Commission on the Status of Women
Fifty-third session
2-13 March 2009
Agenda item 3 (a) (i)
Follow-up to the Fourth World Conference on Women and
to the twenty-third special session of the General Assembly
entitled “Women 2000: gender equality, development and
peace for the twenty-first century”: implementation of
strategic objectives and action in critical areas of concern
and further actions and initiatives: the equal sharing of
responsibilities between women and men, including
caregiving in the context of HIV/AIDS

Panel discussion on key policy initiatives on the equal
sharing of responsibilities between women and men,
including caregiving in the context of HIV/AIDS

Moderator’s summary

1. At its third meeting, on 3 March 2009, the Commission on the Status of
   Women held an interactive panel discussion on the theme “Key policy initiatives on
   the equal sharing of responsibilities between women and men, including caregiving
   in the context of HIV/AIDS”. The panellists were: Patricia Espinosa Torres,
   Ministry of Labour and Social Welfare, Mexico; Marilyn Waring, AUT University,
   New Zealand; Joseph Aimé Bidiga, Permanent Secretariat of the National Council to
   Combat HIV/AIDS, Burkina Faso; and Shahrashoub Razavi, United Nations
   Research Institute for Social Development (UNRISD). The panel was moderated by
   Ara Margarian (Armenia), Vice-Chairperson of the Commission.

2. Efforts to address the unequal sharing of responsibilities between women and
   men are part of the overall global agenda for the promotion of gender equality,
   women’s enjoyment of their human rights and the empowerment of women and
   girls. Commitments towards the equal sharing of responsibilities between women
   and men, including caregiving in the context of HIV/AIDS, have been made by
   Governments in a number of forums, including at the Fourth World Conference on
   International human rights treaties, especially the Convention on the Elimination
   of All Forms of Discrimination against Women and the Convention on the Rights of
the Child, contain obligations for States parties to promote the equal sharing of responsibilities between women and men.

3. Participants noted that in order to achieve the equal sharing of responsibilities, issues related to unpaid care work, the reconciliation of work and family responsibilities and caregiving in the context of HIV/AIDS had to be addressed. While the importance of care work for human capital formation, the maintenance of the social fabric of society and for social development and economic growth was stressed, time-use surveys had shown that women and girls performed most of the unpaid work, including domestic and care work. However, since unpaid work was not included in the United Nations System of National Accounts, this form of work was not counted in gross domestic products and therefore remained invisible. Owing to the unequal sharing of those responsibilities, women had fewer opportunities to take on paid employment and continued to be over-represented in part-time, casual and temporary work. They also had less time for education and training, leisure and self-care, and political activities.

4. Participants noted the need to share responsibility for care work more evenly within households and across society. Since care was provided through a variety of social relations and institutions, including the household, the State, the market and the not-for-profit sector, there was also an opportunity for increased involvement by all stakeholders in this work. The State had a critical role in providing social services, in regulating non-State service providers and in subsidizing services for those with low incomes. However, participants also voiced their concern that the current crisis, as had been the case in past economic crises, was leading to a shift in the provision of services from the market to the unpaid sector, especially with regard to care work.

5. Participants highlighted a range of policy initiatives, strategies and measures to encourage the equal sharing of responsibilities between women and men. The critical importance of enhancing legal frameworks to eliminate discrimination against women, to strengthen women’s participation in public life and decision-making and to address all forms of violence against women was stressed.

6. Social policies, especially those that provided for universal education and health care, constituted a major contribution towards a reduction in women’s responsibilities for unpaid care work and enhanced their opportunities for paid work and other activities. State-provided or publicly funded child- and elder-care services, as well as care for the sick, reduced the need for women to provide unpaid care for family members. Such public services could have a triple pay-off by providing quality care, creating paid employment in the care sector and enhancing women’s opportunities to engage in paid work.

7. Improvements in the area of labour law aimed at achieving equality in the workplace and at preventing and addressing sexual harassment had resulted in larger numbers of women in paid employment. The impact of such efforts was further enhanced when they were accompanied by policies and measures to facilitate the reconciliation of paid and unpaid work, for example by providing maternity leave, paternity leave and parental leave. Leave entitlements for the care of young children for both or either parent, as well as measures that required the father to make use of parental leave or to forfeit it, were seen as promising strategies to encourage men to share responsibilities. While there had been some positive experience with such
provisions, participants also voiced concern about the low take-up rates of paternity and parental leave by men.

8. Participants discussed a range of measures that recognized the value of women’s unpaid domestic and care work. In many instances, such measures were aimed at promoting the sharing of responsibilities as well as addressing poverty and enhancing social protection for women and families. Social assistance programmes, such as cash-transfer schemes and cash benefits in the form of family and child allowances, were sometimes targeted at poor families or vulnerable groups to enhance their health and well-being. When combined with training opportunities, they facilitated women’s participation in paid employment. Recognizing unremunerated work for purposes of old-age pensions was another strategy that primarily benefited women.

9. Investing in appropriate infrastructure, including in the areas of water, sanitation and electricity, was another strategy that facilitated unpaid care work and reduced time use, especially in the context of the HIV/AIDS pandemic. However, participants also expressed concern at the lack or insufficiency of resources, especially in times of crisis, for adequate investments in infrastructure and the social sector, including those aimed at achieving the sharing of responsibilities and at reducing the burden of care work. Participants called for greater priority for, and enhanced international cooperation in support of, such investments, with a view to the achievement of the related Millennium Development Goals.

10. The HIV/AIDS pandemic created new and unprecedented caregiving responsibilities for women, especially when public health systems were weak or underfunded. Girls who dropped out of school to care for those living with HIV/AIDS or for orphaned siblings, had fewer opportunities for decent paid work in future. Older women increasingly had to care for ailing adult children, as well as orphans. Policy responses to support such caregiving, including through investments in infrastructure and public health systems, were therefore urgently needed. The growing role of home-based care organizations in providing care that overburdened public hospitals and clinics could not provide was one response. At the same time, volunteers providing home-based care required training and other support and resources to enhance their capacities for delivering this essential service.

11. Participants called for a renewed effort to reflect unpaid work in systems of national accounts, as this would clarify and highlight the value of such work and contribute to better and more targeted policies. They also stressed the need to target policies aimed at the equal sharing of responsibilities at different groups of women and girls so as to respond adequately to their particular situations. Rural women, for example, had, in general, less access to services than women living in urban areas. Domestic workers often came from disadvantaged groups, such as migrant or ethnic-minority women, and were frequently in positions of great vulnerability, with low pay and no benefits. Since women’s illiteracy rates remained higher than those of men, their ability to benefit from skills training and education also remained constrained.

12. Initiatives were needed to enhance the economic value of care work in general, which continued to be less well paid than work requiring comparable skill levels in non-care-related occupations. Such efforts would enhance the value attributed to care work and benefit women directly, as they commonly constituted a majority of paid care workers in a country.
13. Participants underlined the fact that policies and strategies aimed at the equal sharing of responsibilities should place greater emphasis on the role of men and boys. While the role and presence of women in the labour market had increased, men and boys had not assumed a commensurate role in domestic and caregiving work. Strategies should therefore include enhanced gender-sensitive education programmes, as well as training and awareness-raising.

14. Participants identified the persistence of gender stereotypes and of stereotypical assumptions about the roles of women and men in society as one of the major obstacles to the achievement of gender equality and a major cause of the unequal sharing of responsibilities between women and men. Policies should therefore address such stereotypes.