

# HARNESSING WOMEN-LED SOCIAL VENTURES FOR HEALTH EQUITY AND RESOURCE-BASED SELF-SUFFICIENCY IN AFRICA: A SYSTEMATIC REVIEW ALIGNED WITH SDG 3

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## Abstract

This study examines the role of women-led social ventures in promoting health equity and driving Africa's resource-based self-sufficiency, aligned with Sustainable Development Goal 3 (SDG 3). These ventures are critical in delivering maternal and child health services, disease prevention, and improved healthcare access, they often face barriers such as limited funding, gender bias, and policy exclusion. These challenges undermine their scalability and long-term impact, especially in underserved African regions. A systematic review of 26 peer-reviewed articles published between 2019 and 2024 was analysed using the PRISMA framework, with data drawn from Google Scholar and ResearchGate. Findings reveal that women-led social enterprises use gender-sensitive, community-driven approaches to address health disparities, acting as grassroots engines of innovation and resilience. The study concludes that supporting these ventures through inclusive policies and strategic investments can strengthen local health systems and reposition African resources toward sustainable self-sufficiency, advancing both gender equity and public health development.

**Keywords:** Women-led social ventures, Sustainable Development Goal 3 (SDG 3), global health, maternal and child health, healthcare disparities.

## 1.0 INTRODUCTION

In 2015, the United Nations adopted the Sustainable Development Goals (also known as SDGs), and this signified the global-level commitment to respond to interrelated issues, including poverty, inequality, and health disparities. Among them, Sustainable Development Goal 3 (SDG 3) is specifically aimed at making sure that healthy lives are being ensured and well-being of all that is attained regardless of age (United Nations, 2015). The only way to accomplish this ambitious objective is inclusive, innovative, and community-based strategies, especially in marginalized and underserved areas. Social ventures are an important organizational framework that integrates fiscal stability with social influence, providing innovative responses to the health challenges that are faced across the world (Kumar & Devi, 2023). In this sense, the social ventures with a female

touch have been singled out to contribute uniquely to the global health development process. These are projects, which allow addressing long-term health disparities through leadership, lived experience and situational understanding of female business owners. Community trust and tailoring of health intervention to fit any social-cultural setting has enabled women-led programs to make an important contribution to maternal and child health outcomes, access to reproductive health services, and the development of awareness about mental health (Chatterjee & Banerjee, 2021). A research study by Kickul, Griffiths, & Gundry, (2018). It is observed that such projects have the propensity to integrate these aspects of health, education and economic empowerment and lends credence to the multidimensional agenda of SDG 3. The social ventures led by women have giant structural and institutional barriers notwithstanding their contribution. Their capability to develop and sustain useful health interventions is also hampered by gender discrimination and inaccessibility of finance, as well as widespread patriarchal culture (Matthias & Bohlin, 2022). However, it is also worth mentioning that the statistics provide that of all money invested into ventures, less than 20 percent of them goes to women entrepreneurs, which constrains their opportunities to develop their business (Brush, Greene, Balachandra, & Davis, 2018; Karanja & Ndugu, 2020). Women start-ups are also marginalized in most patriarchal societies because societal norms and discrimination do not give women a chance to occupy leadership roles (Estrin & Mickiewicz, 2020). These obstacles will have to be dealt with so as to leverage fully on the revolutionary impact that women led social ventures have in the achievement of equitable health outcomes. The COVID-19 pandemic also demonstrated the necessity of women-powered social ventures. When formal health systems became overwhelmed, these efforts sprung into gear to supply protective gear, share correct health information, and offer mental health assistance, at the local community level (Alon, Doepke, Olmstead-Rumsey, & Tertilt, 2020). Their responsiveness highlights the urgent need of local, gender-responsive health responses in crisis and in general. In this research, an attempt is made to investigate the contribution of women-led social ventures to the global health outcomes in accordance with SDG 3. In particular, it examines their strategic practices, the issues that they face and the spheres of influence that they exert in tackling the health disparity. Given the theme of gender, innovation, and community involvement, this study adds to the literature on social entrepreneurship and health equity, which is currently increasing. Subsequently, the paper is organized into structured analysis starting with the rationale and objectives of the research study, the review of the literature in a systematic manner, description of methodology, as well as presentation of main findings, implications and directions of further research.

