United Nations
Division for the Advancement of Women
Expert Group Meeting on “Equal sharing of responsibilities between women and men, including care-giving in the context of HIV/AIDS”
United Nations Office at Geneva
6-9 October, 2008

Engaging Men and Boys in Caregiving: Reflections from Research, Practice and Policy Advocacy in Latin America

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* The views expressed in this paper are those of the author and do not necessarily represent those of the United Nations.
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“We all [referring to the other men in the room] know how to care for children, change diapers and all that. I used to take care of my brothers and sisters when my mother was out, and my nieces and nephews....”
Young father, slum area, Rio de Janeiro, interviewed September 2008

“If we give more time off for men for paternity leave, they’ll just go fishing ...” Norwegian woman researcher, 1995

“If we give men more time off for paternity leave in Brazil, they would take a second job. They’ll take their paid leave and work a second job to make extra money.” Male participant at seminar in Rio de Janeiro, 2007

“If we give men more time off for paternity leave, they’ll just make more work for us women.” A woman participant in the same seminar

“If we have men working in day care centers, don’t we have the risk of more sexual abuse? I mean if they give baths to young children ....” Female public health worker, city of Rio de Janeiro, 2006

Introduction

These comments – overheard in discussions and seminars in the past few years – give a sense of the challenges and the multiple social expectations related to men and caregiving, in Brazil and elsewhere. They highlight the extent to which promoting equal responsibilities between men and women in caregiving is at the heart of one of the most challenging and lingering aspects of gender inequality: the historical social division of labor. These quotes also illustrate how our understandings of men – and their willingness to or resistance to participating in caregiving – are frequently rooted in myths and misunderstandings.

Whether in seminars or in the daily conversations of women and health or child care service providers, and often in research, men are frequently portrayed incompletely or as deficient or irresponsible in family life and caregiving. It is possible, of course, to make a list of men’s commonly perceived “deficiencies” in relation to their families, ranging from not providing child support, to limited involvement in domestic chores and the care of children and others. Time use studies and household surveys have confirmed, virtually worldwide, the imbalances in caregiving and the consequences of these inequalities in the lives of women, children and men themselves.

But this research and these discourses of deficient and non-caring men tell only one part of the story, and too frequently seek to blame or focus on individual men without adequately questioning the social and contextual constructions of gender relations that are behind the inequalities. In recent years, researchers have begun to include men’s own perspectives of their roles in families and as caregivers and in the process uncovered important nuances. Much of this research is affirming that men participate in caregiving, in their own ways, more than is commonly thought, and has offered insights on the challenges to promoting greater equality in caregiving (NCOFF, 2002; Brown & Chevannes, 1998).

This paper will provide some reflections about engaging men and boys in caregiving, including caregiving in the context of HIV/AIDS. By caregiving, in this article we refer to the care of children, the maintenance of the household, and the care of others in the household. I will focus more on research from the Americas region, particularly from Brazil, with examples from other countries as appropriate. I also affirm from the start that these reflections come from the perspective of a Brazilian NGO that carries out research, program development and activism to engage men and boys in gender equality. And I acknowledge my own bias as a father, partner and full-time co-provider who is seeking to achieve gender equality at home, and a work-life balance, even as I come to the daily realization about how complicated that is to achieve.

**Brief Overview of Research on Men and Caregiving**

In the case of Latin America, three major trends directly influence women’s and men’s work-life balance and their respective burdens of and participation in caregiving: (1) a large-scale increase in women’s participation work outside the home; (2) an increase in the percentage of households headed by women, or in which women are the primary providers; and (3) an increasing percentage of children who spend a significant proportion of the lives physically apart from their biological fathers.

In the past few decades, in nearly all of the LAC region, women’s participation in the formal labor market has increased, while men’s has either declined or remained about the same. Overall, men’s economic activity has declined in the region from 85 to 82 percent while female participation has increased from 40 to 46 percent (in Engle, 1997; Buvinic, Guiffrida & Glassman 2002). These trends have led to shifts in arrangements for childcare and have called into question men’s limited involvement in domestic tasks, including childcare. Men who feel they are not able to live up to social expectations of being providers are more likely to abandon their families, or may be expelled from the home in cases of use of violence against women, for example. On aggregate, what we see throughout the region is that women are working more – at home and outside the home – while men are working slightly less outside the home, and for the most part not yet taking on domestic activities in proportional ways.

