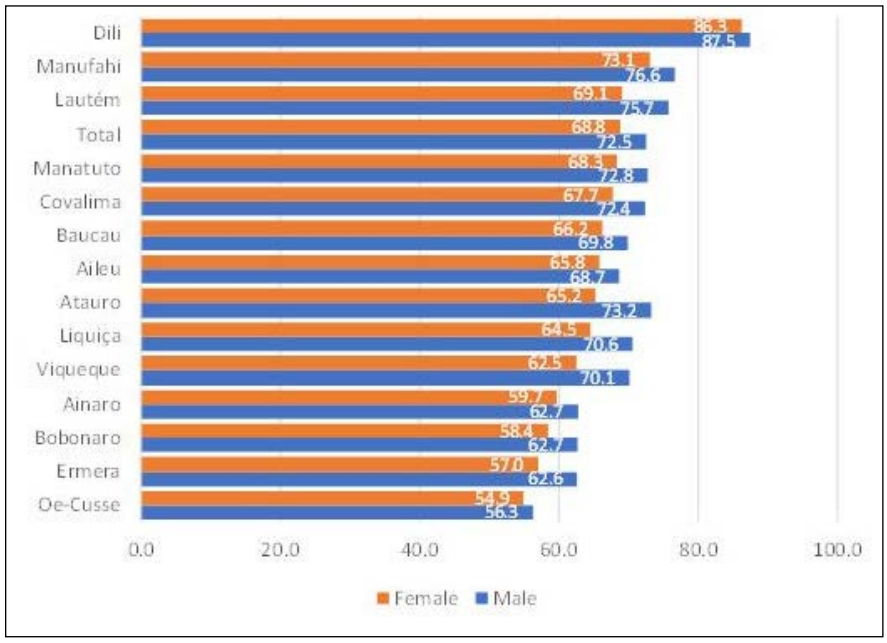
Figure 6. 10. Population five years of age and older by literacy status and sex, with age-specific literacy rates



Source: Timor-Leste Population and Housing Census 2022

When considering literacy rates among males and females five years of age and older and the municipality in which they live, Figure 6. 11 shows that several municipalities have a larger gender gap in literacy. Atauro has a difference of eight percent, whereby 73.2 percent of males and 65.2 percent of females were literate, respectively. Viqueque (70.1 percent versus 62.6 percent) Lautém (75.7 percent versus 69.1 percent), and Liquiça (70.6 percent versus 64.5 percent) also have a higher percentage of literate males compared to females. Notably, the smallest difference can be seen in Dili, where 87.5 percent of males and 86.3 percent of females were literate.

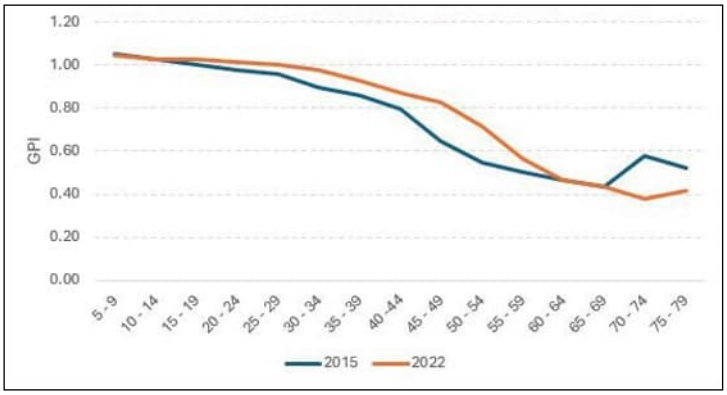
Figure 6. 11. Literacy rate among persons five years of age and older, by municipality and sex



Source: Timor-Leste Population and Housing Census 2022

Figure 6. 12 compares age-specific GPIs for literacy between the 2015 and 2022 censuses. Up to age 25 in 2022, there is little difference between genders, with females holding a slight advantage. The most notable literacy improvements for women compared to men occurred in the 45–49 and 50–54 age groups. For ages 45–49, the GPI rose from 0.64 in 2015 to 0.83 in 2022, and for ages 50–54, it increased from 0.55 to 0.71. The pattern is less consistent in older age groups, likely due to smaller population sizes.

Figure 6. 12. Gender parity indices for literacy by age group, 2015-2022



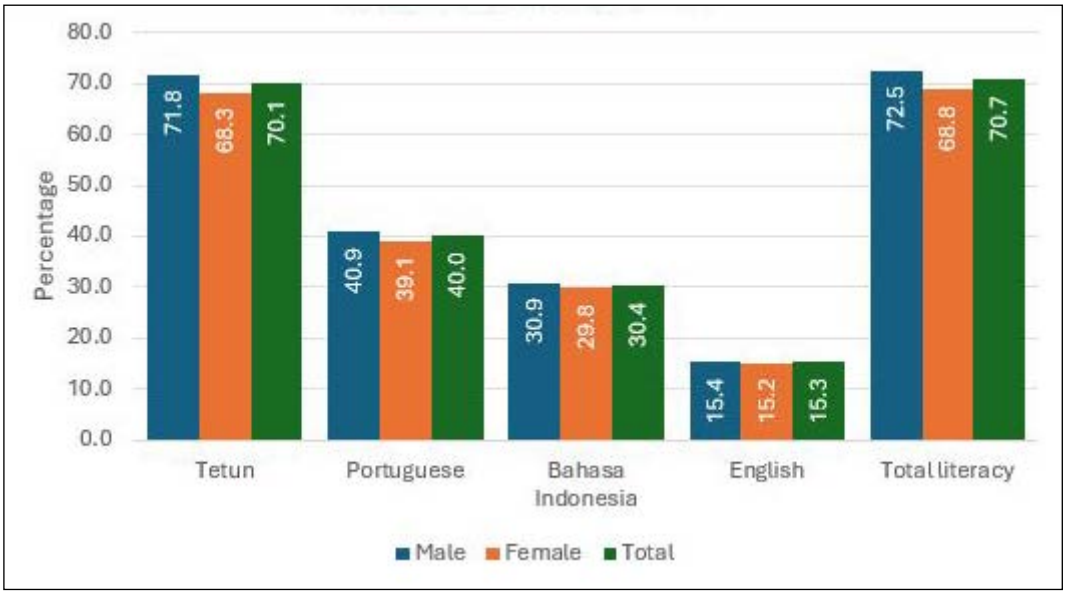
Source: Timor-Leste Population and Housing Census 2022

When considering the four most spoken languages in Timor-Leste (Tetun, Portuguese, Bahasa and English), the largest disparity in terms of literacy is seen in the Tetun language, with 71.8 percent of males compared to 68.3 percent of females being able to read and write a short letter in that language. Gender disparities in English literacy are the smallest of all four languages Figure 6. 13.

Within the context of gender rights, it is important to look at the interaction between literacy and adolescent fertility. Across all ages, illiteracy rates are significantly higher among females who have given birth during adolescence compared to those who have not. Since most women typically acquire literacy skills before the age of 15, the data suggest that fertility rates are higher among illiterate women rather than implying that having a child at a young age directly leads to a lack of reading and writing skills. In this respect, it is better to look at the school attendance of girls having babies. While 85.6 per cent of 15-year-old and 64.5 per cent of 19-year-old females who are not mothers are in school, the corresponding percentages for adolescent mothers of the same age are 56.6 per cent and 10.3 per cent, respectively. It is worrying that the attendance rates for adolescent mothers aged 15 to 19 were much lower in the 2022 TLPHC (18.3) than in the 2015 TLPHC (32.6 per cent) (INETL, 2024).

As stipulated in the fourth periodic report of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) in Timor-Leste, these numbers further highlight the continued need for comprehensive curricula at all levels of education on inclusive and accessible gender equality content (including women's rights and violence against women and girls), age-appropriate sexuality education and the prevention of early pregnancies and sexually transmitted diseases, and human rights and peace education (United Nations, 2023). Besides early pregnancies, the CEDAW also attributes the dropout rate among females in secondary education in Timor-Leste to child marriage, discrimination based on sex and/or disability, lack of menstrual hygiene products and separate facilities in schools, particularly in rural areas (United Nations, 2023). The Ministry of Education recently issued a ministerial dispatch to allow females to return to school after childbirth and, together with the Secretary of State for Equality, continues to advocate for the inclusion of pregnant females and young mothers to return to school (Secretary of State for Equality, 2024).

Figure 6. 13. Percentage of persons five years of age and older who can read and write a short letter to a friend by language and sex



Source: Timor-Leste Population and Housing Census 2022

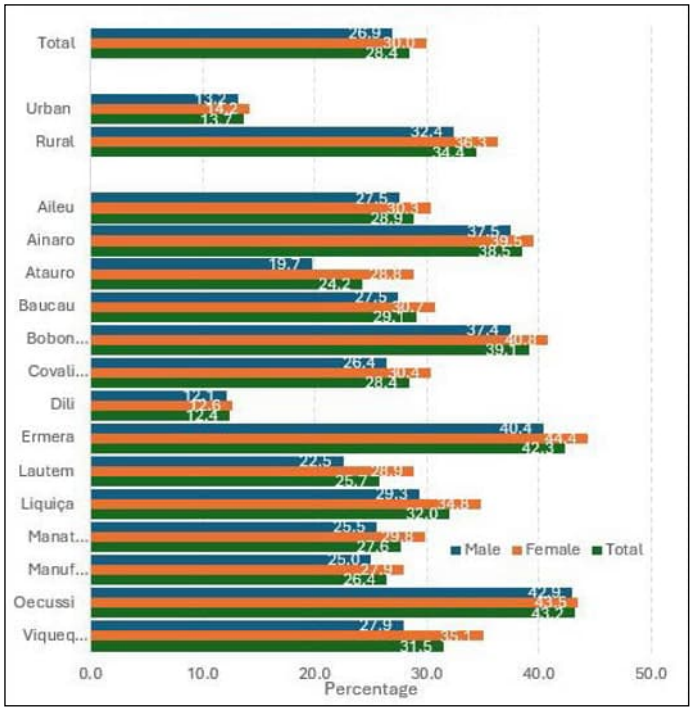
6.3. Educational attainment

In the 2022 TLPHC, different questions were asked about the educational attainment of all persons three years and older. The first question asked whether the person had ever attended school. If the answer to this question was affirmative, the highest level that the person had attended was asked. All persons from primary to university were then asked for their highest completed year or grade.

A total of 394,438 persons three years of age and older in Timor-Leste never went to school, 191,513 males (30.2 percent) and 203,025 females (33.0 percent). Progress in school attendance has been similar to progress in literacy, whereby for each subsequent older age group, both males and females, the percentage of persons who did not attend school is larger than the previous one. Figure 6. 14 shows the significant differences between males and females within the never-attended school population. In rural areas, 36.3 percent of women had never gone to school, against 14.2 percent in urban areas. Among municipalities, Ermera (44.4 percent) and Viqueque (35.1 percent) had the highest number of women who never attended school. Improvements are still needed, particularly in the younger age cohorts. In the age group 10 – 14 years, for example, 15,271 children never went to school. The number of boys (8,483) is higher than the number of girls (6,788).

Overall, 57.2 percent of the population had completed at least primary education. In urban areas, 78.4 percent of individuals aged 15 and older had finished at least primary school, compared to only 48.3 percent in rural areas. Around 45.1 percent of the population had completed at least pre-secondary education, 14.5 percent at least secondary education, and 11.2 percent had attained tertiary education. Among males, 11.6 percent had reached tertiary education, while for females, the figure was 10.7 percent, resulting in a gender parity index of 0.92. While significant progress was observed in educational attainment between the 2004, 2010, and 2015 censuses, only slight changes were noted between 2015 and 2022.

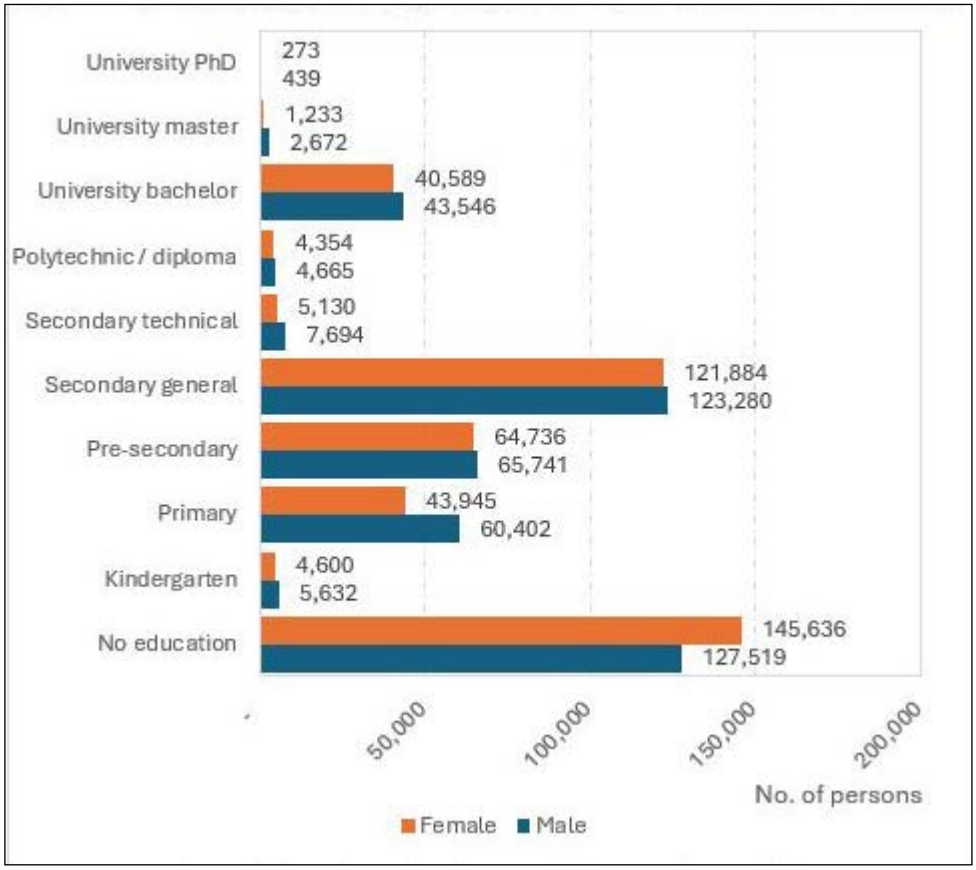
Figure 6. 14. Percentage of persons five years of age and older, who never went to school, by rural/uban residence and municipality, by sex



Source: Timor-Leste Population and Housing Census 2022

Figure 6. 15 shows the number of males and females and their highest level of education attended. Note that this is not necessarily the highest diploma they obtained. Table 6.5 further shows these numbers in percentages and shows that a higher percentage of females attended pre-secondary education (15 percent) and secondary general education (28.2 percent) compared to males. Conversely, a higher percentage of males attended kindergarten (1.3 percent) and primary education (13.7 percent), secondary technical education (1.7 percent) and tertiary education in comparison to their female counterparts. The low attendance of tertiary education shows that SDG 4.3, which aims to '*ensure equal access for all women and men to affordable and quality technical, vocational and tertiary education, including university*' still needs work.

Figure 6. 15. Number of persons by highest level of education attended and sex



Source: Timor-Leste Population and Housing Census 2022

Table 6. 5. Percentage of persons by highest level of education attended and sex

	Male	Female	Total
No education	28.9	33.7	31.3
Kindergarten	1.3	1.1	1.2
Primary	13.7	10.2	11.9
Pre-secondary	14.9	15.0	14.9
Secondary general	27.9	28.2	28.1
Secondary technical	1.7	1.2	1.5
Polytechnic/ diploma	1.1	1.0	1.0
University bachelor	9.9	9.4	9.6
University master	0.6	0.3	0.4
University PhD	0.1	0.1	0.1
Total	100.0	100.0	100.0

Source: Timor-Leste Population and Housing Census 2022

In summary, the 2022 TLPHC clearly indicates some progress in education, particularly in closing the gender gap. The GPI now actually shows more females in primary, secondary and tertiary education than males, and females are also expected to stay in school longer than males. Additionally, more males than females do not attend school. The out-of-school rate for children aged 6-11 is slightly higher for boys than girls and has increased since 2015. The TLPHC results show that progress in education has been most considerable among younger age groups. Older persons, females, in particular, are lagging behind. A larger percentage of older females never attended school and have lower literacy rates compared to males.

"photo Credit: ©" INETL, I.P)

7 Economic activity status

SDG target 8.5 aims to achieve full employment and decent work for all with equal pay. Gender equality and workplace equity are crucial in reaching economic opportunities for all. Other targets in the sustainable development goals that are closely connected to gender issues in economic activity status are Target 8.6: '*By 2020, substantially reduce the proportion of youth not in employment, education or training' and Target 8.7: 'Take immediate and effective measures to eradicate forced labour, end modern slavery and human trafficking and secure the prohibition and elimination of the worst forms of child labour, including recruitment and use of child soldiers, and by 2025 end child labour in all its forms'*.

In the concluding observations on the fourth periodic report on the implementation of the CEDAW in Timor-Leste, the committee voiced concern about some negative gender aspects in employment, among others: women's concentration in lower-paid jobs in the informal economy, the large percentage of women in unpaid work, inequality of pay for equal work, the problems of women to get into managerial positions and sexual harassment in the workplace (United Nations, 2023). The 2022 TLPHC provides another opportunity to evaluate progress in some of the principles of CEDAW.

Before exploring the different aspects of the economic activity of males and females, it is important to indicate that the concepts and definitions of economic activities used in the 2022 TLPHC were somewhat different from the ones used in the 2015 TLPHC. The changes were made to follow the adapted definitions of the International Labour Organization (ILO) (International Labour Organization, 2013).

1. *Employment Definition:*
   - In the 2022 TLPHC, persons are considered employed if they engaged in any activity to produce goods or provide services for pay or profit during the reference week (29 August to 4 September 2022). However, this excludes individuals involved solely in farming, fishing, or animal production for family consumption.
   - In the 2015 TLPHC, subsistence agriculture employees were considered part of the 'employed persons' category. Due to this change, the updated definition in 2022 resulted in fewer individuals classified as employed.
2. *Unemployment Definition*:
   - In the 2022 TLPHC, persons must meet the following criteria to be considered unemployed:
     1. Not engaged in employment during the reference week.
     2. Actively seeking work or attempting to start a business within the past month.
     3. Available to begin work or start a business within two weeks if an opportunity arises.

These changes refine the measurement of economic activity and align the definitions with more standardized frameworks, such as the National Accounts. However, they also make direct comparisons between the two census periods more complex.

Article 23 of the Universal Declaration of Human Rights states, '*Everyone has the right to work, to free choice of employment, to just and favourable conditions of work and to protection against unemployment'* (United Nations, 1948). This implies that the lower position of women in the labour market violates human rights. Reducing gender gaps in the labour market is both a matter of advancing equity and an opportunity to unlock significant potential for economic growth. By ensuring equal opportunities for all individuals, regardless of gender, societies can harness untapped talent, boost national GDP, and create pathways to lift many people out of poverty. This chapter will describe the position of females in the labour market.

7.1 Labour force participation

Table 7. 1 shows the number of persons in Timor-Leste's three major labour categories: employed, unemployed and outside the labour force. Note that in the past, the population outside the labour force were referred to as 'Inactive Population'. The table shows that males dominate the labour force; there are 185 thousand males in the labour force, against 129 thousand females., i.e. 40 percent more males than females in the labour force. On the other hand, 304 thousand females are outside the labour force, against 257 thousand males.