## **2.0 Literature Review**

### **2.1 Social Ventures**

Social ventures are multi-sectoral organizational frameworks that combine business approaches with social objectives, wishing to engage with societal problems in the form of financially viable solutions. These models became very popular in recent years due to the possibility to invest and build a great impact. De Cuyper (2024) classifies the social ventures depending on the strategic business models that generate value via the mix of commercial goals and social goals. Social purpose and financial viability will continue to be key to their success. The desire to establish social ventures is usually driven by very strong personal value and social identities. Madjdi and Zolfaghari (2022) reveal that entrepreneurs with other-oriented motivation tendencies possess their

own specific patterns of opportunity assessment and venture building unlike entrepreneurial self-oriented motivational types. The value decisions made in such directions are critical in determining venture directions, especially when it involves the formative stage of an enterprise.

It has been empirically established that social innovation practices can enhance the achievement of sustainability objectives amongst small and medium-sized enterprises (SMEs) (Ogbari, Ingomowei & Amahian, 2025; Dada, Adegbuyi & Ogbari, 2023). As an example, in Lagos State, the findings show that a positive relationship exists in the practices of social entrepreneurship and financial stability as well as social responsibility. This further confirms the impression that companies that have combined social impact with profit motives are in a better position to record desirable sustainable development outcomes. It is necessary to be aware of the operations structures, incentives, and strategies characteristic of social ventures (Nwankwo & Okoro, 2019; Olaolu & Nwogu, 2021). These dimensions not only determine their success but their level of contributions and input to the wellbeing of society.

## **2.2 Women-Led Social Ventures**

Women-led social enterprises have developed as an influential force to change in the context of complex health-related problems in a variety of worldwide settings. The community participation in health activities can usually be based on personal experiences and a detailed perception related to the needs of the locals. According to Adebayo and Adeyemo (2020), women are more likely to start business in the spheres of maternal healthcare, reproductive health, and access to clean water, which correlate directly with their socio-cultural stratification and the aspect of care provision. The sustainability of the initiatives of women entrepreneurs is further boosted by having inclusive leadership styles. Dube and Ramaswamy (2022) claim that women leaders are characterized by collaborative and community-based strategies that result in stakeholder empowerment and long-term change. The above strategies can be considered highly consistent with the SDG 3 mission that focuses on the enhanced health outcomes of all. Women-led social enterprises have developed as an influential force to change in the context of complex health-related problems in a variety of worldwide settings. The community participation in health activities can usually be based on personal experiences and a detailed perception related to the needs of the locals. According to Adebayo and Adeyemo (2020), women are more likely to start business in the spheres of maternal healthcare, reproductive health, and access to clean water, which correlate directly with their socio-cultural stratification and the aspect of care provision. The sustainability of the initiatives of women entrepreneurs is further boosted by having inclusive leadership styles. Dube and Ramaswamy (2022) claim that women leaders are characterised by collaborative and community-based strategies that result in stakeholder empowerment and long-term change. The above strategies can be considered highly consistent with the SDG 3 mission that focuses on the enhanced health outcomes of all.

## **2.3 Sustainable Development Goal 3 (SDG 3)**

SDG 3 is the worldwide universal commandment to follow the actions to achieve the healthy life and well-behavior of all members of all ages. It focuses upon an extensive number of health issues, among which there are maternal and child health, communicable diseases, mental health, and universal health coverage (United Nations, 2020). The achievement of this objective depends on