Economic instability, declining wages (in some sectors, not all) and migration for work (both within countries and outside) are common realities for low income men and women throughout the region. To give just one example: there were about 6.6 million migrants from Latin America to all other countries in 2005, a little under half of which were men (International Organization on Migration, 2005). With men’s and women’s migration for work, and increasing rates of marital dissolution, there has been an increase in the number and percentage of women-headed households. Currently between 15 and 45 percent of households in Latin America and Caribbean are self-identified, in official data, as female-
headed, these either being two-parent households in which the woman is the primary provider or, more frequently the case, single-parent households headed by women (Sociometro, ND). The country with the highest proportion of female-headed households in Latin America is Brazil with 33.81 percent (Ibid). As a result of these trends, children are spending a larger proportion of their childhood living away from their biological fathers -- but not necessarily without a father figure or another adult male in the household.

At the same, throughout the region, fertility rates have dropped, and the average age at starting parenting has increased. This means that there are fewer children born per couple and that more children are born to parents who on average are older than their own parents were when they began parenting. For some men in the region, mostly middle class, fatherhood has become a more visible and recognized social function. For others, particularly low income men, economic challenges mean that they often feel obliged to migrate for work or feel unable to fulfill the socially expected role of provider and thus may be absent from their biological children’s lives.

**Men and Fatherhood**

With this backdrop, the following are some of the key findings from the growing body of research on men and fatherhood in the region:

**Men provide only a relatively limited proportion of the time spent in caring for their children, but some men are increasing their participation in caring for children.** In Guatemala, research finds that men spend about a third of the time that women do in caring for children (Alatorre, 2002). Data in the U.S. suggests that fathers’ availability for their children has increased from about one-half of that of mothers in 1980s to nearly two-thirds that of mothers in the 1990s (NCOFF, 2002). Longitudinal studies in the United States, Netherlands and Canada have pointed to an increase in involvement by men in parenting over the last decades (Pleck & Masciadrelli, 2004). To offer other examples, one study in Brazil showed that men in two-parent families spend almost the same amount of time as their partners on several areas of child interaction: playing, taking children to school and helping with homework. But in terms of direct care of children, men spend just 77 percent of the amount of time as mothers do (Benetti & Roopnarine, 2006).

**While some men in the region are assuming new or additional child care responsibilities, this does not necessarily reduce the burden on women, and many times men are seen as “helping” rather than being full partners.** Even when they take on these tasks, men often continue to see themselves as being able to opt out of certain aspects of domestic tasks or chores or child care (Vivas, 1993; Hernandez, 1996). As seen from this example from Brazil, various studies in Latin America and elsewhere confirm that fathers are more likely to be involved with recreation and play activities than in caregiving or in the education of children rather than in other direct care activities, such as bathing, or preparing food (Rendon, 2000).

**Social class and educational attainment seem to be key variables in men’s participation in the care of children.** A study in Chile found that low-income men spent less time with children than middle-income men and that the difference between men and women in terms of hours dedicated to childcare was greater among lowest-income men. Lower-income women dedicated six to seven times more time to childcare than low-income men, while among middle income groups, women spent about four times more time in childcare.
(SERNAM, 1998). For men and women overall in this study, women dedicated about 2.7 hours per day to childcare compared to 0.5 hours for men. On the other hand, other studies, from the Caribbean, Mexico and Brazil, suggest that lower income men may be more likely to participate in child care because of economic necessity. They may be out of work, have time on their hands, and not have the means to hire a child care worker.

**There has been little attention to the issue of men and their involvement in caregiving professions.** There are relatively few men in the LAC region who are in professions in which they provide care for younger children, such as in day centers or primary schools. Some researchers in the region have called attention to the lack of men’s presence in important spaces where children are socialized or spend time (day care centers, health centers and primary schools) as a source of gender inequality and rigid gender socialization. Indeed, the vast majority of childcare outside the home in the LAC region (and in most of the world) is provided by women, and the vast majority of teachers at primary level in the region are women. One study from the Caribbean argued that boys rarely see a man in a teaching or caring profession until the secondary level. In some settings in the region, there is a widespread belief that men do not know how to care for children, or that if men have more contact with young children, there will be a greater risk for physical and sexual abuse of children (Medrado, 1998). Also, the relatively low status given to the care of young children, and the fact that it is normally women who carry it out, means that salaries in those professions are low.