Table 7. 1. Main labour force status categories age 15 plus (in thousands), by sex

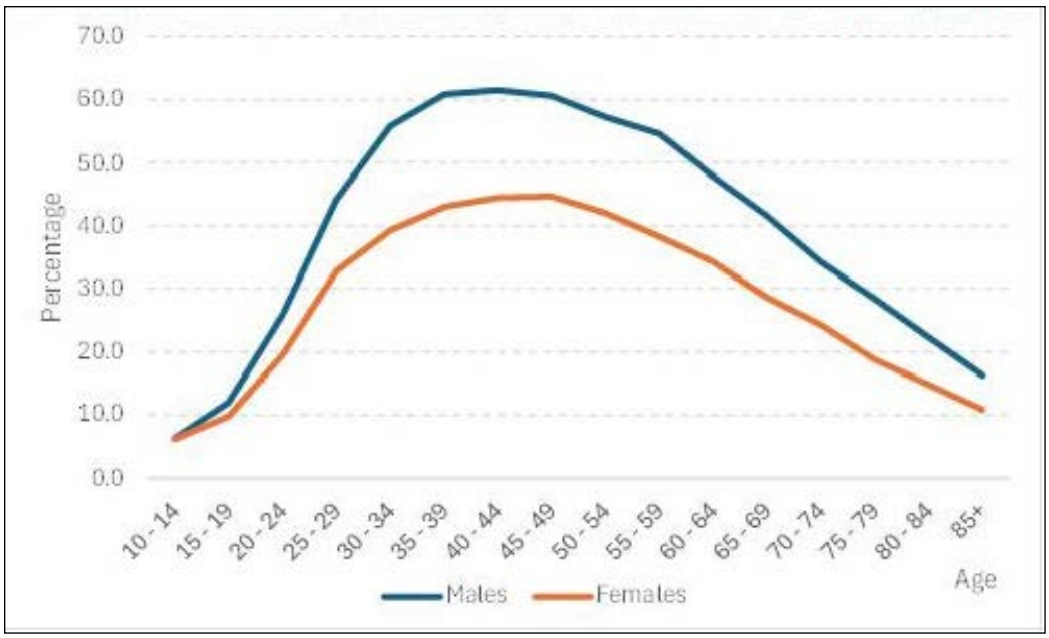
Indicator	Total	Male	Female
Working-age population	873,931	441,517	432,414
Population in the Labour force	313,539	184,901	128,638
Labour Force Participation Rate (%)	35.9	41.9	29.7
Employed population	304,563	179,834	124,729
Employment to Population Rate (%)	34.9	40.7	28.8
Unemployment population	8,976	5,067	3,909
Unemployment Rate (%)	2.9	2.7	3
Outside the Labour Force population	560,392	256,616	303,776
Outside the Labour Force/Inactivity Rate (%)	64.1	58.1	70.3

Source: Timor-Leste Population and Housing Census 2022

The Labour Force Participation Rate (LFPR) is the proportion of the working-age population that is currently employed or unemployed. It is a key indicator in the analysis of the structure of the labour market, human resources available for the production of goods and services, and for understanding the labour market behaviour of different population groups, for instance, in terms of access to the labour market. The working-age population is the population 15 years and older, and persons in the labour force is the sum of employed and unemployed persons (15 years and older).

The LFPR for both sexes was 35.9 percent. The LFPR for males is considerably higher for males (41.9 percent), than for females (29.7 percent). This results in a Gender Gap Index of 70.9, meaning that for every 100 males, there are 70.9 females in the labour force. An attempt was made to compare the situation in Timor-Leste with other countries in the region. This attempt was unsuccessful as all the LFPR provided by the World Bank, including those for Timor-Leste, were far higher. These indicators were probably based on the old definition of who is in the labour force, which makes them incomparable with the estimates of the 2022 TLPHC[4].

Figure 7. 1. Age-specific labour force participation rates, by five-year age group, and by sex



Source: Timor-Leste Population and Housing Census 2022

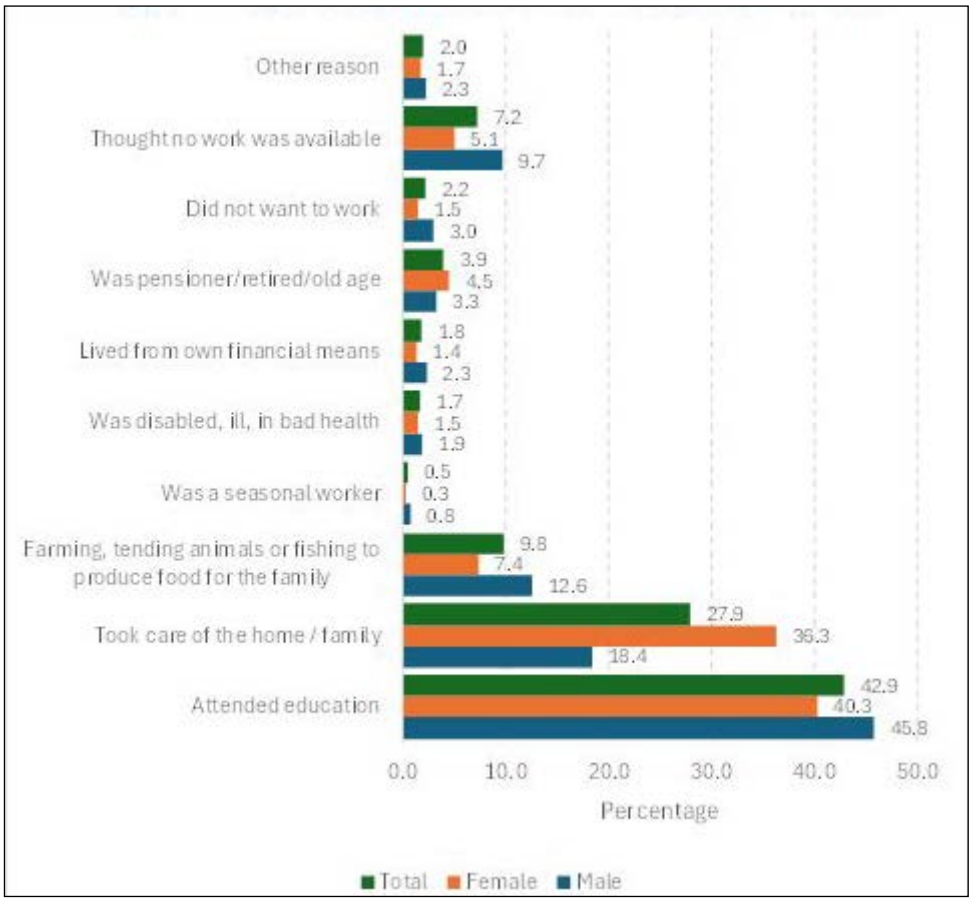
The difference between male and female engagement in the labour force is clearly shown in Figure 7. 1. The graph depicts that for all age groups 15 years and older, the age-specific participation rates are considerably higher for males than for females. The largest difference is in ages 35 -39, with 60.9 percent of males and 43.0 percent of females in the labour force.

Another important measure to look at the differential participation of males and females in the labour market is the employment-to-population ratio. The employment-to-population ratio measures the proportion of the working-age population that is employed. According to the 2022 TLPHC, the employment-to-population ratio stood at 34.3 percent for both sexes, 40.7 percent for males and 28.8 percent for females.

Almost two-thirds (64.1 percent) of the population 10 years and older are outside the labour market; for females, the percentage is considerably higher than for males, 70.3 percent against 58.1 percent, respectively. Figure 7. 2 shows that the reasons why people are jobless are different for both sexes. The main reason for both sexes is 'attended school'. Somewhat more young males than young females indicate this as their main reason. While 36.3 percent of all females indicate that they are not working because they have to take care of the family, for males, this is much lower (18.4 percent). More males than females were involved in subsistence farming, which is work that falls outside the official labour force. It is also important to note that a group is not working because they are convinced there is no work available. Somewhat more males (9.7 percent) than females (5.1 percent) are thinking this way.

[4] The old ICLS definition of labour included all productive activities, including subsistence work, as employment, while the new definition (19th ICLS) excludes subsistence activities and introduces detailed measures of labour underutilization and non-standard work. This shift improves the precision and relevance of labour statistics for modern policy needs.

Figure 7. 2. Main reason for being outside the labour force, by sex



Source: Timor-Leste Population and Housing Census 2022

7.2 Employment status

Status in employment

'*Status in employment refers to the type of explicit or implicit contract of employment with other persons or organizations that the employed person has in his or her job*' (United Nations, 2017). In the 2022 TLPHC, the following categories for status in employment were used: i) Employee, ii) Self-employed with employees, iii) Self-employed without employees, iv) Helper in a family business or farm, working without pay, and v) Paid apprentice, trainee, or intern. The status in employment by sex can show, for instance, differences between both sexes in the percentage of employers, which may shed light on access to resources, capital, and entrepreneurial opportunities. Women often dominate the category of contributing family workers. Contributing family workers are among the most vulnerable employment groups in any labour market, especially in developing countries. Their vulnerability often stems from several factors tied to their employment conditions, such as lack of autonomy and legal protections.

Figure 7. 3 shows that the percentage of self-employed persons with employees is about the same for males and females (23.1 against 22.7 percent). This does not mean that the number of employers with employees is the same for both sexes. As the number of persons in the labour force for males is much higher, the number of employers is also higher, even if the percentages are the same. According

to the 2022 TLPHC, there were about 42.4 thousand male employers with employees and about 29.0 thousand female employers with employees. Significantly more paid employees are male than female (37.7 against 27.3 percent). The percentage of self-employed females without employees is higher than that of self-employed males (37.1 percent against 30.7 percent). However, the number of self-employed persons without employees is much higher for males than for females (57.0 thousand males against 48.0 thousand females). The category 'Helper in a family business or farm, working without pay' is the only category with more females than males (17.9 thousand against 17.1 thousand), which results in 13.0 percent for females and 8.5 percent for males, respectively.

Figure 7. 3. Status in employment of population 15 years of age and older, by sex

Source: Timor-Leste Population and Housing Census 2022

Vulnerable employment

Based on a person's employment status, one can determine whether or not they are engaged in vulnerable employment. According to the ILO, vulnerable employment is defined as the sum of the employment status groups of own-account workers (i.e. self-employed without employees) and contributing family workers (ILO, 2018). Persons in these two categories are considered to be vulnerable because they lack job security, often lack access to benefits such as health insurance, pensions, paid leave, and unemployment insurance, their income is non-existent or irregular and most often low, and are more vulnerable to economic crises.

In relative terms, more females than males are found in vulnerable employment. About half of all females (50.1 percent) are in vulnerable employment, against 39.2 percent of males (Timor-Leste National Institute of Statistics (INETL), 2024). It should be noted that these percentages are considerably lower than in the Socio-Economic Impact Assessment of COVID-19 in Timor-Leste, Round 2 (United Nations in Timor-Leste, 2021). In the SEIA-2, the rate of vulnerable employment was very high (86.3 percent). The percentage was somewhat higher for females (90.0 percent) than for males (83.2 percent). However, these figures should be treated somewhat cautiously, as is stated in the report:' *there are indications that during data collection persons were erroneously recorded as 'contributing family workers*' (United Nations in Timor-Leste, 2021).

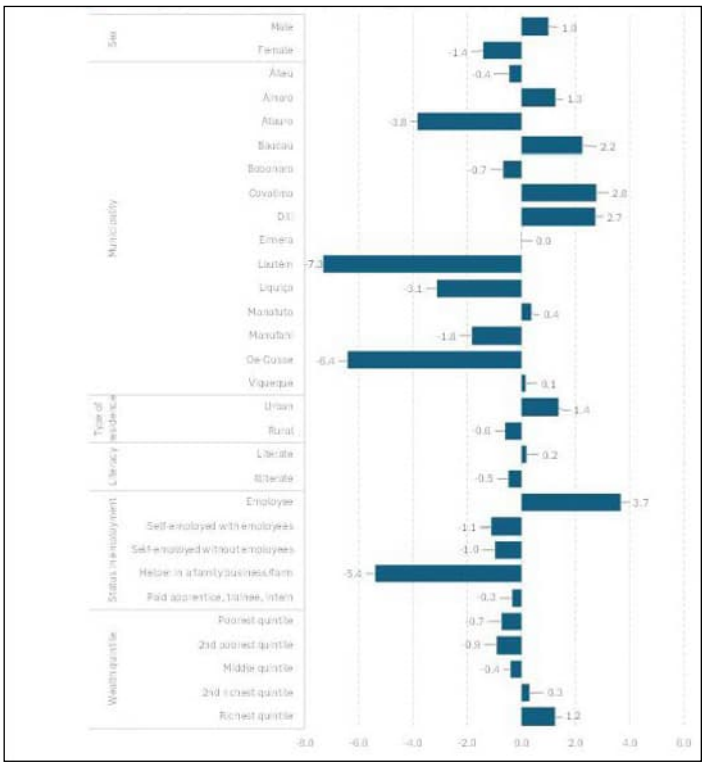
Number of hours worked in employment

The number and type of working hours often differ significantly between males and females. While men, on average, may work longer hours in formal employment, women often have to balance jobs with unpaid domestic chores. Looking at the number of hours males and females work can show how labour is divided between men and women. The 2022 TLPHC, unfortunately, only collected information on the hours usually worked per week in the person's main job. The census is not a household survey in which detailed information about the time spent on various activities can be collected. As such, it is limited in getting an idea of the tasks of males and females in- and outside of the official paid working hours.

A Multiple Classification Analysis (MCA) was performed to examine the differences between the two sexes, in which the dependent variable was the number of hours worked. In addition to the sex of the person, a series of other explanatory variables were included in the analysis: municipality, type of residence (urban/rural), literacy, status in employment, wealth quintiles, and age in single years. Although the model gives a relatively poor fit with a coefficient of determination (R2) of only 0.09, the model can still highlight some of the differences in working hours.

The average number of working hours for an employed person was 32.1 hours per week, according to the 2022 TLPHC. Figure 7. 4 shows the results of the MCA analysis. For each category, the deviation from the overall mean is depicted after controlling for the impact of all other explanatory variables in the equation. The graph shows that males work about 2.4 hours more on their main job than females. After controlling for intervening factors, males, on average, work 33.1 hours a week against 30.7 hours for females. It is clear that other variables have a more profound effect on working hours than sex. For instance, workers in Lautém and Oe-Cusse, on average, work 7.3 and 6.4 hours less than the overall national average of working hours. Employees work 3.7 hours longer, and helpers in family businesses and farms 5.4 hours less. Note that there are considerable seasonal variations in the number of hours worked per week, especially for farmers.

Figure 7. 4. Hours usually worked on main job, deviations from overall mean



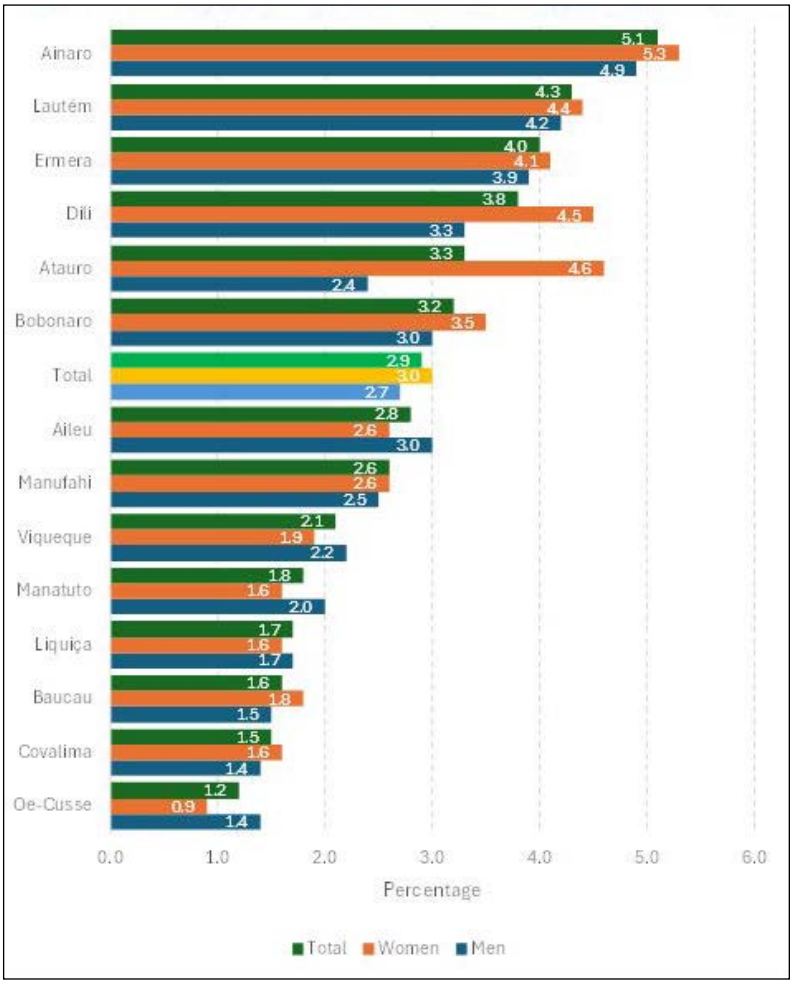
Source: Timor-Leste Population and Housing Census 2022

7.3 Unemployment

Unemployment rate

In the 2022 TLPHC, the unemployment definition from the UN Principles and Recommendations for Population and Housing Censuses was followed: '*Unemployed persons are all those above the specified age who (a) were not in employment, (b) carried out activities to seek employment during a specified recent period and (c) were currently available to take up employment given a job opportunity*' (United Nations, 2017). At the time of the census, the unemployment rate was 2.9 percent. Little difference was noticed between males (2.7 percent) and females (3.0 percent) (Timor-Leste National Institute of Statistics (INETL), 2024). In a low-income country like Timor-Leste, such low unemployment may appear unexpected because of the limited supply of paid jobs. The ILO Ninth Edition of Key Indicators of the Labour Market (ILO, 2016) provides a possible explanation of this paradox. It argues that in countries without a safety net for unemployment (unemployment benefits, welfare), poor people cannot afford to be unemployed and cannot look for a job for an extended time. As they live financially from day to day, they must take any opportunity to work and earn some money. Often, they get involved in informal work or do odd jobs, even for the smallest amount of time and money. As such, in many low-income countries, the main problem in the labour market is not unemployment but rather the shortage of decent and productive job opportunities. This means that labour underutilization is more of a problem than unemployment.