the equitable access to high-quality health care, especially in the low-resource areas. Social ventures led by women are important in achieving SDG 3 since they help in eliminating systemic factors that keep healthcare out of reach. Their actions usually focus on maternal wellbeing, reproductive justice, and water and sanitation sectors in which the gender inequality is the greatest (Kumar & Sinha, 2021). Such initiatives also work well towards improving community resilience in areas where there is little or no public health infrastructure. The partnerships between women-led business ventures and their governments, non-government organizations (NGOs) and communities also promote the effectiveness and sustainability of the health intervention. The gender sensitive practices in these businesses have been identified to enhance the results of women and children (Cheng, Li, & Zhou, 2022). The emphasis on health education and prevention of health-related problems is not only working to enhance personal literacy in health, but it also reduces system inequalities (Hechavarrria, Terjesen, Stenholm & Branningback, 2019). Appropriating the entrepreneurial innovation towards public health outcomes, the social ventures headed by women act as powerful entities through which inclusive and sustainable health systems can be formed. They have more to offer than providing health services; they contribute to influencing policy, rallying the community, and establishing the interrelationship between gender equity and health promotion on SDG 3.

### **3.0 Methodology**

The study involved a systematic review method as outlined in the Preferred Reporting Items to Systematic Reviews and Meta-Analyses (PRISMA) recommendations. Empirical and theoretical literatures on women-led social ventures and their role on the global health outcomes were reviewed, specifically their contribution to Sustainable Development Goals 3 (SDG 3). It was aimed at synthesizing evidence on recent studies with the aim of determining the strategic thinking, challenges and outcomes of health-related women-led social enterprises.

#### **3.1 Search Strategy**

The study conducted a thorough literature review through electronic databases such as Google Scholar and ResearchGate that meet a five-year publication period (2019-2024). A combination of applicable keywords and Medical Subject Headings (MeSH) was also employed to generate the search strategy; i.e.: “Women-Led Social Ventures,” “Social Ventures,” “Global Health Outcomes,” and others. To improve the search and remove irrelevant results, the use of Boolean search operators and filters were to be used.

#### **3.2 Inclusion and Exclusion Criteria**

To ensure relevance and rigor, studies were selected based on the following inclusion criteria:

- Focus on women-led social ventures, social innovation, and health-related outcomes.
- Direct relevance to SDG 3 and its core themes such as maternal health, infectious disease control, and healthcare access.
- Publication within the 2019–2024 timeframe.
- Availability of full-text articles in the English language.

Studies were excluded based on the following:

- Articles older than five years.
- Studies not written in English.
- Irrelevant to the study objectives or lacking the identified keywords.
- Literature with insufficient analytical depth or without a well-defined review component.

### 3.3 Study Selection and Screening

An initial pool of 35 articles was identified through keyword-based database searches. After the removal of 3 duplicate records, 30 unique studies were subjected to title and abstract screening. Of these, 2 articles could not be retrieved, and 10 were excluded due to irrelevance, outdated publication years, or inadequate scope. A total of 26 articles were selected for full review and synthesis. The article selection process is illustrated in the PRISMA flow diagram (Fig. 1).

### 3.4 Data Extraction and Quality Assessment

Data were independently extracted from each article using a predefined template capturing the following variables:

Author(s) and year of publication

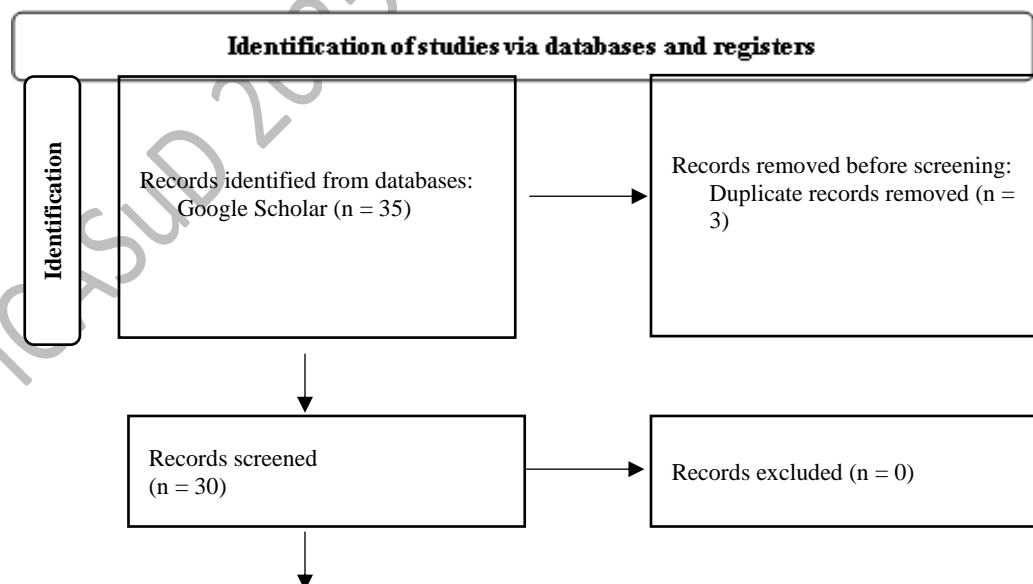
Title and objectives

Conceptual definitions and theoretical frameworks

Key findings and results

Conclusions and recommendations

Although formal bias assessment tools (e.g., Cochrane Risk of Bias) were not applied, only peer-reviewed articles with clearly stated methodologies and results were included to enhance credibility.

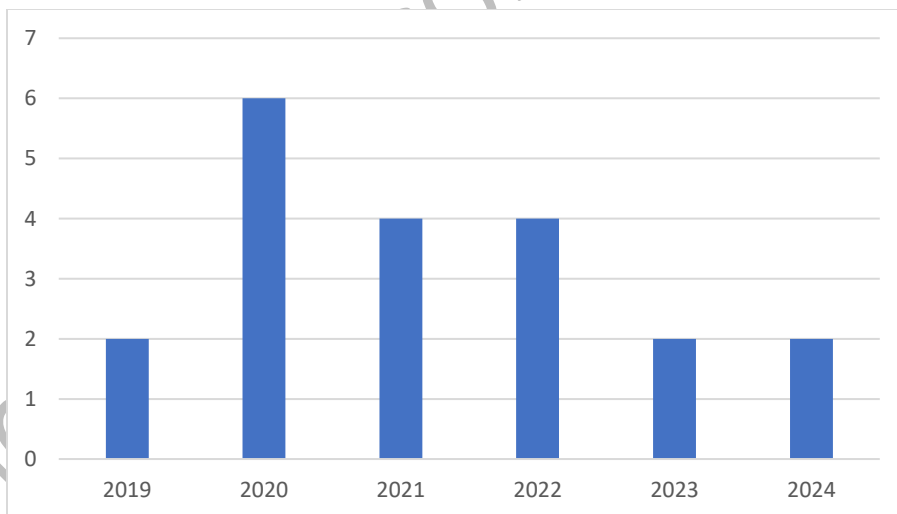




**Fig.1 PRISMA Flow Diagram**

### 3.5 Year-Based Analysis of Publications

The year-wise distribution of selected studies indicates that the highest number of publications (n = 6) appeared in 2020, followed by 2021 and 2022 (n = 4 each). The years 2019, 2023, and 2024 had the lowest representation, with one to three publications each. This pattern suggests a recent and growing scholarly interest in the intersection of gender, social entrepreneurship, and health outcomes, particularly in the post-COVID-19 context. The year-wise trend is presented in Figure 2.