**There is a need for more research on fathers who do not live with their children.** With the exception of the Caribbean, research on the issue of fatherhood in the LAC region has tended to focus on fathers who live with their children; we know relatively little about non-residential fathers and their patterns of providing childcare and their involvement in their children’s lives. A study in Jamaica, for example, found that contrary to previous studies suggesting limited involvement, non-resident fathers visited their children 3.5 times per week, and often discussed the child’s needs with the mothers. While not providing “care” on a daily basis, they were clearly involved in their children’s lives (Barrow, 2001). Furthermore, little research looks at men’s lives in the role of others in the family – stepchildren, cousins, nephews and nieces. In extended family arrangements, which are common in parts of the region, men may have important roles in the lives of other children and in providing care for adults in the home.

**There is some research on men and pre-natal care and involvement in childbirth, which may be a gateway to more involved participation by men in child care.** A study in the US found that 27 percent of fathers in the U.S. were present in childbirth in the 1970s, compared to 85 percent in the 1990s (Parke, 1996, in NCOFF, 2002). In much of the LAC region, however, father participation in childbirth is still largely a middle class phenomenon, as is involvement in prenatal care. A study in Honduras found that in 95 percent of prenatal visits, women went alone or unaccompanied by a male partner (Alatorre, 2001). In a study of 438 adolescent women in Brazil, only 35 percent of their partners accompanied them to a pre-natal visit (Costa, et al, 2005). A study (using a non-representative sample) of middle class fathers in Mexico found that 19 of 55 fathers interviewed were present for their child’s birth; six out of 55 fathers said they wanted to be present at their child’s birth, but were denied this opportunity, suggesting that middle class men in some settings also face barriers should they want to accompany their partners during childbirth (Nava, 1995). For the most part, policies and public health programs in the region have not made a concerted effort to engage men either in prenatal care, nor in childbirth, which is yet another barrier to men’s
later involvement with their children. A national policy at the level of the Ministry of Health in Brazil gives women the right to be accompanied by a person of their choice during childbirth. Studies on the use of this right, however, found that overcrowded public hospitals, and uncooperative (or uninformed) health providers often ignore this policy and that probably fewer than 10 percent of women in public maternity wards are accompanied by the father of the child.

**Men and Domestic Chores in General**

As in the case of childcare, various studies in the region have confirmed that men’s participation in domestic chores in general is far less than women’s, although men’s participation seems to have increased slightly in the last few years in some settings. In Nicaragua, one study found that women devote 85 percent of the total time required for domestic chores, while men provide the remaining 15 percent (Alatorre, 2002). A sample survey in Chile with 400 men and women in low- and middle-income settings found that women dedicated about twice as much time to domestic tasks (including childcare and food preparation) per day as men. Looking at specific tasks, women on average dedicated five times more time per day to food preparation than men, eight times more time to housecleaning and five times more to childcare (SERNAM, 1998). As we would suspect, lower-income women dedicated more time overall to these tasks than middle-income women. **On the other hand, studies from the Caribbean and from Brazil suggest that some lower-income men share in domestic chores more than middle-income men, if not by choice then by necessity.**

In some cases, rather than decreasing the domestic burden, men’s presence can increase the amount of domestic work that women carry out. In a study in Chile, the presence of a man in the household increased by eight hours per week the average time that women needed to devote to domestic chores (Alméras, 1997). National household data in Brazil (IBGE, 2007) finds that 91 percent of women carry out domestic chores (21.8 hours a week on average) compared to 51 percent of men (who do an average of 9.1 hours per week). Adding domestic work with work outside of the home, women work on average 11.5 hours per day while men work on average 10.6 hours. For women with children under age 14, the presence of a man in the household increased her average weekly hours of domestic work by two hours.

Various qualitative studies suggest that even when men carry out domestic chores, they gain little or no identity or social recognition for it. Some men, as one study in Chile pointed out, try to carry out domestic work in clandestine ways so they do not “ruin their reputation” (Olavarria, 2000). Men may see their domestic work as a kind of gift to women, or as something to do on special occasions (if a spouse is ill or tired), but seldom as a question of justice or equality. Some men, research has found, may take on significant portions of domestic labor, including childcare, when they are out of work, and may even report this to be positive. However, as soon as they return to work, they may cease this activity (Olavarria, 2000). In a study in Central America, 94.4 percent of men said that men should “help” their partner with domestic chores (without specifying which chores). But when the same men were asked about washing dishes and changing diapers, 65.6 percent agreed that this was the woman’s duty (Hegg, et al, 2005).