Figure 7. 5. Unemployment rate for persons 15 years of age and older, by sex



Source: Timor-Leste Population and Housing Census 2022

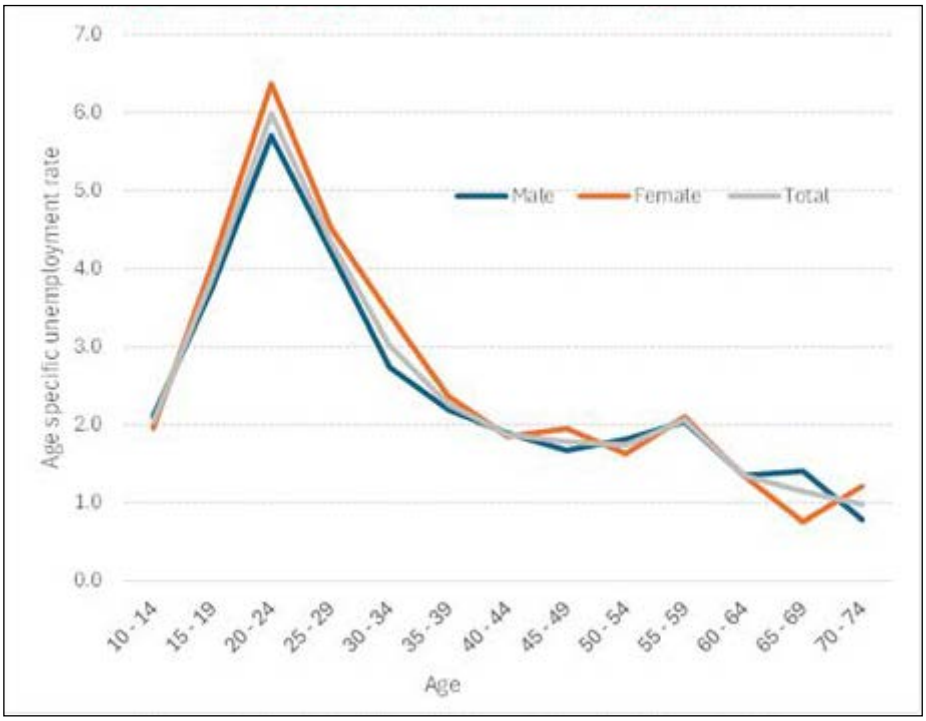
Figure 7. 5 shows that Ainaro has the highest unemployment in the country (5.1 percent). The lowest is in Oe-Cusse, with only 1.2 percent. Although male and female unemployment there is quite close at the national level, somewhat larger differences exist in two municipalities, Dili and Atauro. In Dili, 4.5 percent of females are unemployed, against 3.3 percent of males. In Atauro, this is 4.6 and 2.4 percent, respectively. In some municipalities, recorded unemployment for males was slightly higher than for females: Oe-Cusse, Liqueque,Manatuto, Viqueque, and Aileu.

The 2022 TLPHC thematic report on labour calculated an indicator of labour underutilization (LU3). This indicator incorporates those who are unemployed and the potential labour force. The potential labour force consists of persons looking for work but not immediately available and those who are not looking but available for work. According to the 2022 TLPHC, the LU3 indicator stood at 6.8 percent and was somewhat higher for females (7.5 percent) than for males (6.4 percent).

Youth unemployment

The youth unemployment rate is calculated as the percentage of unemployed 15 – 24 year-olds in the labour force. According to the 2022 TLPHC, the youth unemployment rate stood at 5.2 percent. The youth unemployment rate for both sexes is similar: 5.0 percent for males and 5.5 percent for females. The regional youth unemployment rates are highest in Dili (10.0 percent). The second highest rate is found in Ainaro (7.9 percent). Oe-Cusse scores very low and has only 1.8 percent of its youth out of work (Timor-Leste National Institute of Statistics (INETL), 2024).
Figure 7. 6 shows that unemployment among young persons is considerably higher than among older age groups. Unemployment in the age group 20 to 24 is 5.7 percent for young men and 6.4 percent for young women. The level of unemployment is still higher in the age group 25 to 29 (4.4 percent), but then drops fairly quickly to very low levels.

Figure 7. 6. Age-specific unemployment rates by age and sex



Source: Timor-Leste Population and Housing Census 2022

NEET

Those 'Not in Education, Employment or Training' (NEET) presents 'the share of young people who are not in employment, education or training (NEET), as a percentage of the total number of young people in the corresponding age group, by gender' (OECD, n.d.). The NEET for persons 15 – 24 years was 29.3 percent, 29.1 percent for males and 29.6 percent for females. This means no clear difference exists between both sexes for the NEET indicator between males and females. Compared to the 2015 TLPHC, the current NEET is somewhat higher. At that time, the NEET rate was 20.3 percent, 16.8 per cent for males and 23.7 percent for females. However, as indicated before, the definition of employment in both censuses is somewhat different, which makes direct comparisons problematic (Timor-Leste National Institute of Statistics (INETL), 2024). In the thematic report on children and youth, a logit regression was done to look at the impact of a set of explanatory factors on the NEET indicator. After controlling for all other intervening factors, little difference was observed between the odds ratios for young males and females. The odds ratio for women was 1.05 compared to men.

7.4 Occupation & industry

The analysis of occupation by males and females is hindered by the fact that a large number of persons who indicated their occupation did not get an International Standard Classification of Occupations (ISCO) code. For 48.9 percent of all persons with an occupation, no ISCO was given. As these large numbers of persons with unclear ISCO codes could be part of any of the ten main occupational groups, there is too much uncertainty to indicate in which categories more males or females are present. The same holds true for industrial activity in the place where the persons work. International Standard Industrial Classification of All Economic Activities (ISIC) were not given for 17.8 percent of all adults 25 to 54 and for 11.8 percent of all persons 55 and over (INETL, 2024). For this reason, no valid comparison of male and female industrial categories can be made.

7.5 Children working

In the 2022 TLPHC, questions about employment were asked of all persons 10 years of age and older. This allows for analyzing the characteristics of child work in Timor-Leste. Note that the census data do not allow the analysis of child labour, as no specific questions were asked that could determine whether child work was, in fact, child labour. Child labour is defined as *work that is mentally, physically, socially or morally dangerous and harmful to children; and/or interferes with their schooling by: depriving them of the opportunity to attend school; obliging them to leave school prematurely; or requiring them to attempt to combine school attendance with excessively long and heavy work* (ILO, 2024). Child work and child labour are different because of their impact on the child's development and human rights. While child labour has a harmful effect on a child's physical, mental, and social well-being, child work refers to activities that are appropriate and not harmful for their age and may even be beneficial for their skill set and social development.

Boys and girls both suffer from child labour in different ways. It is, therefore, crucial that any future analysis of child labour takes gender into account. Generally, boys can be found more in strenuous physical work, such as collecting trash or working at construction sites or market activities, while girls are more involved in domestic work, the garment industry and agriculture. Girls are more vulnerable to sexual exploitation, harassment and physical abuse, while boys may suffer from the consequences of the strenuous physical work they perform (Ahmady, 2024).

According to the thematic report on children and youth (Timor-Leste National Institute of Statistics (INETL), 2024), out of a total of 242,288 children between 10 and 17 years old, 24,122 were working, which is 10.0 percent. Among all working children, 13,101 were boys (10.6 percent of the total), and 11,021 (9.3 percent) were girls. In the census, no material is available to examine the consequences of child labour on the lives of boys and girls. No large differences were observed in the sort of employment between boys and girls. The biggest differences were in the agriculture, forestry, and fishing sector, where 47.9 percent of boys and 43.3 percent of girls are active. On average, boys work a little longer than girls, 21.5 hours per week, against 20.4 hours (Timor-Leste National Institute of Statistics (INETL), 2024).

8. Disability

Persons with disabilities form a vulnerable group within which women with disability are even more vulnerable. Women with disabilities face unique challenges as they often belong to multiple marginalized groups. While individuals with disabilities overall are three times more likely to experience physical, emotional, and sexual violence compared to those without disabilities, women with disabilities face an even higher risk. Their likelihood of experiencing sexual violence is ten times greater than that of individuals without disabilities, underscoring the urgent need for targeted interventions to protect and empower this group (UNFPA, 2018). Throughout the life cycle, women with disabilities encounter discrimination and exclusion. On a global scale, girls with disabilities have a higher chance of being deprived of care, food and social interactions within and outside the household. Compared to boys with a disability, they receive less health care and access to devices to alleviate their disability. Moreover, girls with a disability are less likely to follow an education or find decent work (UNFPA, 2018).

Older women with disabilities face unique challenges that stem from the intersection of being old, being a woman and having a disability. Many older women have acquired a disability at a later point in life through disease or health conditions related to ageing. Typical health risks at older ages include arthritis, osteoporosis, dementia, or diabetes. Older women with a disability may become more isolated, making it more challenging to get assistance or health care. They may also suffer more from poverty, lack of financial support and social isolation. As such, they have a higher risk of physical and emotional abuse (UN Women, n.d.).

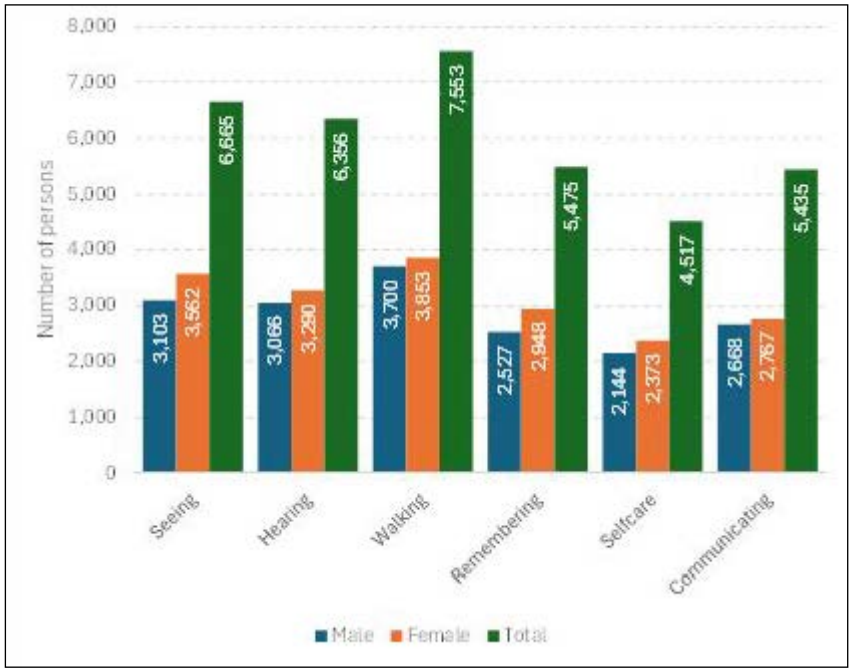
A thematic report on disability was produced for the 2022 TLPHC. The current chapter is largely based on the results of this report.

8.1. Prevalence and type of disability

Like most countries in the region, the 2022 TLPHC used the six questions from the Short Set on Functioning of the Washington Group (WG). The six questions dealt with seeing, hearing, walking, remembering, self-care and communicating. The WG defines persons with disabilities as *'those who have 'long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others'*, which is basically the definition from the UN Convention on the Rights of Persons with Disabilities (CRPD). In the 2022 TLPHC, a person was considered to have a disability if he/she answered that he/she could not function at all or had a lot of difficulty in one or more of the domains presented. Questions were only asked to persons five years of age and over, as a set of other, more specific questions would apply to small children.

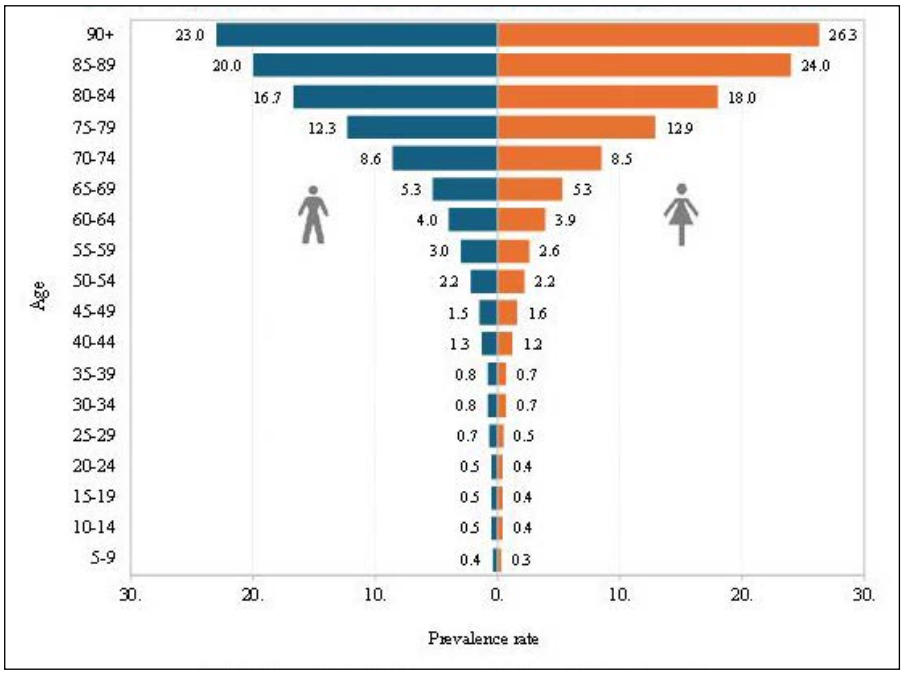
Population and housing censuses are notorious for underestimating the prevalence of disability in a population and, therefore, a rather poor source for estimating the prevalence of persons with disabilities. However, it is a rich source for looking into the living conditions of persons with a disability in a population. In the current chapter, the main interest is to examine the differences in the position of males and females with disabilities. To do so, we assume that the intensity and characteristics of disability for both sexes are the same for those who were identified as having a disability in the census as for those who were not.

Figure 8. 1. Number of persons 5 years of age and older, who have a specific type of disability, by sex



Source: Timor-Leste Population and Housing Census 2022

Figure 8. 2. Age-specific disability rates by sex for persons 5 years of age and older



Source: Timor-Leste Population and Housing Census 2022

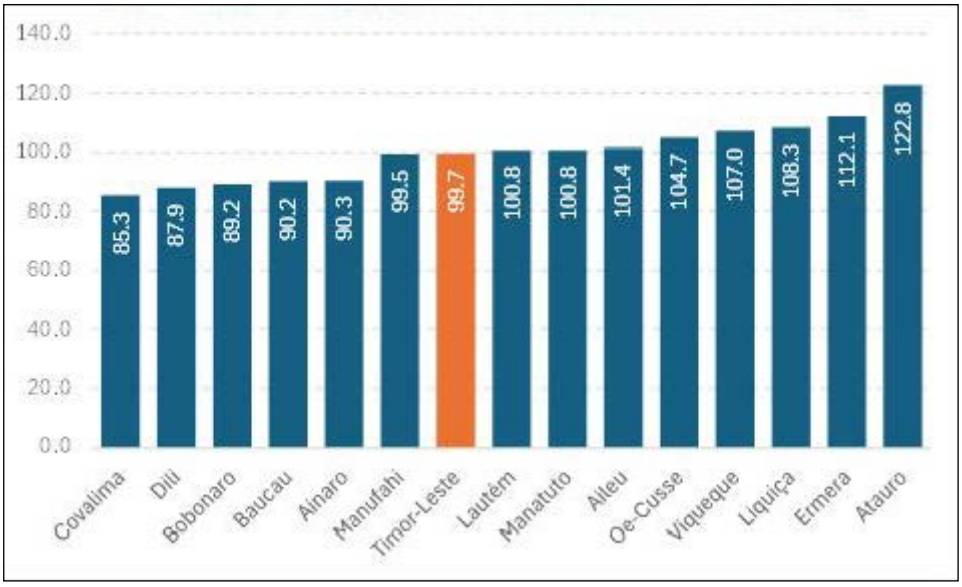
In the 2022 TLPHC, 17,061 persons were enumerated as having a disability. This resulted in a disability prevalence rate of 1.4 percent, 1.4 percent for males and 1.5 percent for females (Timor-Leste National Institute of Statistics (INETL), 2024). Among all persons with disabilities, 54.4 percent had one disability, 19.6 percent had two disabilities, and 26.0 percent had three or more disabilities. Females were somewhat more inclined to have two or more disabilities: 48.6 percent had two or more disabilities compared to 42.7 percent among males.

According to the 2022 TLPHC, the most common disability for both males and females is related to walking (7,553), followed by visual disability (6,665) and hearing (6,356). The number of persons who reported a functional limitation in the TLPHC was about the same for males and females, 8,517 against 8,544, respectively. Figure 8.1 shows that for each type of disability, the number of females is higher than that of males. For instance, 3,562 females indicated they have a visual disability, against 3,103 males (Timor-Leste National Institute of Statistics (INETL), 2024). This means that the number of females with multiple disabilities is higher among females than males. The reported prevalence of disability was twice as high in rural than in urban areas. For both males and females, the prevalence was 0.8 in urban areas and 1.7 in rural areas.

The prevalence of disability is highly age-dependent, with an exponential rise in the prevalence rate at older ages (see Figure 8.2). The age-specific disability prevalence rates are about the same for both sexes until age 80. For the very old age groups (80+), the prevalences are somewhat higher for females than males.

Figure 8.3 shows the sex ratios of persons with disabilities by municipality. The overall sex ratio for persons with disabilities is 99.7 males per 100 females. The graph clearly shows large variations in the sex ratios between different municipalities. Covalima (85.3), Dili (87.9) and Bobonaro (89.2) all have sex ratios below 90 males per 100 females. The highest sex ratio is in Atauro, with 122.8 males per 100 females with a disability. It is unclear what causes this pattern. Perhaps it is a combination of the percentage of older people in the population and perhaps misreporting of disability status.

Figure 8.3. Sex ratios of persons with disabilities by municipality

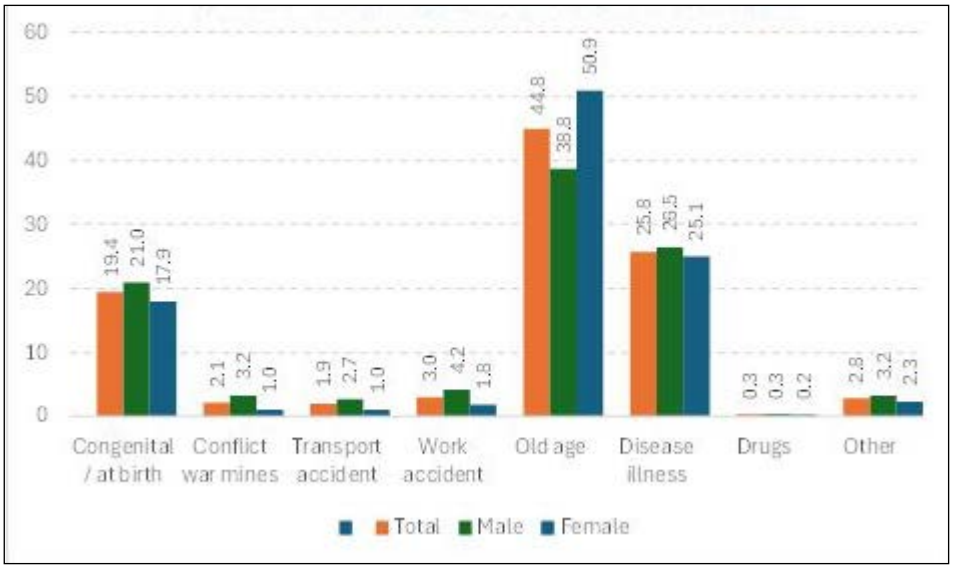


Source: Timor-Leste Population and Housing Census 2022

8.2. Causes of disability

The cause of disability is somewhat different between both sexes (Figure 8. 4). The percentage of all males with a disability whose functional limitation was caused by congenital factors or at birth was 21.0 percent, against 17.9 percent for females. The higher percentage of congenital defects or birth-related disabilities among males in Timor-Leste is consistent with the literature. For instance, in a study on the prevalence of birth defects among newborns in Ethiopia, it was found that among all births with a birth defect, 51.4 percent were males, and 48.2 percent were females (Soressa Abebe Geneti1, 2021). Similarly, a study on birth defects in Hunan Province, China, found higher birth defect rates among males (22.3 per thousand) than among females (16.3 per thousand).