**Fig. 2 Year Wise Publications**

## 5.0 DISCUSSION

The results of the study indicate the importance of women-led social ventures to the enhanced global health status of population in underserved regions. The literature considered repeatedly proves the fact that the above ventures focus on maternal and child health, sanitation, mental health, and prevention of communicable diseases, which directly relate to the goals of Sustainable Development Goal 3 (SDG 3). Women entrepreneurs are also depicted taking community-oriented paths, which helps them to utilize the local knowledge, trust networks, and culturally conscious practices to improve the access to healthcare and its efficiency (Hechavarrria *et al.*, 2019; Kickul *et al.*, 2018). One of the insights captured repeatedly is how these ventures can transform health disparity within a structure by engaging in inclusive and gender equitable interventions. With such research, this is in tandem with studies that focus on the fact that female social entrepreneurs are more apt to consider social missions that relate to the needs of the vulnerable community (Adebayo & Adeyemo, 2020). They often serve as mediators between official health services and what happens on the ground with non-traditionals offering new services like mobile clinics, health education, and mental health outreach initiatives (Mwangi & Wanjiru, 2021). It is also evident in the discussion that there are institutional and operations challenges among these ventures. These include only a few funding options, gender biases, and inexistence of policy support among others, which form the main hindrances of scalability and long-term sustainability. Although the importance of women as subjects in health innovation is becoming more widely acknowledged, their access to venture capital is small in relation to the total investment across the world, i.e., less than one-fifth of the total investment is received by women (Brush *et al.*, 2018). Their entrepreneurial potential and leadership influence have further limitations and restraint in the patriarchal societies by the social rules and regulations (Estrin & Mickiewicz, 2020). Interestingly, the COVID-19 pandemic evolved as a trigger to present the flexibility and need of females-led social organizations. These Gigs came to the rescue shortly to deliver much needed health services comprising of personal protective equipment (PPE), perfect health messaging, and community-based mental healthcare (Alon *et al.*, 2020). The active involvement confirms the imperativeness of localized and inclusive health models in the maneuvering of health emergencies. The existence of a positive relationship between the existence of women-led ventures, and their result in positive changes in essential health indicators (reduction in maternal mortality and better utilization of healthcare services) can be traced by quantitative sources reviewed. These findings lend credence to the case that women empowerment in the social entrepreneurship within the social entrepreneurship platform is an issue of gender equity as well as a strategic initiative to achieve sustainable health systems. This paper confirms that, social ventures launched by women are pivotal drivers of change when it comes to realization of SDG 3. Their strategies combine the empathy and innovation to suggest the interventions that will be both effective and sustainable. But to achieve their full potential, there will need to be conscious efforts to tear down systemic obstacles and offer special assistance of funding, training, policy correlation.

## 6.0 CONCLUSION AND IMPLICATIONS

The significance of female initiator social entrepreneurship in shifting the health results in line with SDG 3 at a global scale is underscored in this paper. Such projects can assist with improving the health of mothers and children, prevention of diseases, and access to health care among underprivileged populations. They implement the use of novel, sustainable health intervention, by

establishing community engagement and practice that is gender sensitive. However, availability of funds, genderizations and limitations of the policy always restrict their scale. These barriers are essential to break through with the help of positive models and investments to guarantee the most favorable impact on the global medical justice. The research of this paper expands the body of literature by providing a synthesized picture of the gender, innovation, and social venture systems-developed by female leaders to solve social problems in the field of public health. It highlights the strategic use that the ventures provide to the global health systems and provides a basis of reconsideration of how health-related social entrepreneurship can be useful in implementing SDGs. In practice, the work informs policymakers, investors and development actors interested in empowering women entrepreneurs as health innovation and equity agents.

## 7.0 LIMITATIONS AND FURTHER STUDIES

Nevertheless, some limitations associated with the research also include the collection of secondary data, which would exclude potential studies that may be found in more meaningful databases such as Google Scholar and ResearchGate, all because of the lessons learned. Additionally, not every synthesized evidence can be generalized due to absence of any empirical field work. To advance on the research, further studies are expected to expand the framework by including such comparative case studies conducted on various regions and primary data collection in the form of an interview or mixed methods. The exploration of sector-specific obstacles, digital innovation to promote ventures run by women, and the legacy of the policy interventions to support the woman-owned ventures will add value to the discussion. An emphasis on Longitudinal analysis may also help to bring out the sustainability path in such enterprises and how they have currently incorporated an input in the health systems.

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## AUTHOR DECLARATIONS

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## Data Availability Statement

Data sharing is not applicable to this article.

## Conflicts of Interest

The authors declare no conflict of interest.

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