**In the Caribbean, research suggests that some men may contribute in more ways than has commonly been assessed in domestic tasks, particularly when older children are too**
young to help out with childcare. As in the case of the research from Chile, many men offer ambivalent messages about this work, and generally only do it when women cannot. As Brown & Chevannes (1998) state:

“Such participation is rarely celebrated by men and not always by women, some of whom see a very domesticated man as ‘soft’ or as one who watches or criticizes everything the woman does in the home, thus intruding on her domain.”

Men and HIV-caregiving

Given the lower prevalence rates of HIV in the LAC region, caregiving related to HIV has been less of a focus of research and program development than in other parts of the world, particularly sub-Saharan Africa. According to the Global Coalition on Women and AIDS, up to 90 percent of the caregiving that is required due to HIV-related illness is provided in the home by women and girls. Among the limited research on the issue from the LAC region are two studies from the Dominican Republic and Mexico that found that married women with HIV often return to their parents’ home because they are unlikely to receive adequate care from their husbands (Rivers & Aggleton, 1998). In the case of those LAC countries where HIV has been concentrated among MSM, stigma and homophobia have sometimes been barriers to caregiving. Families of HIV-positive men may not recognize the male partners of their sons or relatives and thus may exclude partners from participating in caregiving during specific moments of illness. In other cases, families may abandon or shun their gay sons or relatives who are living with HIV/AIDS, thus cutting them off from potential sources of caregiving.

The Gender-Transformative Potential of More Equitable Caregiving

One key but often overlooked aspect and benefit of men’s involvement in the caregiving of children is the importance of such involvement as a way to promote gender equality among children. There is evidence from Western Europe and North America that positive father involvement increases the chance that sons will be more gender-equitable, and more nurturing as fathers, and that daughters will have more flexible views about gender as well (Levine, 1993; Russell & Radojevic, 1992). On the other hand, fathers can also be more rigid about gender roles of both sons and daughters than mothers. One study comparing children in father-present homes with fatherless homes (lesbian and single-parent versus heterosexual couples) found that boys in fatherless homes had no difference in terms of sexual orientation or gender identity but were more feminine in terms of gender roles or more equitable in attitudes towards gender than boys in father-present households (MacCallum & Golombok, 2004). Even so, various other researchers have concluded that the warmth or proximity of a child’s relationship with his or her father is correlated with non-traditional (more gender-equitable) definitions of masculinity in sons and in more progressive versions of femininity in daughters.

The fact that boys and girls from the earliest ages generally see women as being responsible for their care (whether their mothers, female relatives or female day care workers) is clearly one of the strongest sources of rigid and inequitable social norms related to caregiving. Thus, breaking this cycle and engaging men in caregiving is a key to promoting generational changes in the gender balance of caregiving. Sons and daughters who see and experience men involved in their caregiving, whether in the home or in day care centers or schools, are more likely to believe that caregiving is also a man’s responsibility.
Public Policies to Promote Men’s Caregiving

Nearly all countries in Latin America and the Caribbean offer some paid maternity leave. However, as of 2003, only eight countries (Argentina, Brazil, Chile, Colombia, Cuba, Guatemala, Paraguay and Uruguay) offered paid paternity leave, and leave ranged from only 2 to 8 days in duration (ILO, Conditions of Work and Employment Database). In some states in Brazil, state or government employees have 30 days of paid paternity leave. The Bahamas offers one week of family-related leave that can be used for paternity leave.

Data from Western Europe (mostly Nordic countries) where paid paternity leave has been offered for more than 10 years has confirmed that increasing numbers (and proportions) of fathers are using such leave and spending more time with their young children as a result of these policies, particularly when paternity leave is paid and when it is non-transferable to the mother (Valdimarsdóttir 2006). For example, Norway and Sweden have had progressive parental leave policies for nearly 20 years. In Norway, working parents are offered 42 weeks of paid Parental Leave. Until 1993, this parental leave could be shared on voluntary basis by either parent, but fathers on average used less than 5 percent of the time. In 1993, the law was changed to say that father had to use 4 weeks of this leave or the family lost it altogether. As a result, use of parental leave by fathers is now between 70 and 80 percent (Cohen, 2000). Similarly, in Sweden, working parents have a right to 12 months of paid parental leave (paid at 80 percent of their salary) to share between them. Prior to 1995, only 9 percent of total leave was used by fathers. The law was changed in 1995, to make one month non-transferable for each parent. As of 2000, 70 percent of fathers in Sweden use this month, with 12 percent of fathers using leave beyond one month. Use of the parental leave by fathers is higher among fathers with higher education and higher income; lower-income fathers say they cannot afford to lose 20 percent of their salary (Cohen, 2000).