Figure 8. 4. Percentage of cause of disability, by sex



Source: Timor-Leste Population and Housing Census 2022

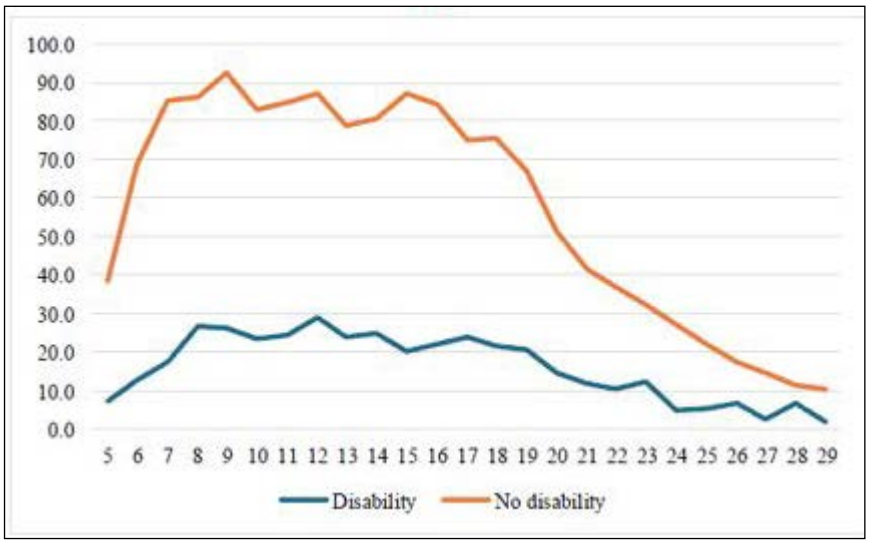
The percentage of all causes from conflict/war/mines, transport accidents and work accidents is somewhat higher for males than for females, but none is above five percent. The most significant difference in the cause of disability is for old age. Among females, more than half (50.9 percent) are caused by old age. This is considerably higher than for males (38.8 percent) (Timor-Leste National Institute of Statistics (INETL), 2024).

8.3. Position of females with a disability

Education

While literacy among the population ten years of age and older without a disability is 73.2 percent, it is only 30.7 percent for males with a disability and 17.7 percent for females with a disability. However, these indicators are influenced by the fact that a large share of the population with a disability are older persons, who have a much higher illiteracy rate than younger persons anyway. Therefore, it is better to look at the situation of younger persons. As can be expected, young persons (15 – 24 years) with disabilities have a higher degree of literacy (40.0 percent) than those ten years of age and older. It is important to note that young females with a disability have a lower literacy rate than young males, 37.7 against 41.9 percent (Timor-Leste National Institute of Statistics (INETL), 2024). However, over the years, the situation has improved. When the Gender Parity Index (GPI) among all persons 10 years of age and over with disabilities is only 57.7 percent, it is 90.0 percent for those in the age group 15 -24.

Figure 8. 5. Percentage of persons, with and without disabilities currently attending school by single

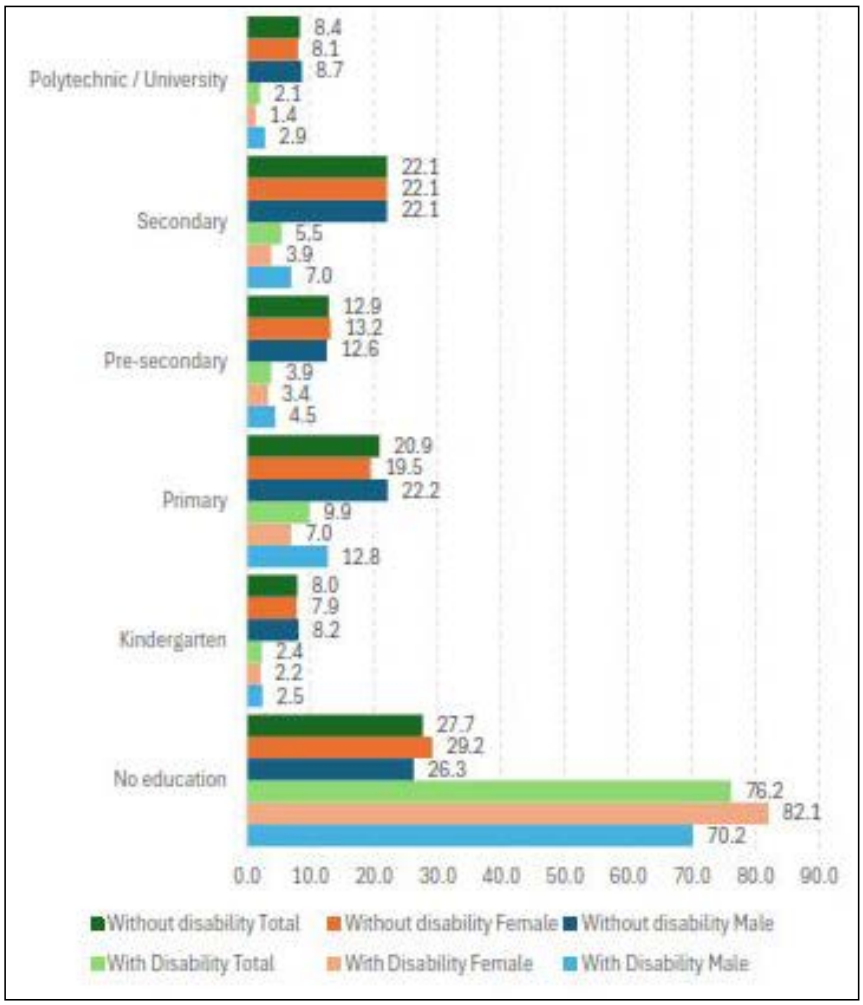


Source: Timor-Leste Population and Housing Census 2022

Figure 8. 5 shows that young persons with disabilities are far behind in terms of school attendance. At age 9, more than 90 percent of children without a disability are attending school, against only 28.9 percent of children with disabilities. Although the school attendance rate for young persons (5 – 29 years) with disabilities is very low for both sexes (16.1 percent), it is slightly higher for young females (17.1 percent), than for young males (15.3 percent) (Timor-Leste National Institute of Statistics (INETL), 2024). The figures, however, show that a major effort is needed to get male and female children with disabilities into school.

Figure 8.6 shows the attended education level for males and females, both for persons with and without a disability. The graph clearly shows the lower educational attendance of persons with disabilities for both males and females. No less than 82.1 percent of females with a disability aged five and older never attended school. For males, this is 70.2 percent. For each of the presented levels, attendance is much lower for persons with disabilities. For instance, if 22.1 percent of females without a disability have secondary education as their highest attended level of education, for females with a disability, this is only 3.9 percent. For males, the difference is less dramatic. However, one has to take into account that in the group of persons with disabilities, there are persons who attended secondary education in the past at a moment when they did not yet have a disability. Many older persons with a disability may not have had any functional limitations earlier in life. An important observation from the graph is also that for all levels of highest attended education, the percentages for males are significantly higher than for females (Timor-Leste National Institute of Statistics (INETL), 2024).

Figure 8. 6. Percentage distribution of population age 5 and older by highest level of attended education by disability status and sex



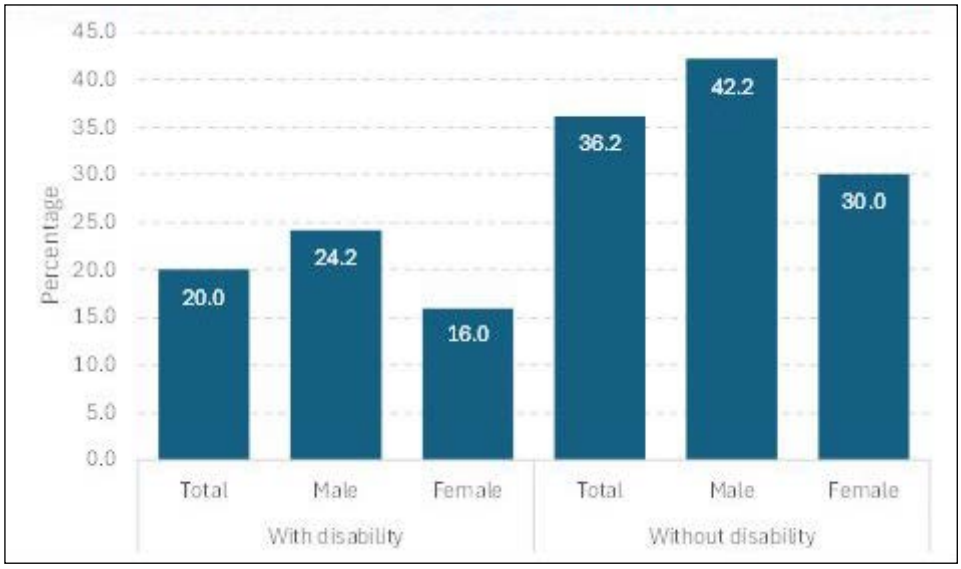
Source: Timor-Leste Population and Housing Census 2022

Employment

The right to work is a principal human right for persons with disabilities, explicitly outlined in Article 27 of the Convention on the Rights of Persons with Disabilities (CRPD) (United Nations, n.d.). This article guarantees their right to work on equal terms with others, encompassing the freedom to choose or accept employment within an open, inclusive, and accessible labour market. It further prohibits workplace discrimination, underscores the need for accessible vocational training, promotes self-employment opportunities, and requires reasonable accommodations in the workplace. With the proper support and environment, persons with disabilities can thrive in diverse work roles, making meaningful contributions to the workforce (WHO, 2011). Employment is not just a source of economic independence but also plays a vital role in fostering self-worth and enabling active societal participation. Many workplaces lack specific policies to support disability inclusion, leaving individuals with disabilities marginalised in the labour market. This gap exacerbates exclusion among persons with disabilities, significantly contributing to poverty. Bridging these gaps is critical to ensuring persons with disabilities' full and equitable participation in the workforce.

The labour force participation for persons with disabilities is much smaller than the rate for persons without a disability (Figure 8.7.). While the labour force participation rate for persons with a disability is 36.2 percent, it is only 20.0 percent for persons with a disability (Timor-Leste National Institute of Statistics (INETL), 2024). With only 16.0 percent, females with a disability score very low. Compared to males, females with a disability score worse than females in the group without disabilities. The GPI for the group of persons with a disability is 66.1 females per hundred males, and for the group without disabilities, the GPI is 71.1 females per 100 males.

Figure 8.7. Labour force participation for persons with and without disability by sex



Source: Timor-Leste Population and Housing Census 2022

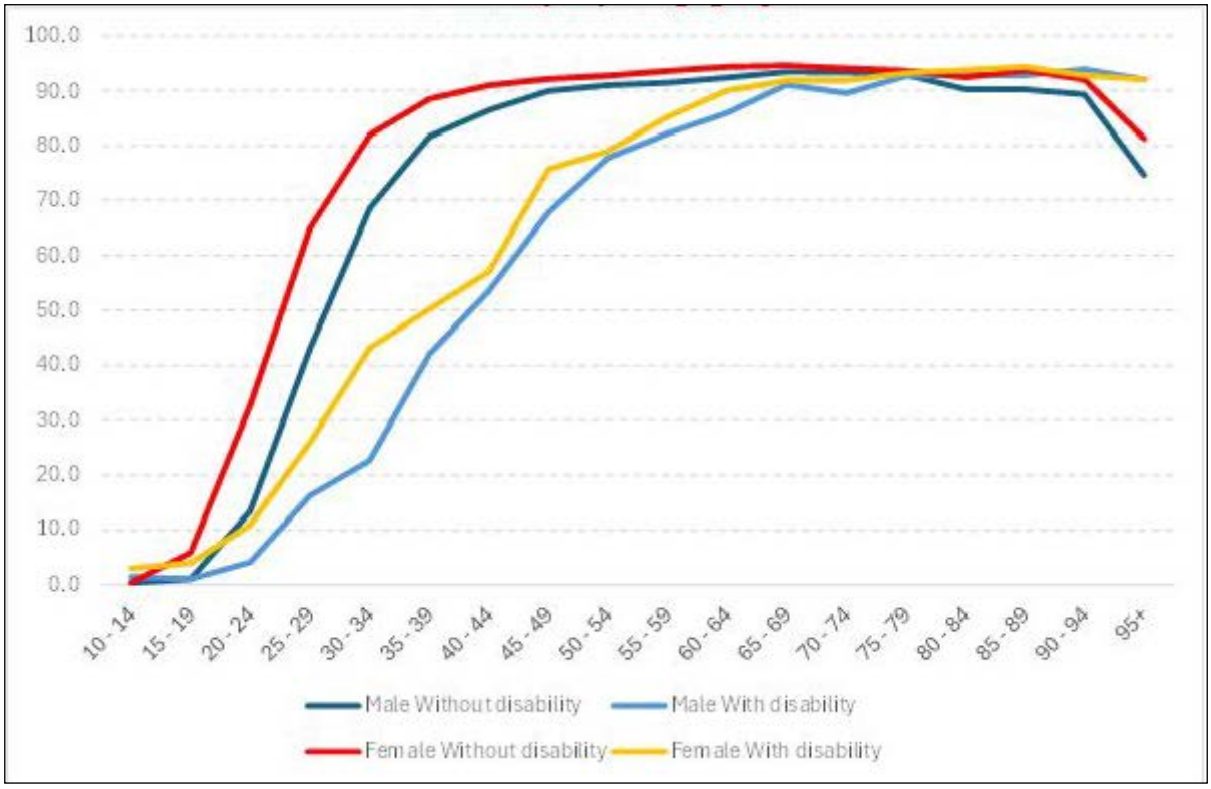
The thematic report on disability found that the unemployment rate for persons with a disability was less than half of that of persons without a disability: 0.3 against 1.0 percent (Timor-Leste National Institute of Statistics (INETL), 2024).

Marital status

Article 23 in the Convention on the Rights of Persons with Disabilities asserts that: '*States Parties shall take effective and appropriate measures to eliminate discrimination against persons with disabilities in all matters relating to marriage, family, parenthood and relationships, on an equal basis with others, so as to ensure that: the right of all persons with disabilities who are of marriageable age to marry and to found a family on the basis of free and full consent of the intending spouses is recognized*' (United Nations, n.d.). Because of their functional limitations, people with disabilities may face more difficulties in getting married. In some cases, having a disability may put extra stress on the relationship and perhaps lead to higher degrees of marital disruption.

Figure 8.8 shows the percentage of all persons 14 years of age and older who are ever married by five-year age groups, sex and disability status. Ever married is defined as those who are currently married, widowed, divorced or separated. For both males and females, the percentage of being ever married is considerably lower for those with a disability until around 65 years of age. After age 65, the percentages ever married for both sexes and disability status are similar. This pattern can be explained by the fact that persons who already have a disability at a young age will find it more difficult to get married. However, those at older ages may have acquired the disability at an older age when they were already married for a long time. Note that for both disability statuses up to age 65, the percentage of persons ever married is higher for females than for males. To a certain degree, this is caused by the fact that females usually marry at a younger age than males.

Figure 8.8. Percentage of persons 14 years of age and older who are ever-married by sex, disability status and five-year age groups

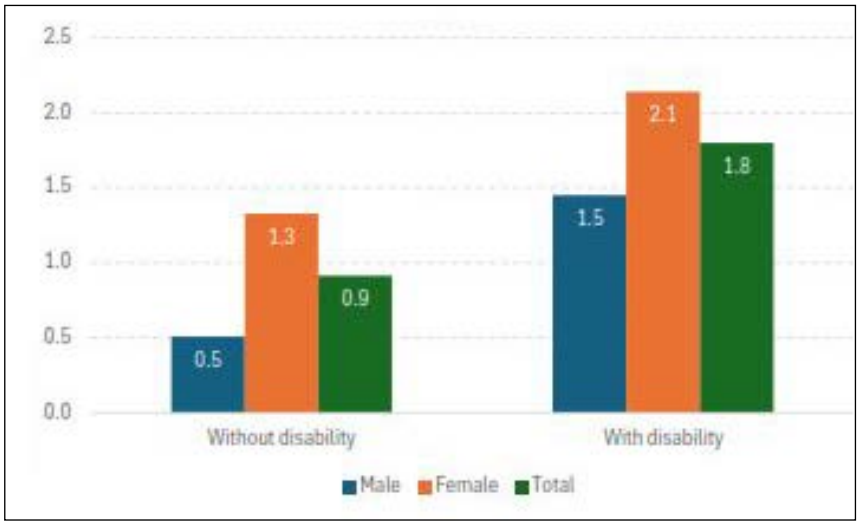


Source: Timor-Leste Population and Housing Census 2022

As indicated before, the percentage of marriages that end in divorce or separation is ver low in Timor-Leste. Figure 8.9 shows that the percentage of people who are separated or divorced is about twice as high for persons with a disability (1.8 percent), as for people without a disability (0.9 percent).

The percentage of persons who are widowed is much higher among persons with disabilities. The percentage is also much higher for females than for males. For males 14 years of age and older, among those with disabilities, 2.2 percent are widowed, against 30.5 percent for those who have a disability. For females, these percentages are 7.1 and 37.5 percent, respectively. This difference has everything to do with the higher ages within the group of persons with disabilities. The mean age, among persons 14 years of age and older is 34.7 years for persons without disabilities and 59.0 years for those with one or more disabilities.

Figure 8.9. Percentage of persons 14 years of age who are either divorced or separated, by sex and disability status



Source: Timor-Leste Population and Housing Census 2022

"photo Credit: ©" INETL, I.P)

9. Social status of females

In this chapter, a number of social characteristics of women and men will be looked at to gain better insight into the differences in living conditions between both sexes.

9.1. Household types

Based on the relationship of each member of the household to the head of the household, it is possible to determine the type of household in which the persons live. In the 2022 TLPHC, the household definition was based on the arrangements made by persons, individually or in groups, to provide themselves with food and other essentials for daily living. A household consists of one or more persons who live together and usually share their dwelling and share their principal meals (General Directorate of Statistics (GDS), 2022).

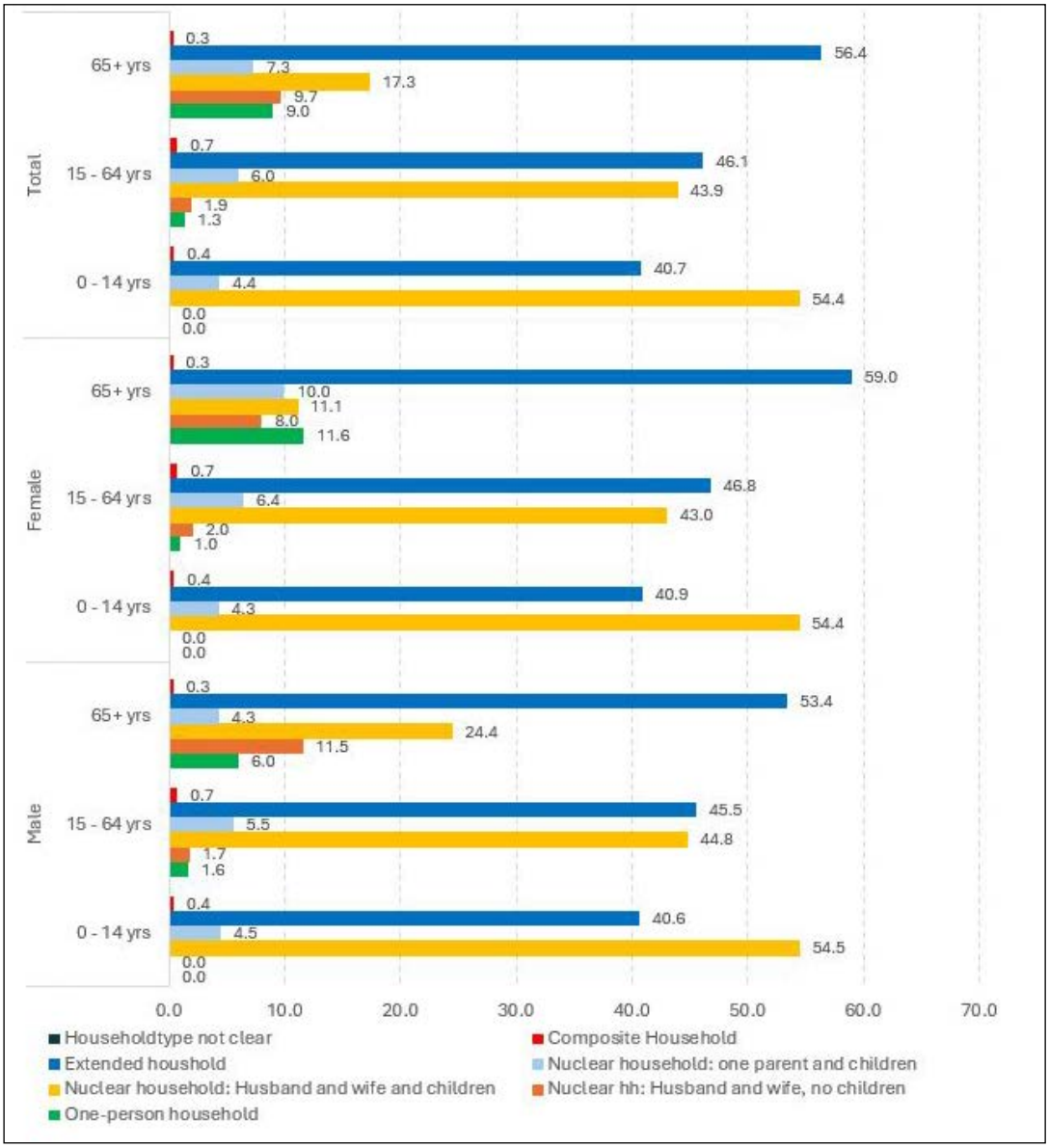
As the type of household people live in may differ according to whether they are young, middle-aged or of older age, three groups were used for males and females: 0 – 14 years, 15 – 64 years and 65 years of age and older. Figure 9. 1 shows the percentage of persons by type of household, sex and the three broad age groups.

One can see a clear age pattern for both males and females. In the youngest age group, the majority of children live in a nuclear household with parents (54.4 percent), while a significant group live in an extended household (40.7 percent). In the age group 15 – 64, the percentage of persons living in nuclear and extended households is about the same. At older ages, the majority of people live in extended households (56.4 percent). This shows that the traditional way in which parents live with their children who care for them is still largely intact.

There are some important differences between males and females with regard to the type of households in which they live. For instance, while very few people live in one-person households in the age groups 0 – 14 and 15 – 64 years, 2,099 males and 4,653 females 65 years and older live alone in a one-person household. For females, this is 11.6 percent of all older women, whilst, for males, this is 6.0 percent. In many cases, these may be vulnerable people who may need assistance. About 70.5 and 70.7 percent of these older males and females belong to the two lowest quintiles of the wealth index, and 45.7 and 42.0 belong to the poorest quintiles. Of these older persons who live on their own, 15.5 percent of males and 14.8 percent of females have a disability.

Another observation is that a larger percentage of older females (59.0 percent) than males (53.4 percent) live in an extended household. On the other hand, more older males (11.5 percent) than females (8.0 percent) live together with their spouses and no one else. This may be explained by the higher degree of widowhood among women, as women have a higher life expectancy than men.

Figure 9. 1. Percentage of persons by type of household, sex and broad age groups



Source: Timor-Leste Population and Housing Census 2022

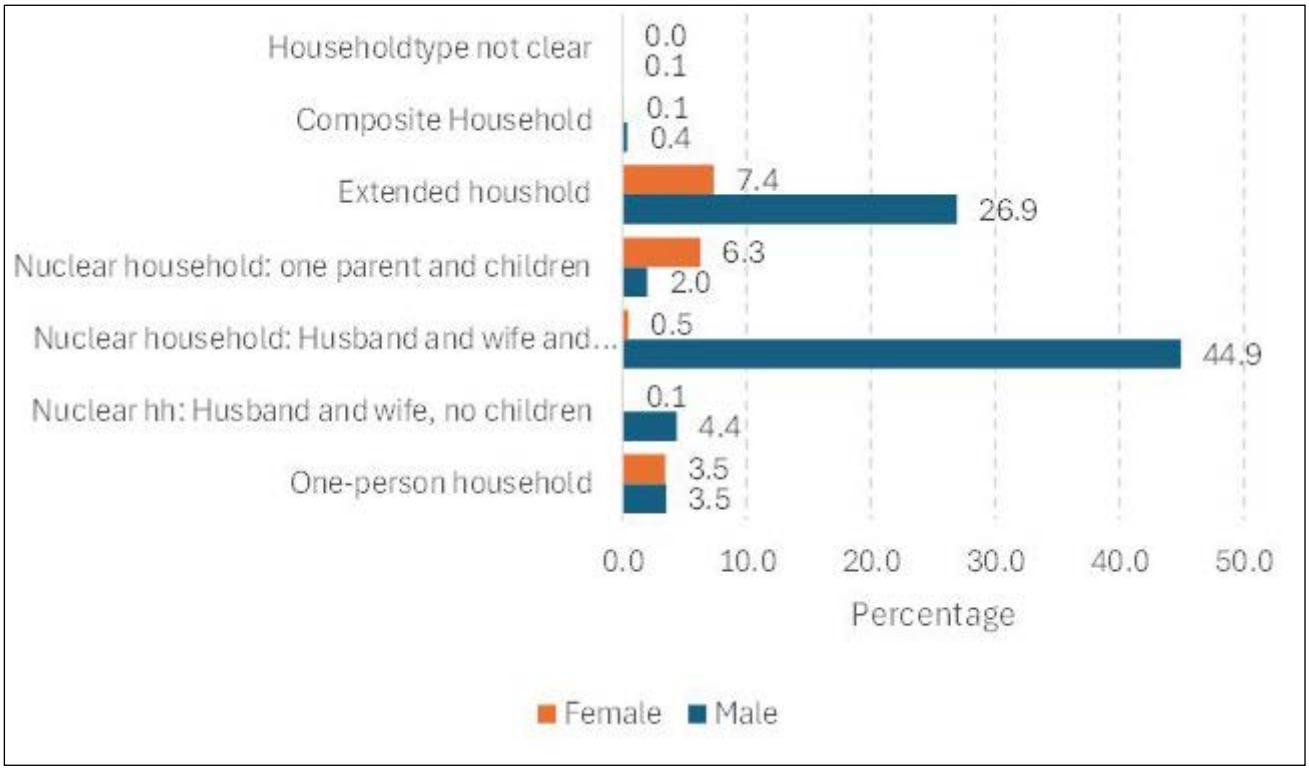
9.2. Household headship

In the census, the head of the household was the person who generally made key decisions and was recognised by all household members as the head of the household. In the past, many gender studies used the sex of the head of the household to look at the economic conditions of the household. The UN gender manual for censuses indicates that the use of the sex of the head of household is not a good way to study gender differences in the population for various reasons (UNFPA, 2014):

- The concept of "head of household" oversimplifies the complex relationships and dynamics within households,
- Household headship is often tied to economic factors, such as income or property ownership, rather than reflecting true gender equality within the home,
- This approach tends to overlook non-traditional or non-nuclear household structures, which are increasingly common,
- By focusing solely on the head of household, the method risks obscuring the often subordinate roles women play in households and broader gender inequalities.

Among the 250,270 private households, 44,535 were headed by females, i.e. 17.8 percent of all households. The highest number of female heads can be found in extended households (18,433), followed by nuclear households with one parent and children (15,791) and one-person households (8,652). Figure 9. 2 shows the percentage of all households headed by males and females by type of household. This graph gives an interesting view of which types of households females head. Most female heads can be found in extended households; 7.4 percent of all households in Timor-Leste are female-headed extended households. By comparison, 26.9 percent are male-headed extended households. Note that very few nuclear households with husband and wife and children are headed by females. While male-headed nuclear households with parents and children constitute 44.9 percent of all households, this is only the case for 0.5 households with female heads. More than three times more one-parent nuclear households in nuclear households headed by females (6.3 percent) were counted in the census, than male-headed one-parent households (2.0 percent). About the same male and female one-person households were counted, 8,819 and 8,652, respectively.

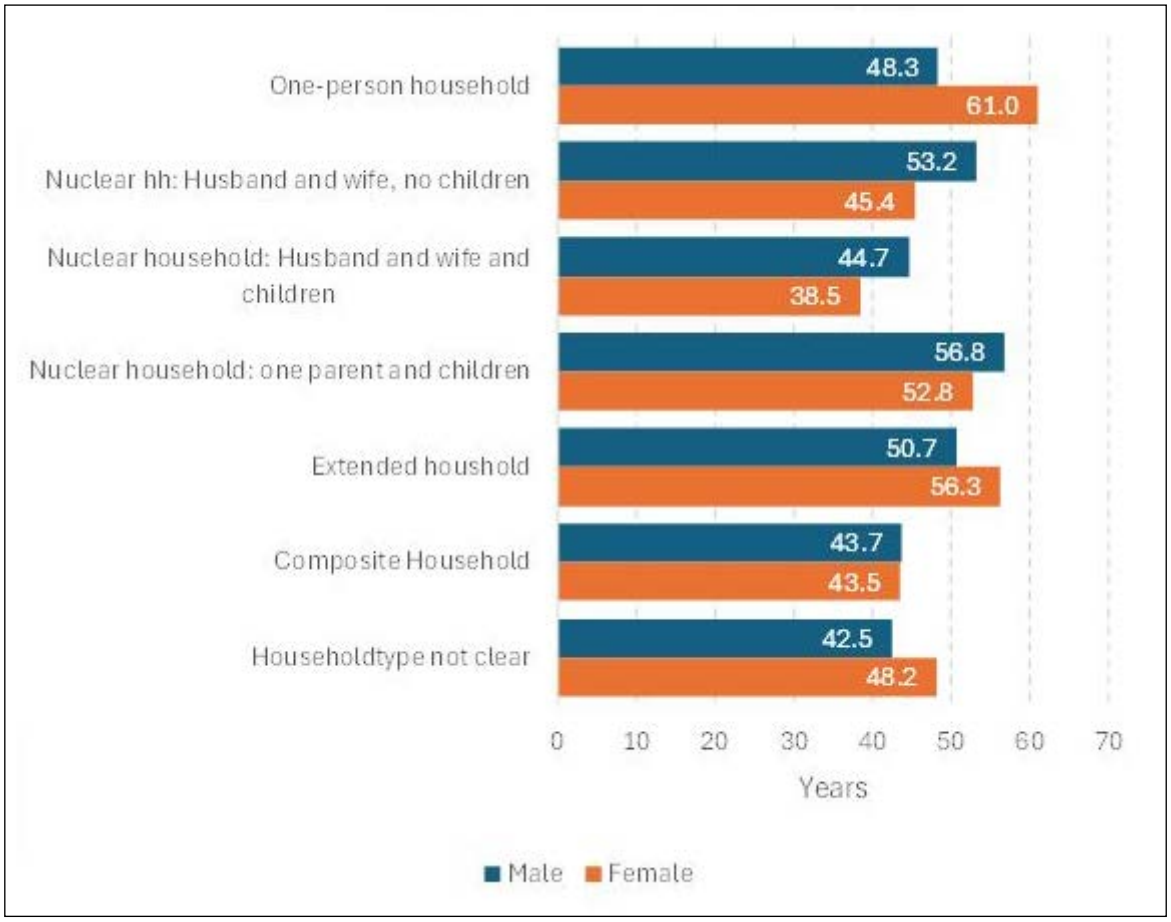
Figure 9. 2. Percentage of all households headed by males and females, by household type



Source: Timor-Leste Population and Housing Census 2022

The age pattern of male-headed and female-headed households is quite different depending of the type of household. In some cases, the mean age of the head is higher among male heads and sometimes higher among female heads (Figure 9. 3). Among heads in extended households, female heads are more than five years older than male heads (56.3 against 50.7 years). If the female heads a nuclear household consisting of a mother, father, and children, then on average, the male head is 6.2 years older than the female head. Fathers in one-parent households are almost eight years older than mothers in such households. The largest age difference between male and female heads is in one-person households. If a woman lives alone, she is, on average, 12.7 years older than a man who lives alone. The average ages are 61.0 years and 48.3 years, respectively.

Figure 9. 3. Mean age of male and female heads by type of households

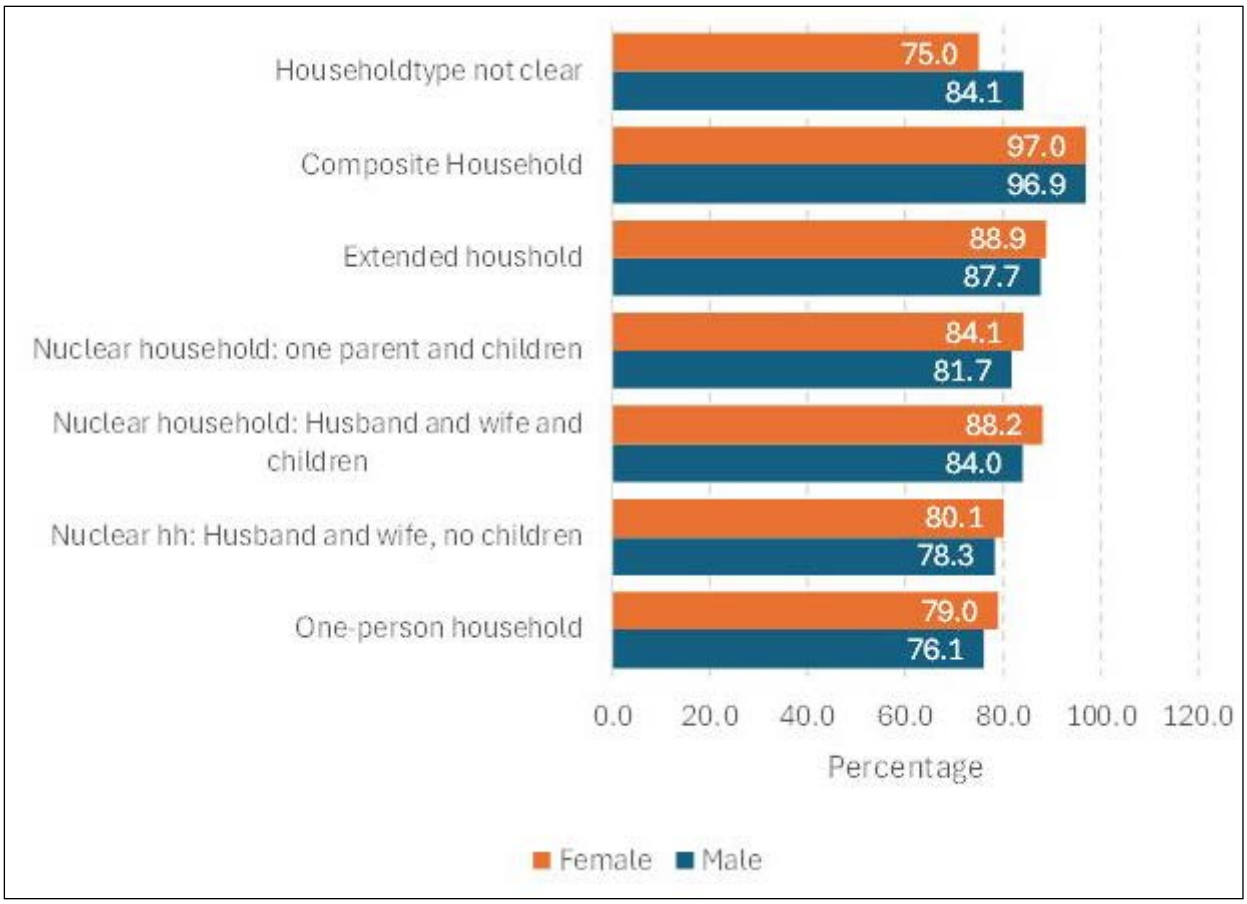


Source: Timor-Leste Population and Housing Census 2022

9.3. Dwellings & Tenureship

A number of tests were done to detect differences in characteristics related to how people live in dwellings by calculating the percentage distribution of the characteristics by type of household and sex of the head of the household. Figure 9. 4 shows the percentage of households that use electricity from the grid for lighting by type of household and sex of the head of household. It is an example of the outcome of the various analyses that were done to relate characteristics of the dwelling to the sex of the head of the household while controlling for the type of household. As can be seen, there is little difference in electricity use from the grid between male- and female-headed households. This was the case in all the analyses that were done, including on the tenureship of the dwelling.

Figure 9. 4. Percentage of households that use electricity from the grid for lighting by type of household and sex of the head of household



Source: Timor-Leste Population and Housing Census 2022

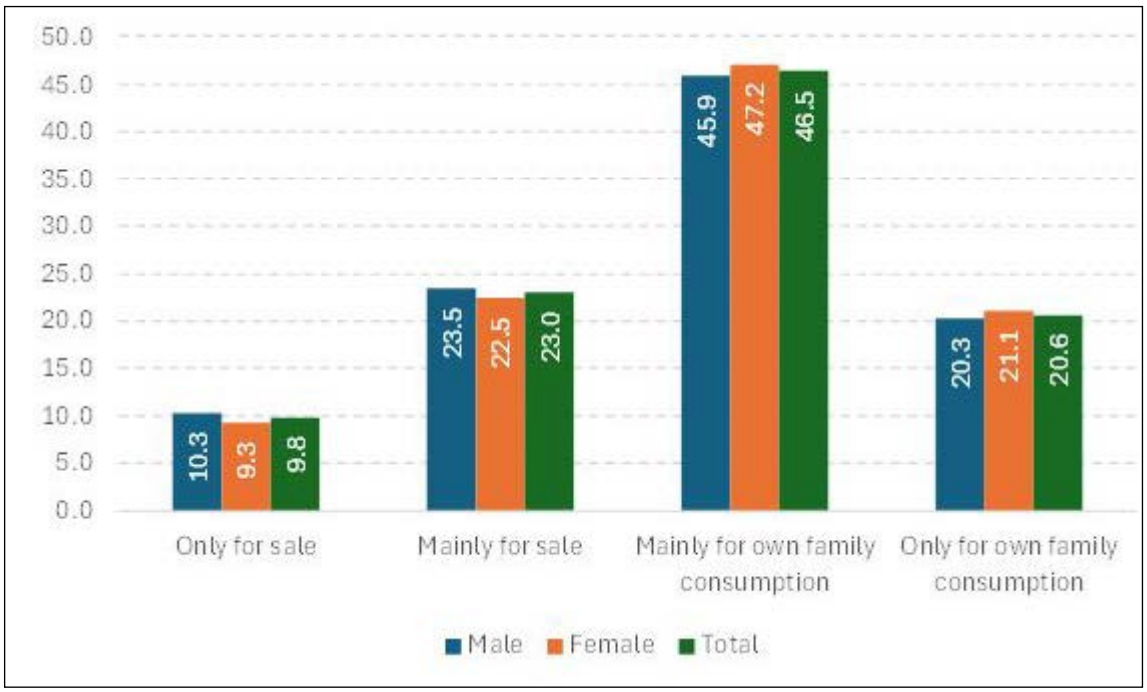
9.4. Agriculture

In the 2022 TLPHC, it was asked for each person 10 years of age and older whether, in the week before the census, they farmed or grew food in a plot or kitchen garden, raised or tended any farm animals, chickens or poultry or did any fishing, shellfish collection or aquaculture. If the answer was affirmative to any of the three questions, it was then asked whether the products were produced only for sale, mainly for sale, mainly for own family consumption or only for own family consumption. Agriculture remains an essential base of Timor-Leste's economy. According to these questions, 27.7 percent of males and 24.1 percent of females were active in either agriculture, husbandry or fishing/aquaculture. In total, 143,372 males and 121,543 females indicated they were involved in one of the three activities. The majority of people in agriculture are either involved in production 'mainly for own family consumption' or 'only for family consumption' (see Figure 9. 5). About two-thirds of all people in agriculture work mainly or entirely for their own family consumption. Less than ten percent of all persons are involved in agriculture only to produce cash crops. Figure 9. 5 shows only very small differences between both sexes in terms of the type of agricultural production they are involved in.

Using the census data, it is impossible to determine whether women or men are the main producers or owners of the farms where they work. The 2016 DHS provides some insight into ownership of land. The DHS shows that females are less likely to be the sole owner of land than males; 37 percent of males are sole owners of land against 32 percent of females (GDS, Ministry of Health and ICF, 2018)

In the census, the respondents were asked whether they had paid employment or worked for profit. The status of employment was then asked for this employment. However, in many cases, people could work in subsistence farming for their own consumption and have a paid job. As the status in employment refers to paid employment, it is impossible to determine women's status in employment on the family farm.

Figure 9. 5. Percentage of people involved in agricultural production, by purpose of production and by sex.



Source: Timor-Leste Population and Housing Census 2022

9.5. Wealth index

There is a close relationship between gender inequality and poverty. Some of the most important links between the position of women in society and their low economic status are directly connected to gender inequalities. As shown in section 7.1, the labour force participation for females is considerably lower than for males, taking economic independence away from women. They are also more often found in low-paying jobs or in the informal sector. Moreover, many times, women are paid less than men for the same work, increasing the income gap between both sexes. Time is another contributing factor, as women disproportionately bear the responsibility for unpaid domestic work and caring for children and the elderly.

The census is a poor source for a detailed examination of the interrelationship between poverty and gender inequality. This is for several reasons: first, in the census, no questions were asked about personal income. This is seldom done in censuses as it provides very unreliable results. Second, the wealth index – based on possession of goods and amenities – is calculated at the household level, not at the individual level. The only way to overcome this problem somewhat is by looking at the gender of the head of the household. Third, the census data do not give any insight into women's access to resources within the family. A woman may have decent employment but limited power over how the money she earns is spent.

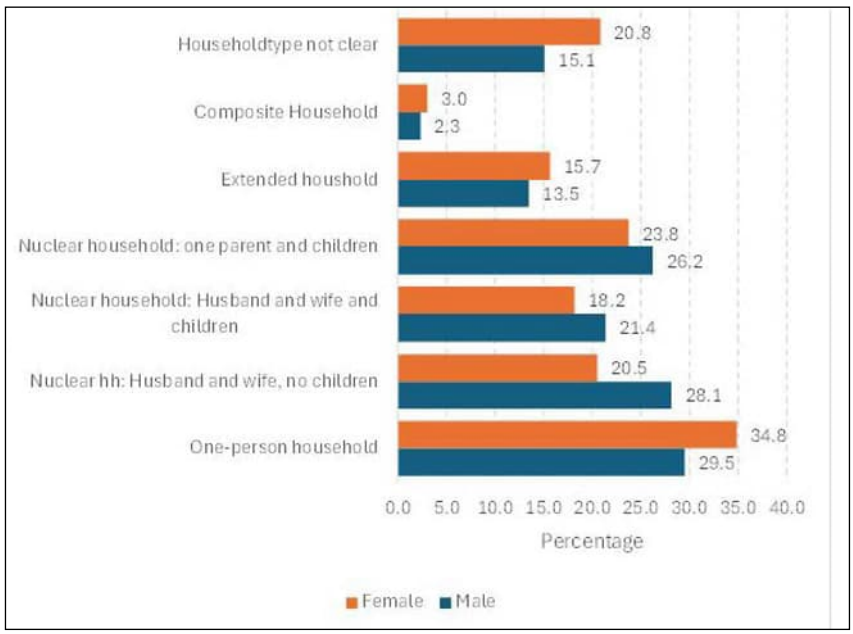
To shed some light on the relationship between gender and poverty, a crosstab was made in which the percentage of households in the poorest quintile is presented for each type of household with the sex of the head of the household. If the sex of the head of household, in combination with the type of household, would not have an effect on poverty, the percentages in each cell of the crosstab would all be equal to 20 percent. i.e. one-fifth of all cases. A value higher than 20 percent means that persons living in the particular head/type of household, are poorer than the expected value. If the percentage is smaller than the expected value of 20, people in the category are less poor.

The results of this analysis are depicted in The percentage for females (34.8) is higher than for males (29.5), which confirms Munoz Boudet et al.'s findings. Also, nuclear households with one parent and children are more likely to fall into the poorest wealth quintile. However, somewhat contrary to what one would expect, more fathers with children (26.3 percent), than mothers with children (23.8 percent) fall in this category.

Figure 9. 6. In a World Bank Working Paper presenting a global perspective on gender differences in poverty, Munoz Boudet et al. (2018) argue 'that working-age women are more likely than men to be poor when they have dependent children and no partner to contribute to the household income. At older ages, women in developed countries are more likely than men to be poor, particularly when living in one-person households'. The percentage for females (34.8) is higher than for males (29.5), which confirms Munoz Boudet et al.'s findings. Also, nuclear households with one parent and children are more likely to fall into the poorest wealth quintile. However, somewhat contrary to what one would expect, more fathers with children (26.3 percent), than mothers with children (23.8 percent) fall in this category.

Figure 9. 6 shows that for males and females living in one-person households, the percentage is higher than 20 percent, indicating that more people than expected fall in the poorest wealth quintile. The percentage for females (34.8) is higher than for males (29.5), which confirms Munoz Boudet et al.'s findings. Also, nuclear households with one parent and children are more likely to fall into the poorest wealth quintile. However, somewhat contrary to what one would expect, more fathers with children (26.3 percent), than mothers with children (23.8 percent) fall in this category.

Figure 9. 6. Percentage of households in the lowest wealth index quintile, by sex of head of household and type of household



Source: Timor-Leste Population and Housing Census 2022

Fewer persons than expected are present in the poorest quintile for females and males in extended households (15.7 percent of females and 13.5 percent of males). According to the 2022 TLPHC, only 1,245 persons live in composite households. A composite household consists of persons who are not all related to each other. Nuclear households consisting of both parents and children, are overrepresented in the poorest quintile. Interestingly, in this category, the percentage of female-headed households (23.8 percent) is lower than for male-headed households (26.2 percent). However, one has to take into account that the number of nuclear households with both parents headed by females is small (1,216) against a very large number of male-headed households (112,454). It is well possible that a selection procedure is operating and that female heads in this group have specific characteristics that make them the head of the household, for instance, by being much richer than the husband or having better education and/or employment.

"photo Credit: ©" INETL, I.P)

10. Opportunities, challenges and recommendations

This Thematic Report on Gender was developed based on the 2022 TLPHC and underscores the critical importance of addressing gender inequities to honour equal rights and opportunities for all people in Timor-Leste. Overall, ensuring all data produced in Timor-Leste are disaggregated by sex and used for developing and monitoring gender-sensitive policies, programs, laws, and regulations is key. Furthermore, in line with recommendations made in CEDAW's fourth periodic report to the State Party, the TLPHC 2022 findings show that discriminatory stereotypes against females remain in place in many areas. Significant effort should be directed towards dismantling these, including through strategic interventions targeting community and religious leaders, teachers, males and females. The media and public officials, who both have significant influence and a strong voice in society, should use gender-inclusive language and ensure women are seen as active drivers in the nation's development (United Nations, 2023).

This chapter further identifies critical areas for improvement and offers several corresponding recommendations:

Reflections on the questionnaire

- Gender vs. Sex: For inclusivity purposes, the 2022 PHC included 'other' as an option to answer the question What is <Name>'s gender? This was the first time this option was included in the Timor-Leste PHC, and it went beyond the former binary options of 'male' or 'female'. Only a handful of persons responded with 'other' in the 2022 TLPHC. While incorporating non-binary or third genders into a census can ensure visibility for other genders and better reflect gender diversity, it also raises further uncertainties. What specifically the respondent means by 'other' remains unclear. Given that the population responding with 'other' was small and that further details of what 'other' means were not asked, this thematic report did not include this component in the gender analysis. An option for the next census could be to make a clear distinction between 'sex at birth' and 'gender identity.' Including both concepts in the questionnaire could serve dual purposes, fulfilling biological and social policy needs. In general, it would be good if more gender data were collected to allow for those groups of women who are left behind.

- Head of household: when conducting gender analysis, considering the head of household is not a good measure as it omits consideration of specific household members, their gender and possible differences they may have. The limited analysis that was conducted, which compared the sex of the head of the household and health-related matters (chapter 4), showed only small differences in results. Furthermore, the head of the household may be an elderly person who is not necessarily the breadwinner in the home nor actively making decisions. Therefore, adding some questions directed to the household's primary breadwinner would be interesting. More specific information on the position of women in the household will have to be gathered through surveys. The TLPHC questionnaire mainly has modules related to the household or dwelling, with only one module directed towards individuals. This means many questions cannot be gender-disaggregated as they relate to the group of people living together and not the individuals. For example, the TLPHC questionnaire asks about the time (in minutes)

it takes to fetch water. While interesting, it would be even better to ask a follow-up question about who in the household performs this task. The literature suggests fetching water is often a task performed by females and/or children. Confirming how much time women, girls, and/or children spend fetching water rather than engaging in studies or paid work would be useful in developing more targeted policies and programs for women's empowerment. In this respect, a time-use survey (TUS) could be useful in shedding more light on how different gender roles determine the division of labour and responsibilities between males and females.

- Place of delivery: in the 2015 TLPHC, a question was asked on where the child was delivered. . This question was dropped from the 2022 TLPHC. As maternal mortality remains high, it is important that in the next census, the question on the place of delivery is included again to determine regional and social differences between mothers.

Nuptiality

Females are much more likely than males to become married as a child. According to the census, 0.2 percent of all females 20 – 24 years old at the time of the census were married before age 15, and 4.9 percent before age 18. These percentages are much lower for males, 0.03 and 0.6, respectively.

- Targeted interventions should be directed towards the municipalities with the highest levels of child marriage, including Oe-Cusse, where 9.2 percent of females aged 20 – 24 were married before the age of 18. The interventions should be multi-sectoral because of the important interlinkages with other sectors, such as education.

The level of female education is also closely related to the age difference between spouses in Timor-Leste. The average age difference between spouses is the largest for women with primary or pre-secondary education, 5.0 and 5.1 years, respectively. Their age difference is even higher than among women with no education or only kindergarten. On average, women with secondary (general or technical) education are 3.7 years younger than their husbands. Women with tertiary education all have about the same average age difference as their husbands (2.8 – 2.9 years).

- Ensuring access to education by females – and males – and keeping girls in education beyond primary and pre-secondary education is crucial to avoiding child marriage. It also proved to decrease the age difference between the spouses. Policies, programmes and legislation must be adequately implemented, funded and enforced to ensure the abolition of child marriage in Timor-Leste.

Female life expectancy is about four years higher for females than for males, and wives are several years younger than their husbands. As such, it should not come as a surprise that widowhood among females is considerably higher than among males: 7.9 percent against 2.5 percent.

- In response, adequate support and empowerment programs need to be in place to address the potential social and economic vulnerabilities of widows. These programs should ensure access to pensions, healthcare, and adequate housing and protect their property and inheritance rights. Adequate community-based support systems where widows can connect and share grievances could also foster a supportive environment.

Mortality and health

In Timor-Leste, life expectancy at birth for males stood at 65.1 in 2022. At 69.2 years, female life expectancy exceeds male life expectancy at birth by about four years. The female life expectancy in urban areas was 71.1 years compared to 65.7 years in rural areas. Infant mortality was higher among boys than girls, estimated at 46.3 male versus 38.2 female infant deaths per 1,000 live births. In addition, child mortality among males was higher than among females: 8.1 deaths per 1,000 live births compared to 6.8 (June 2021). Based on the TLPHC, the 2022 MMR stood at 413 deaths per 100,000 live births. About 68.5 percent of women aged 15 years and over, who had a birth in the last five years before the census, were assisted by skilled birth attendants, with large variations seen between municipalities, the mother's educational level and household wealth. The aforementioned numbers highlight numerous possible interventions which can be introduced or strengthened to improve public health outcomes and gender inequality:

- Numerous interventions can be introduced and/or strengthened to reduce infant and child mortality, including child health programs, e.g., vaccination campaigns, post-natal check-ups, encouraging exclusive breastfeeding and lactational education and support, nutrition availability, etc..
- Improve the life expectancy of males by addressing risk factors such as alcohol, smoking, occupational hazards, and risky behaviour (i.e. violence and accidents) and promote screening and awareness programs.
- Improve rural health by strengthening health infrastructure and community health programs that offer quality primary care.
- Promote the importance of skilled birth attendance among families (including males) and make it the norm for all by expanding the number of skilled birth attendance, including in hard-to-reach areas. If needed, ensure adequate antenatal and postnatal care is provided to mothers and infants through mobile units or telemedicine in hard-to-reach areas. Ensure obstetric care is available in emergencies. Facilities should have adequate transportation, sufficient medication stock, and be adequately equipped to deal with emergency obstetric care.
- Whilst the census did not collect data on GBV, it is such a crucial component for women's empowerment and gender equality that it could not be omitted from this report. The continued fight against gender-based violence through the enforcement of laws, increasing support services, and raising awareness is crucial for the achievement of both national and international development goals.
- Many of these recommendations are in line with those made in the CEDAW fourth periodic report, which highlighted the need for improved women's access to maternal health care and skilled birth attendants, women and girls' access to sexual and reproductive health services (including those with a disability) and supplies (e.g. contraception), legalizing abortion, HIV testing and treatment, collecting disaggregated data by age and region on women's health, among others (UN Committee on the Elimination of Discrimination, 2023).

Fertility

Timor-Leste has the highest total fertility rate (3.6) in the Southeast Asian region. Total fertility in rural areas (4.0. children per woman) is higher than in urban areas (3.0 children per woman). Over time, adolescent fertility has shown a significant downward trend.

- Efforts to improve access to family planning and youth-friendly sexual and reproductive health services and information should be continued to further reduce unintended pregnancies among young females.

- Given that adolescent females with no education have significantly higher fertility rates compared to those with any level of formal education ensure that all have access to quality education as a means to avoid pregnancy at a young age. Barriers which discourage girls who have given birth to attend schools should be addressed.

The census data show a wide variety of sex ratios at birth between the various municipalities. The sex ratio at birth is lowest in Atauro (94 boys per 100 girls) and Manatuto (95). The highest sex ratios are in Manufahi (125) and Covalima (123). However, DHS data show much lower sex ratios, which puts the census data in question. Given the restricted policy on abortion in Timor-Leste and the limited available technology to determine the sex of the foetus, it is unlikely that sex-selective abortion is widespread, if at all, exists in Timor-Leste.

- More in-depth research is needed to find the reason for the elevated sex ratios at birth in the census.

Education

The TLPHC revealed that important gender gaps exist in education in Timor-Leste. Whilst younger females are more likely to be literate than males, illiteracy remains the highest among older women. When considering the level of education, younger females attend primary and secondary education more often than males, also, at the highest level of education (university), females outnumber males. Those in the poorest quintile, with a disability, living in a rural area, and males have higher odds of being illiterate. In addition, illiteracy is much higher among young females who have given birth.

- Promote gender equality at all levels of education in Timor-Leste. This includes ensuring males equally access lower levels of education, whilst females can equally access higher levels of education. There are numerous ways this could be achieved, including by providing scholarships, providing incentives to families to send or keep children in school, and awareness campaigns that promote the value of education for males and females and the importance of starting pre-primary education at the appropriate age.

- To address the higher illiteracy among older women, targeted and tailor-made adult literacy programs should be established within communities. Tailor-made means they are responsive to women's schedules and responsibilities and that any barriers for women to participate are removed. This could include exploring ways to use digital platforms to reach remote areas and ensuring flexibility can be offered.

- Besides elderly women, further efforts should be made to make education more inclusive for vulnerable groups. This includes disability-inclusive education, sufficient quality infrastructure and resources in rural areas, targeted education for those in the poorest quintile, with a disability, and/or living in rural areas, and developing reintegration programs for adolescents who have given birth,

- Address male disengagement from education by ensuring the availability of quality education and vocational schooling. It is crucial to ensure boys – but also girls – have the ability to keep going to school, as opposed to having to engage in paid work or other activities, in order to support the household.

The TLPHC showed that 0.2 percent of all females 20 – 24 years old at the time of the census were married before age 15 and 4.9 percent before age 18, though numbers were higher in the 2016 DHS. In any case, it is crucial that gender-sensitive policies beyond the education sector are established and enacted. Banning marriage before age 18 and child labour, for example, and enforcing these policies will help keep young males and females in school.

- What is taught in school should also reflect the needed change in gender equality. Teachers should be trained to recognize, address and report gender disparities, and the curriculum should be developed in such a way that it challenges gender stereotypes and promotes gender equality. The CEDAW further recommends that all levels of education should offer: (i) inclusive and accessible content on gender equality, including on women's rights and the harmful effects of gender-based violence against women and girls; (ii) age-appropriate sexuality education, paying particular attention to responsible sexual behaviour and the prevention of early pregnancies and sexually transmitted diseases; and (iii) human rights and peace education (UN Committee on the Elimination of Discrimination, 2023)

- Ensure comprehensive sexuality education is provided in schools and that families – including males – are informed on sexual and reproductive health and maternal health.

- Exert efforts to better understand why females are more represented in many educational levels than males, and develop corresponding policies and programs to address these disparities.

Economic activity

Almost two-thirds (64.1 percent) of the population 10 years and older are outside the labour force; for females, the percentage is considerably higher than for males, 70.3 percent against 58.1 percent, respectively. School attendance is the main reason for males and females being without work. Somewhat more young males than young females indicate this as their main reason. While 36.3 percent of all females indicate that they are not working because they have to take care of the family, for males, this is much lower (18.4 percent). More males than females were involved in subsistence farming, which is an activity that falls outside the labour force. It is also important to note that a group is not working because they are convinced there is no work available. Somewhat more males (9.7 percent) than females (5.1 percent) mentioned this.

In relative terms, more females than males are found in vulnerable employment. About half of all females (50.1 percent) are in vulnerable employment, against 39.2 percent of males (Timor-Leste National Institute of Statistics (INETL), 2024). Labour force participation for females is considerably lower than for males, taking economic independence away from women. Women are often found in low-paying jobs or in the informal sector. Moreover, many times, women are paid less than men for the same work, increasing the income gap between both sexes. Time is another contributing factor, as women disproportionately bear the responsibility for unpaid domestic work and the care of children and the elderly.

Little difference was noticed between male (2.7 percent) and female (3.0) unemployment, including among youth. Among all working children, 13,101 were boys (10.6 percent of the total), and 11,021 (9.3 percent) were girls. In the census, no material is available to determine if child work is child labour, how to examine the consequences of child labour on the lives of boys and girls and how this effect may be different for boys and girls.

- Generally speaking, the TLPHC 2022 data reinforces the needed changes that were recommended in the CEDAW fourth periodic report. TLPHC 2022 showed the need for improving women's access to formal employment and social security coverage, closing the gender pay gap, improving training and employment opportunities for marginalized women, such as those with disabilities, and protecting the rights of women domestic workers (United Nations, 2023).

- Improve national coding of the International Standard Classification of Occupations (ISCO) to be able to accurately determine the occupation of males and females.

- Ensure childcare and family support services and conditions, such as childcare, are available, including in rural areas, so that the burden of unpaid work among females in particular, can be reduced.

- Given the large population of those in vulnerable employment, labour protection laws should be in place to guarantee equal pay for decent work. Females should have equal opportunities in the labour market and be able to enjoy the same decent work conditions.

Disability

The disability prevalence rate in Timor-Leste was 1.4 percent according to the TLPHC, 1.4 percent for males and 1.5 percent for females (Timor-Leste National Institute of Statistics (INETL), 2024). No less than 82.1 percent of females with a disability aged five and older never attended school. For males, this is 70.2 percent.

- Persons with disabilities are in more disadvantageous positions in all aspects covered in this thematic report, including education, employment and health. Their needs should, therefore, be addressed in a multisectoral, comprehensive manner. Females tend to be generally more disadvantaged than males, but all require additional investment and support. Furthermore, it underscores the importance of ensuring women and girls with disabilities, particularly those in rural areas, are aware of their rights under the CEDAW and know the mechanisms available to assert those rights. Civil society organisations play a crucial role in this regard.

Social status

While very few people live in one-person households in the age groups 0 – 14 and 15 – 64 years, 2,099 males and 4,653 females 65 years and older live alone in a one-person household. For females, this is 11.6 percent of all older women, for males, this is 6.0 percent. More female-headed one-person households are in the lowest wealth quintile compared to male-headed households. Another observation is that a larger percentage of older females (59.0 percent) than males (53.4 percent) live in extended households. Among the 250,270 private households, 44,535 were headed by females, i.e. 17.8 percent of all households. Few nuclear households with husband and wife and children are headed by females. In summary, these figures highlight that gender disparities and vulnerabilities are more common in older adults and female-headed households. This could be addressed by:

- Offering leadership training to women. Overall, women are much less likely to be the head of a household compared to males. Whilst engrained in the patriarchal society and social values and norms, gender equality should be promoted in this respect as well, through leadership training for women or community awareness campaigns, for example. Establishing female leadership

in the household, but also beyond, by providing capacity building and training to women (e.g. in the private sector) is also important to further bolster female participation and leadership in political and public life (UN Committee on the Elimination of Discrimination, 2023). Training to female entrepreneurs and artisans, such as weavers, on business management, financial literacy and marketing is a specific example provided in the CEDAW fourth-period report (UN Committee on the Elimination of Discrimination, 2023).

- Ensuring (older) women are adequately supported in economic and social terms. This could be through community-based programs (e.g. women's cooperatives), introducing social protection programs, ensuring access to health care, access to land ownership, and creating livelihood programs that improve female economic resilience. More data will be needed to better understand the intra-household disparities.

- To tackle those vulnerable when living alone, incentives could be established to encourage multigenerational living or caregiver support programs that take care of elderly relatives.

- Mainstreaming gender into national social protection strategies to ensure females are meaningfully involved (United Nations, 2023).

- The 2022 TLPHC shows that males and females residing in rural areas are often in more disadvantageous positions than those in urban areas. Rural women, in particular, are often left behind. Their equal rights to land, expropriation protection, basic services, financial credit, modern farming technologies, and underrepresentation in local decision-making were key issues highlighted in CEDAW's fourth periodic report. Recommendations to improve their situations included dismantling patriarchal attitudes and gender stereotypes that impede equal access by rural women to land and productive resources; affordable and law-abiding housing and regulations; better access to basic services; and more active female participation in planning and decision-making related to rural infrastructure and services, agricultural and rural development policies (United Nations, 2023).

Bibliography

Ahmady, K. (2024, March). Gender differences in child labour: A systematic review of causes, forms, features and consequences. *International Journal of Multidisciplinary Research and Growth Evaluation.*

Ana Maria Munoz Boudet, P. B. (2018, March). Gender Differences in Poverty and Household Composition through the Life-cycle. A Global Perspective. *Policy Research Working Paper 8360. World Bank Group*. Retrieved from https://documents1.worldbank.org/curated/pt/135731520343670750/pdf/WPS8360.pdf

Asian Development Bank. (2021). *Learning and earning losses from COVID-19 school closures in developing Asia*. Asian Development Bank.

Braverman-Bronstein, A. O.-P.-G.-C.-C. (2023). Gender inequality, women's empowerment, and adolescent birth rates in 363 Latin American cities. *Social Science and Medicine*, 1 - 8. Retrieved from https://pmc.ncbi.nlm.nih.gov/articles/PMC7613905/

Council of Europe. (2011). *The Council of Europe Convention on preventing and combating violence against women and domestic violence (Istanbul Convention)*. Retrieved from Gender Matters: https://www.coe.int/en/web/gender-matters/council-of-europe-convention-on-preventing-and-combating-violence-against-women-and-domestic-violence

Council of Europe. (n.d.). *Sex and gender*. Retrieved from Gender Matters: https://www.coe.int/en/web/gender-matters/sex-and-gender

Cummins, D. (2017). *Teenage pregnancy and early marriage in Timor-Leste. Research on the Decision-Making Pathways of Young Women in the Municipalities of Covalima, Aileu and Dili*. Dili: UNFPA. Retrieved from https://timor-leste.unfpa.org/sites/default/files/pub-pdf/TPEM%20REPORT_ENGLISH_LOW%20DEF%20-%2048%20pages.pdf

European Institute for Genader Equality. (2024, November). *Gender analysis*. Retrieved from More Methods and Tools: https://eige.europa.eu/gender-mainstreaming/tools-methods/gender-analysis?language_content_entity=en#toc-definition-and-purpose

Gardner, J. (2018). *Timor-Leste Population and Housing Census 2015 Thematic Report Volume 13 . Analytical Report on Gender Dimensions*. General Directorate of Statistics (GDS), UNFPA.

Garenne, M. (2015). Primary infertility in African censuses: Potential and limits of IPUMS sample. *Paper prepared for the UAPS 2015 conference. Session 137: Data Quality Issues in African Surveys and Censuses*. Johannesburg.

GDS and UNFPA. (2018). *Timor-Leste Population and Housing Census 2015 Thematic Report Volume 6. Analytical report on mortality*. Dili : GDS and UNFPA.

GDS, Ministry of Health and ICF. (2018). *Timor-Leste Demographic and Health Survey 2016*. Maryland: GDS and ICF.

General Directorate of Statistics (GDS) & ICF. (2017). T*imor-Leste Demographic and Health Survey 2016: Key Indicators. .*

General Directorate of Statistics (GDS). (2022). *Population and Housing Census 2022. Enumreator's Instructions Manual*. Dili: GDS, Caicoli Street.

General Directorate of Statistics (GDS), Ministry of Health and ICF. (2018). *Timor-Leste Demographic and Health Survey 2016*. Dili: Timor-Leste and Rockville, Maryland, USA: GDS and ICF.

General Directorate of Statistics. (2017). *Timor-Leste Population and Housing Census 2015*. *Thematic Report Volume 11. Education Monograph 2017*. Dili: GDS, UNICEF and UNFPA.

General Directorate of Statistics. (2017). *Timor-Leste Population and Housing Census 2015*. *Thematic Report Volume 11. Education Monograph 2017*. Dili: GDS, UNICEF and UNFPA.

Girls not brides. (n.d.). *Gender-based violence and child marriage*. Retrieved from https://www.girlsnotbrides.org/learning-resources/child-marriage-and-health/gender-based-violence-and-child-marriage/

Government of Timor-Leste. (2008). *EDUCATION SYSTEM FRAMEWORK LAW*. Retrieved from Law No. 14/2008 : https://mj.gov.tl/jornal/lawsTL/RDTL-Law/RDTL-Laws/Law%2014-2008.pdf

Government of Timor-Leste. (2011). *Strategic Development Plan 2011-2030*. Dili: Government of Timor-Leste.

Government of Timor-Leste. (2017, April 12). Jornal da Republica. *Jornal da Republica Publicacao oficial da Republica Democratica de Timor-Leste.*

Hajnal, J. (1953). Age at Marriage and Proportions Marrying. *Population Studies, vol. 7, no.2 (Nov. 1953).*

IISD. (2017, July 6). *Achieve Gender Equality to Deliver the SDGs*. Retrieved from SDG Kowledge Hub: https://sdg.iisd.org/commentary/policy-briefs/achieve-gender-equality-to-deliver-the-sdgs/

ILO. (2016). K*ey Indicators of the Labour Market, Ninth edition*. Generva. Retrieved from https://www.ilo.org/sites/default/files/wcmsp5/groups/public/@dgreports/@stat/documents/publication/wcms_498929.pdf

ILO. (2018). *Paid employment vs vulnerable employment. A brief study of employment patterns by status in employment*. ILOSTAT, no. 3 June 2018. Retrieved from file:///C:/Users/frank/Downloads/wcms_631497-1.pdf

ILO. (2024, February 20). *What is meant by child labour? Where to draw the line between the acceptable and the unacceptable?* Retrieved from https://www.ilo.org/moscow/areas-of-work/child-labour/WCMS_249004/lang--en/index.htm

INETL. (2023). *Timor-Leste Population and Housing Census 2022 Main Report*. Dili: INETL.

INETL. (2023). *Timor-Leste Population and Housing Census 2022 Main Report*. Dili.

INETL. (2024). *2022 Population and Housing Census. Thematic Report on Mortality*. Dili.

INETL. (2024). *Timor-Leste Population and Housing Census 2022, Thematic Report – Education*. Dili: INETL.

INETL. (2024). *Timor-Leste Population and Housing Census 2022, Thematic Report – Fertility and Nuptiality*. Dili: INETL.

INETL. (2024). *Timor-Leste Population and Housing Census 2022, Thematic Report – Mortality*. Dili: Timor-Leste National Institute of Statistics.

INETL. (2024). *Timor-Leste Population and Housing Census 2022. Thematic Report Education*. Dili: INETL, UNICEF and UNFPA.

International Labour Organization. (2013). *Resolutions and decisions of the 19th International Conference of Labour Statisticians,*. Geneva: ILO.

Khatuna, B. (2016). Analysis of political and economic environment from the viewpoint of gender equality.No. 1. *Ecoforum Journal*.

Mahwish, S. B. (2024). Empowering Women through Financial Inclusion and Governance: Evidence from 30 Developing Economies. iRASD *Journal of Economics*, 98 - 108. Retrieved from https://journals.internationalrasd.org/index.php/joe/article/view/2052/1342

Max Planck Institute. (n.d.). *Why do women outlive men*? Retrieved from Max Planck Institute for biology of ageing: https://www.age.mpg.de/why-do-women-live-longer-than-men#:~:text=On%20average%2C%20women%20visit%20the,in%20women%20%5BKiely%20et%20al.

Ministry of Education. (2011). *National Education Strategic Plan 2011-2030*. Dili: Ministry of Education, Timor-Leste.

National Statistics Directorate (NSD) & United Nations Population Fund (UNFPA). (2012). *2010 Timor-Leste Population and Housing Census. Analytical Report on Education*. Volume 9.

OECD. (n.d.). *Youth not in employment, education or training (NEET)*. Retrieved from OECD Indicators: https://www.oecd.org/en/data/indicators/youth-not-in-employment-education-or-training-neet.html

Reina, I. (2022). Gender-responsive budgeting in South Korea. In *Gender-Resonsive Budgeting in Practice* (p. 225).

Rezza, A. Y. (2024). *Timor-Leste Economic Report: Leveraging WTO Accession for Economic Transformation*. Washington: World Bank. License: Creative Commons Attribution CC BY 3.0 IGO.

Ritchie, H., & Roser, M. (2024, February). *Gender Ratio. How does the number of men and women differ between countries? And why?* Retrieved from Our World in Data: https://ourworldindata.org/gender-ratio

Rouchou, B. (2013). Consequences of infertility in developing countries. *Perspectives in Public Health.* Retrieved from https://citeseerx.ist.psu.edu/document?repid=rep1&type=pdf&doi=f718541dfffaf222ae4d620806c44dc289635fe4

Rutstein, S. (2008). T*he DHS Wealth Index: Approaches for Rural and Urban Areas. DHS Working Paper, no. 60, Demographic and Health Research*. Retrieved from https://www.researchgate.net/publication/238706094

SDSN. (n.d.). *Total Fertility Rate*. Retrieved from Indicators and a Monitoring Framework. Launching a data revolution for the Sustainable Development Goals: https://indicators.report/indicators/7-total-fertility-rate/

Secretary of State for Equality. (2024). *Timor-Leste Beijing Declaration and Platform for Action. National Review and Evaluation Report 2019-2024*. SEII.

Seta, R. (2023). Child marriage and its impact on health: a study of perceptions and attitudes in Nepal. *Journal of Global Health Reports*. Retrieved from https://www.joghr.org/article/88951-child-marriage-and-its-impact-on-health-a-study-of-perceptions-and-attitudes-in-nepal

Soressa Abebe Geneti1, &. G. (2021). Prevalence and patterns of birth defects among newborns in southwestern Ethiopia: a retrospective study. *Pan African Medical Journal*. Retrieved from https://www.panafrican-med-journal.com/content/article/40/248/full/

Spotlight Initiative Timor-Leste. (2021). *Mapping of Quantitative and Qualitative Data on Violence Against Women and Girls.*

Sumeeth Lal, R. S. (2021, September 22). Socio-economic and demographic determinants of fertility in six selected Pacific Island countries: An empirical study. PLoS One. Retrieved from https://pubmed.ncbi.nlm.nih.gov/34550992/

The Advocates. (2011, January). *Stop Violence Against Women*. Retrieved from The Advocates ofr Human Rights: https://www.stopvaw.org/consequences_6

The Child Marriage Data Portal. (2024). *Are we on track to end child marriage by 2030*? Retrieved from https://childmarriagedata.org/global-trends/

Timor-Leste . (2011). *Timor-Leste Srategic Development Plan 2011 - 2030*. Retrieved from https://timor-leste.gov.tl/wp-content/uploads/2011/07/Timor-Leste-Strategic-Plan-2011-20301.pdf

Timor-Leste. (2002). *Constitution of the Democratic Republic of Timor-Leste*. Retrieved from https://timor-leste.gov.tl/wp-content/uploads/2010/03/Constitution_RDTL_ENG.pdf

Timor-Leste National Institute of Statistics (INETL). (2024). 2*022 Timor-Leste Population and Housing Census, Thematic Report on the Labour Force*. Dili: INETL.

Timor-Leste National Institute of Statistics (INETL). (2024). *Timor-Leste Population and Housing Census 2022, Thematic Report – Disability*. Dili.

Timor-Leste National Institute of Statistics (INETL). (2024). *Timor-Leste Population and Housing Census 2022, Thematic Report – Fertility and Nuptiality*. Dili.

Timor-Leste National Institute of Statistics (INETL). (2024). T*imor-Leste Population and Housing Census 2022, Thematic Report – Harnessing the Demographic Dividend for Timor-Leste*. Dili.

Timor-Leste National Institute of Statistics (INETL). (2024). *Timor-Leste Population and Housing Census 2022, Thematic Report – Navigation the Future: A Comprehensive Analysis of Children and Youth in Timor-Leste*. Dili.

UN Committee on the Elimination of Discrimination. (2023). *Convention on the Elimination of All Forms of Discrimination against Women*. *Concluding observations on the fourth periodic report of Timor-Leste.* . CEDAW. Retrieved from https://documents.un.org/doc/undoc/gen/n23/153/11/pdf/n2315311.pdf

UN Sustainable Development Group . (2016, December). *Gender Equality, UN Coherence and You* . Retrieved from https://unsdg.un.org/resources/gender-equality-un-coherence-and-you

UN Women. (2024, November). *Turning promises into action: Gender equality in the 2030 Agenda for Sustainable Development*. Retrieved from UN Women Africa: https://africa.unwomen.org/en/what-we-do/economic-empowerment_africa

UN Women. (2025, Novermber 13). *Gender Statistics and Sex-Disaggregated Data*. Retrieved from UN Women Strategic Plan 2022-2025: https://www.unwomen.org/en/un-women-strategic-plan-2022-2025/statistics-and-data

UN Women and United Nations Department of Economic and Social Affairs, Statistics Division. (2023). *Progress on the Sustainable Development Goals. The Gender Snapshot 2023*. New York. Retrieved from https://unstats.un.org/sdgs/gender-snapshot/2023/GenderSnapshot.pdf

UN Women. (n.d.). *Gender Mainstreaming*. Retrieved from UN Women: https://www.unwomen.org/en/how-we-work/un-system-coordination/gender-mainstreaming

UN Women. (n.d.). *Gender, age and disability*: addressing the intersection. Retrieved from UN Women:https://www.unwomen.org/sites/default/files/2022-06/Brief-Gender-age-and-disability-en.pdf

UN Women. (n.d.). *Timor-Leste*. Retrieved from UN Women: https://data.unwomen.org/country/timor-leste

UNESCO. (2018, July 11). *Sustainable Development Goal 4: Targets, Indicators and monitoring*. Retrieved from UNESCO Institute for Statistics: https://resources.norrag.org/storage/documents/XLOud2fuMySEhrQj9KUf7JajhvRcU2o1hS8CrGkX.pdf

UNFPA. (2014). *Methodological guidelines for the gender analysis of national population and housing census data*. UNFPA.

UNFPA. (2014). *Methodological Guidelines for the Gender Analysis of National Population and Housing Census Data*. UNFPA.

UNFPA. (2018). *Women and Young Persons with Disabilities. Guidelines for Providing Rights-Based and Gender-Responsive Services to Address Gender-Based Violence and Sexual and Reproductive Health and Rights*. New York. Retrieved from https://www.unfpa.org/sites/default/files/pub-pdf/UNFPA-WEI_Guidelines_Disability_GBV_SRHR_FINAL_19-11-18_0.pdf

UNFPA. (2018). Y*oung persons with disabilities: global study on ending gender-based violence. and realising sexual and reproductive health and rights*. New York. Retrieved from https://pacificdata.org/data/dataset/095ee4e3-a619-4b1f-8c4a-ec58270a3349/resource/b8dc2d8f-3ce2-4293-ba90-8cda7f74081d/download/unfpa-global-study-on-youth-and-disability.pdf

UNFPA. (2022, February). *Child marriage - Frequently Asked Questions*. Retrieved from ICPD-30: https://www.unfpa.org/child-marriage-frequently-asked-questions

UNFPA. (n.d.). *Genderizing the Census. Strategic approaches to capturing the gender realities of a population*. Bangkok: UNFPA Asia and the Pacific Regional Office. Retrieved from https://asiapacific.unfpa.org/sites/default/files/pub-pdf/Genderizing%20the%20Census.pdf

UNFPA. (n.d.). *Methodological Guidelines for the Gender Analysis*. Technical Division of the United Nations Population Fund (UNFPA).

UNICEF. (2013). *A passport to protection. A guide to birth registration programming*. New York: Child Protection Section, Programme Division, UNICEF. Retrieved from https://healthynewbornnetwork.org/hnn-content/uploads/UNICEF_BRHandbook_Web_single_pages.pdf

UNICEF. (2013). *Every Child's Birth Right: Inequities and trends in birth. New York*: UNICEF. Retrieved from file:///C:/Users/frank/OneDrive/Documents/Werk/IfP/Projecten/Timor-Leste%20Gender/Documentation/Birth_Registration_lores_final_%20UNICEF%202013.pdf

UNICEF. (2021). *Towards Ending Child Marriage: Global trends and profiles of progress*. New York. Retrieved from file:///C:/Users/frank/OneDrive/Documents/Werk/IfP/Projecten/Timor%20Leste%20Youth/Documentation/Towards-Ending-Child-Marriage-report-2021.pdf

UNICEF. (2022). *Water, sanitation and hygiene in Timor-Leste*. Dili: UNICEF.

UNICEF. (n.d.). *Child marriage threatens the lives, well-being and futures of girls around the world*. . Retrieved from Child marriage. : https://www.unicef.org/protection/child-marriage

United Nations. (1948, December 10). *Universal Declaration of Human Rights. General Assembly Resolution 217A.* Retrieved from Peace, dignity and equality on a healthy planet: https://www.un.org/en/about-us/universal-declaration-of-human-rights

United Nations. (2017). *Principles and Recommendations for Population and Housing Censuse. Revision 3*. Department of Economic and Social Affairs, Statistics Division, New York.

United Nations. (2017). *Revised list of global Sustainable Development Goal indicators*. IAEG-SDGs.

United Nations. (2023). *Committee on the Elimination of Discrimination against Women. Concluding observations on the fourth periodic report of Timor-Leste**. United Nations.

United Nations. (2023). *https://documents.un.org/doc/undoc/gen/n23/153/11/pdf/n2315311*.pdf. UN.

United Nations. (2024, November). *Goal of the Week: Goal 5 Gender Equality. Goal 5: Achieve gender equality and empower all women and girls*. Retrieved from Civil Society: https://www.un.org/en/civil-society/goal-week-goal-5-gender-equality

United Nations. (2024, March 28). *SDG indicator metadata*. Retrieved from SDGs: https://unstats.un.org/sdgs/metadata/files/Metadata-03-01-02.pdf

United Nations in Timor-Leste. (2021). Socio-Economic Impact Assessment of COVID-19 in Timor-Leste, Round 2 (SEIA-2). UNICEF. Retrieved from file:///C:/Users/frank/Downloads/SEIA2-Final-Report-copyedited.pdf

United Nations. (n.d.). *Convention on the Rights of Persons with Disabilities* (CRPD). Retrieved from Department of Economic and Social Affairs, Social Inclusion: https://social.desa.un.org/issues/disability/crpd/convention-on-the-rights-of-persons-with-disabilities-crpd

United Nations. (n.d.). *Total Fertility Rate*. Retrieved from https://www.un.org/esa/sustdev/natlinfo/indicators/methodology_sheets/demographics/total_fertility_rate.pdf

United Nations Population Division, Department of Economic and Social Affairs. (2024). *Lafe expectancy at exact age, e(x), by region, subregion and country, annually for 1950 - 2100*. Retrieved from World Prospects 2024, Online Edition: https://population.un.org/wpp/Download/Standard/Mortality/

United Nations. Committee on the Elimination of Discrimination against Women (CEDAW). (31 May 2023). Concluding observations on the fourth periodic report of Timor-Leste. *Convention on the Elimination of All Forms of Discrimination against Women*. Retrieved from https://documents.un.org/doc/undoc/gen/n23/153/11/pdf/n2315311.pdf

Washington Group on Disability Statistics. (2021). *Creating Disability Severity Indicators Using the WG Short Set on Functioning (WG-SS) (SPSS)*. Retrieved from http://www.washingtongroup-disability.com/

Washington Group on Disability Statistics. (n.d.). *Definition of Disability*. Retrieved from https://www.washingtongroup-disability.com/about/definition-of-disability/

WHO. (2024, May 22). *Infertility*. Retrieved from https://www.who.int/news-room/fact-sheets/detail/infertility

World Bank. (2021). *Timor-Leste Country Gender Action Plan*. Dili: World Bank. Retrieved from Prosperity Data360: https://documents1.worldbank.org/curated/en/099905008122242158/pdf/P172182039349a03b0bd580523c9d4dd50c.pdf

World Bank. (2022). *World Bank Group*. Retrieved from World Bank Open Data: https://data.worldbank.org/

World Bank Group. (2024). Maternal mortality ratio (per 100,000 live births). Retrieved from Gender DataPortal:https://genderdata.worldbank.org/en/indicator/sh-sta-mmrt?view=trend&geos=WLD

World Bank Group. (2024). *Overall Global Gender Gap Index*. Retrieved from Prosperity Data360: https://prosperitydata360.worldbank.org/en/indicator/WEF+GGR+INDEX

World Health Organization. (2016). *World health statistics 2016*: monitoring health for the SDGs, sustainable development goals. Retrieved from https://www.who.int/docs/default-source/gho-documents/world-health-statistic-reports/world-heatlth-statistics-2016.pdf

World Health Organization. (2022, April 7). *Women using firewood face increasing health risks*. Retrieved from World Health Organization Nigeria: https://www.afro.who.int/countries/nigeria/news/women-using-firewood-face-increasing-health-risks

World Health Organization. (2024, October 16). *Household air pollution*. Retrieved from World Health Organization: https://www.who.int/news-room/fact-sheets/detail/household-air-pollution-and-health

World Health Organization. (n.d.). *Gender and health*. Retrieved from Western Pacific: https://www.who.int/westernpacific/health-topics/gender-equity-and-human-rights#tab=tab_1

Annex 1. Concepts and definitions

The main sources used for the concepts and definitions were:

- (1) ILOSTAT Concepts and definitions [5]
- (2) Timor Leste censuses
- (3) UN Data Glossary[6]

Concept	Definition
Population demographics	
Gender/Sex [1]	Various countries in the Asian region nowadays distinguish three categories of gender/sex in their census questionnaires: 1) male, 2) female and 3) other. The 'other' answer category is added to avoid that persons who identify themselves as gender non-binary, trans or anything other than male or female would feel excluded. In practice, in the field, enumerators did not use the third category, and as such, this category cannot be found in the tables.
Population sex ratio [3]	Number of males per 100 females in the population.
Sex ratio at birth [3]	Number of male births per one female birth.
Citizenship [1]	This breakdown refers to the country of citizenship and distinguishes the citizens of a given country from the non-citizens.
Migrants [1]	Migrants are individuals who have changed their country of residence. For ILOSTAT, migrants are defined based on either their country of birth or their country of citizenship. They include all individuals born outside the country (foreign-born population) or those who do not hold citizenship in the country (non-citizens or foreign population).
Marital status	
Born out of wedlock [3]	A characteristic of a live-born infant or dead foetus whose mother and father were not legally married at the time of delivery.
Marital status [2]	Personal status of each individual in relation to the marriage laws or customs of the country is defined in the census in five categories: Never married: an individual who has never been in a union; Married: an individual who was in a marital union at the moment of the census, legally or not; Divorced: an individual who has been separated from his or her spouse through a court decision, according to legislation; Separated: an individual who has separated temporarily from his/her spouse and is awaiting the court decision; Widowed: a man or woman who has lost his or her spouse by death, not yet remarried. The census questionnaire enquires about the marital status of all usual residents aged 12 and above.
Health and mortality	
Child mortality (infant mortality) [3]	Probability of dying between birth and exact age 1. It is expressed as deaths per 1,000 live births.

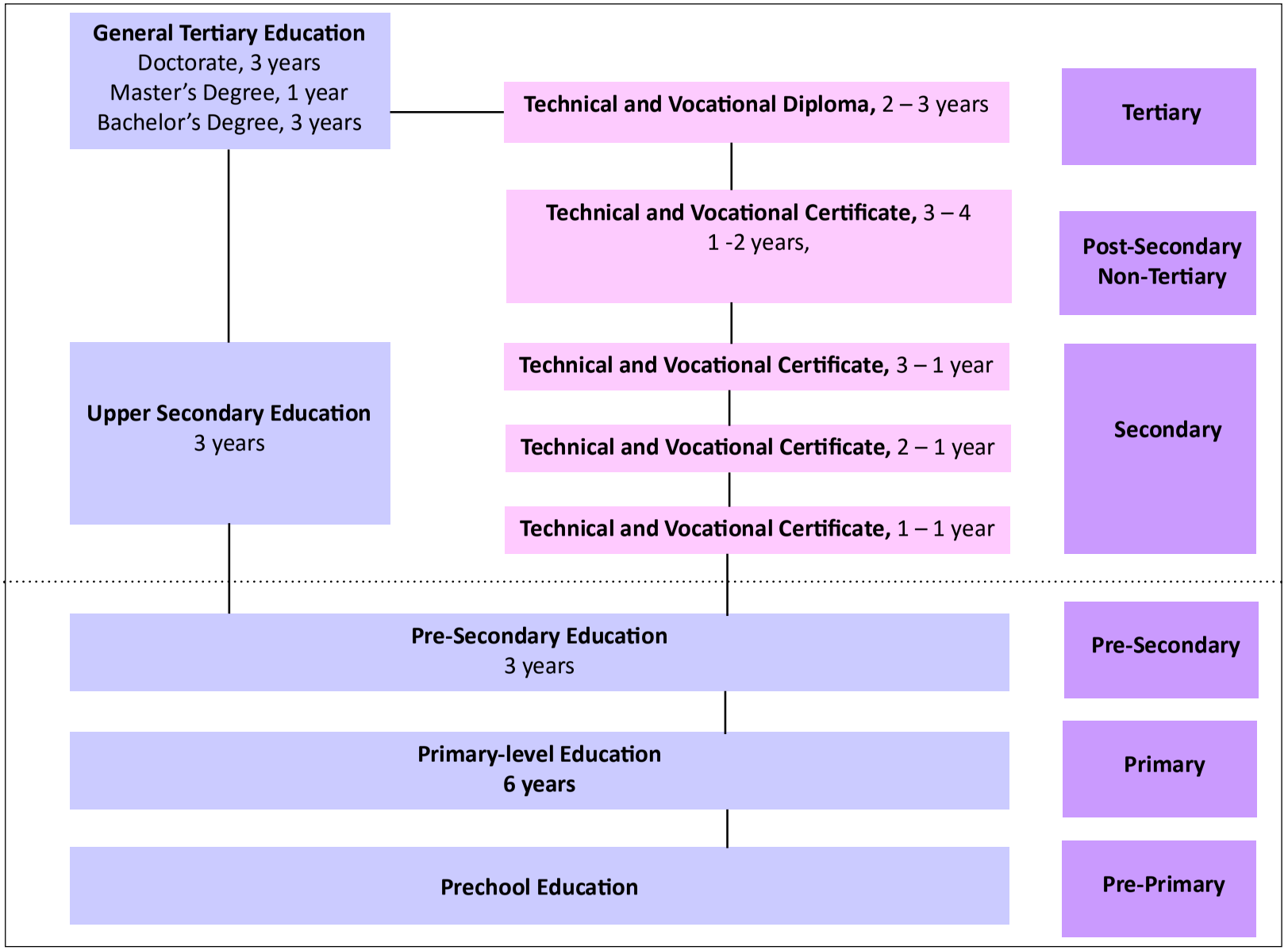
[5] https://ilostat.ilo.org/resources/concepts-and-definitions
[6] https://data.un.org/Glossary.aspx?q=)

Life expectancy (at birth) [3]	The number of years a newborn infant would live if prevailing patterns of mortality at the time of its birth were to stay the same throughout its life.
Fertility	
Total fertility [3]	The average number of children a hypothetical cohort of women would have at the end of their reproductive period if they were subject during their whole lives to the fertility rates of a given period and if they were not subject to mortality. It is expressed as children per woman.
Total fertility rate (TFR) [3]	Refers to the average number of children a hypothetical cohort of women would have at the end of their reproductive period during their lifetime if they were subject to experiencing the ASFRs (Age Specific Fertility Rate) of a given period. It is calculated by summing the ASFRs and multiplying the sum by the width of the age interval. Sex ratio: the number of males per 100 females in the population.
Education	
Literacy [2]	A literate person is one who can both read and write a short, simple statement on his or her everyday life. An illiterate person is one who cannot, with understanding, both read and write such a statement.
Education level [2,3]	The highest level of an educational programme the person has successfully completed. The following categories are used in the census with regard to education: • Kindergarten • Primary • Pre-secondary • Secondary general • Secondary technical • Polytechnic / diploma • University bachelor • University master • University Phd
Economic activity status	
Labour force status [1]	Persons may be classified in a short reference period according to their labour force status as being in employment, in unemployment, or outside the labour force; and among these, in the potential labour force.
Persons outside the labour force [1]	Persons outside the labour force comprise all persons of working age who, during the specified reference period, were not in the labour force (that is, were not employed or unemployed). The working age population is commonly defined as persons aged 15 years and older, but this varies from country to country. In addition to using a minimum age threshold, certain countries also apply a maximum age limit.
Wealth and poverty	
Housing unit [2]	A housing unit is a separate and independent place of abode intended for habitation by a single household or one not intended for habitation but occupied as living quarters by a household at the time of the census. Thus, it may be an occupied or vacant dwelling, an occupied non-conventional housing unit or any other place occupied as living quarters by a household at the time of the census.

Household [2] (Private household)	A household is defined as one or more persons who usually share their dwelling and their principal meals or other essentials for living. A household may be either: • A one-person household, that is to say, a person who makes provision for his or her own food or other essentials for living without combining with any other person to form part of a multiperson household. or • A multiperson household, that is to say, a group of two or more persons living together who make common provisions for food or other essentials for living. The persons in the group may pool their resources and have a common budget; they may be related or unrelated persons or a combination of persons, both related and unrelated.
Living quarters [2]	Living quarters are structurally separate and independent places of abode. They may: 1) have been constructed, built, converted or arranged for human habitation, provided that they are not at the time of the census used wholly for other purposes and that, in the case of non-conventional housing units and collective living quarters, they are occupied at the time of the census; or 2) though not intended for habitation, were in use for such a purpose at the time of the census.
Collective households [2]	Collective households are groups of people who, although usually not united by relations of marriage, blood, adoption or fostering, live together in a collective living quarters for purposes of schooling, health, detention, welfare or other reasons.
Collective living quarters [2]	Collective living quarters include structurally separate and independent places of abode intended for habitation by large groups of individuals or several households and occupied at the time of the census. Such quarters usually have certain common facilities, such as cooking and toilet installations, baths, lounge rooms or dormitories, which are shared by the occupants. They may be further classified into hotels, rooming houses and other lodging houses, institutions and camps.
Ownership of dwelling [2]	The following types of ownership are considered • Individually owned • Family-owned property • Community- or suco-owned Property • Government-owned property • Church property • Other

Household headship	
Head of household [2]	The head of the household is the person who generally makes key decisions and is recognised by all household members as the head of the household. The head of the household may be female or male.
Disability	
Disability status [2]	Disability status characterises the population into those with and without a disability. Persons with disabilities are defined as those persons who are at greater risk than the general population for experiencing restrictions in performing specific tasks or participating in role activities. This group would include persons who experience limitations in basic activity functioning, such as walking or hearing, even if such limitations were ameliorated by the use of assistive devices, a supportive environment or plentiful resources. Such persons may not experience limitations in specifically measured tasks, such as bathing or dressing, or participation activities, such as working or going to church or shopping, because the necessary adaptations have been made at the person or environmental levels. These persons would still, however, be considered to be at greater risk of restrictions in activities and/or participation than the general population because of the presence of limitations in basic activity functioning and because the absence of necessary accommodations would jeopardise their current levels of participation.
Type of disability [2]	Washington Group questions on functional limitation were used to specify the type of disability (Washington Group on Disability Statistics, 2022). The Washington Group questions discern between the following types of functional limitations: • Walking • Seeing • Hearing • Cognition • Self-care • Communication

Annex 2. Timor-Leste education system



Contributors to Thematic Report - Gender

Name and Institution	Contribution
Mr. Elias dos Santos Ferreira, The President of the National Institute of Statistics of Timor-Leste (INETL, I.P.,) Ministry of Finance	Project Administration and Coordination
Mr. Silvino Lopes Director National Statistics Directorate	National Census Coordinator
Mr. Ricardo dos Santos Cruz Director National Statistics Directorate	Deputy Census Coordinator
Mr. Lourenco Soares Chief Data Processing	Data Collection Manager
Mr. Helder Henriques Mendes Chief Publicity and Advocacy	Chief of Publicity and Advocacy Campaign
Mrs. Paulina Rita Viegas INETL, I.P.,	Information Technology Services
Mr. Francelino Leão Freitas INETL, I.P.,	Information Technology Services
Mr. Alipio Cardoso Moniz INETL, I.P.,	Produced maps for monographs
Mr. João Soares Gusmão INETL, I.P.,	Produced maps for monographs
Mr. Silveiro Martins Pinto INETL, I.P.,	Administration and Finance
Mr. Domingos Sebastião Freitas INETL, I.P.,	Design and Typesetting Thematic Report
Photo Cover	© INETL, I. P

Continued

Name and Institution	Contribution
Mrs. Navcha Suren, UNFPA Representative	Report Reviewer
Mrs. Domingas Bernardo Assistant Representative UNFPA	Report Reviewer
Mr. Egidio da Costa, Population and Development Program Analyst, UNFPA	Report Reviewer
Secondinho Salsinha, Monitoring and Evaluation Program Officer UNFPA	Report Reviewer
Mrs. Angela Msosa UNFPA Timor-Leste Technical Adviser Census Project	Report Reviewer
Mrs. Flora (wai Shan Chan, Governance, Peace & Security Programme Analyst UN Women	Report Reviewer
Mr. Frank Eelens UN Women Individual Consultant	Author of Gender Thematic Report

INETL, I.P. = Instituto Nacional de Estatístistica de Timor-Leste, Instituto Publico

Contact

Telefone: +670 3311348

E-mail: dge@mof.gov.tl

Wesite: https://inetl-ip.gov.tl