Another area of policy development has been the registration and financial support of children. These policies in most countries have sought to hold men responsible for the financial support of children (particularly in cases of non-residential children), and to formally acknowledge paternity. Even in countries where such policies exist, enforcement is still an issue, and mothers in many cases may not want to register the father. Nonetheless, there have been advances reported as a result of these policies. One of the few studies showing the impact of a new law or policy on men’s behavior in terms of gender equity is Costa Rica’s Responsible Paternity Law, which includes awareness raising campaigns and public support for mothers to request DNA testing from men. The law led to a decline in the number of children with unrecognized paternity – from 29.3 per cent in 1999 to 7.8 per cent in 2003 (Centro de Análisis Sociocultural - Universidad Centroamericana, CEPAL & UNFPA, 2005).

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2 Promundo and the International Center for Research on Women, along with local partners in 6 countries, are in the process of carrying out a multi-country household survey on men’s participation in caregiving and men’s awareness of and attitudes toward existing policies to promote gender equality, including caregiving. This project, called the Men and Gender Equality Policy Project, will have initial results from the first 6 countries (Brazil, Mexico, Chile, India, South Africa and Croatia) ready for dissemination by early 2008. The survey instrument, called the International Men and Gender Equality Survey (IMAGES) is based in part on a national household survey in Norway. For more information, contact Gary Barker (g.barker@promundo.org.br) or Margaret Greene (mgreene@icrw.org).
In terms of promoting men’s involvement in HIV/AIDS-related caregiving or in other domestic chores, there has been little if any policy development in the LAC region. One of the few exceptions are some state-level campaigns promoted by and funded by the federal-level Instituto Nacional de la Mujer in Mexico. These campaigns targeted men with messages that “doing housework would not make them less manly.” There has been no impact evaluation to date of these efforts.

**Lessons Learned and Promising Practices**

There is a limited but growing number of NGOs in the LAC region and globally that have worked for more than 10 years to promote more involved fatherhood. The following are some of the lessons learned from these practices, with recommendations based on their experiences.

**Scale up fatherhood preparation courses and information campaigns focusing on men’s roles in the lives of children.** From many anecdotal reports in the region, we know that many fathers report feeling unprepared or informed about caring for children. Preparation for fathering via training or information campaigns, or incorporating fathers in existing maternal and child health information campaigns would be strategic ways to engage men. Such information and training courses are widespread in parts of North America and Western Europe, but are limited mostly to middle class men in the LAC, if available at all. National AIDS campaigns and safe motherhood campaigns can also include messages about men’s roles as fathers, as can existing campaigns related to reducing violence against women. Providing this information and these courses together with women is probably even better – so that women too can support men’s roles in this area while being able to voice their own concerns and needs to men. To give an example of these programs, in rural Haiti the Haitian Health Foundation has supported the creation of about 40 father’s clubs that focus on helping fathers care for child health problems such as diarrhea. The reported participation of father’s is high, about 700 fathers participate, but no evaluation has been done to ascertain why the involvement is high and what the impact of the fathers clubs has been (Sloand & Gebrian, 2006).

**Scale up interventions to reach younger boys and young men with alternative gender messages.** Both theory and some research suggest that childhood and adolescence are crucial moments for reaching boys and younger men with alternative messages about gender and masculinity, including their future (and actual) roles as fathers or caregivers of children. There has been some important initial work on engaging young men and rethinking the socialization of boys by diverse NGOs in the region, including Servol in the Caribbean and the Program H in Mexico and Brazil. These approaches deserve consideration for documenting and scaling up via the public sector. Impact evaluations with these kinds of interventions has found that young men change attitudes and behaviors as a result of participating in such groups (Barker, Ricardo & Nascimento, 2007).

**Target the workplace and employers to create more flexible employment policies and as an environment for fatherhood campaigns.** Considering that work is an environment in which men spend the largest portion of their time, and that have a tremendous impact on gender norms on work-life balance, interventions should target workplaces and trade unions to a greater extent to enact workplace-based campaigns and policies to allow men (and women) greater flexibility to be with their children and to promote a more appropriate work-life balance. In Brazil, Promundo and partners have used the workplace to reach men with
messages on negotiating flexible time to be with their families and sensitizing managerial staff to allow workers to have this time off. The campaign used the slogan: “At work and at home, what kind of a man are you? One who negotiates time off to be with his children.”

**Review current policies and how they influence men’s participation as fathers.** The issue of men’s role as fathers has seldom been included in policy initiatives in the region, beyond the issue of child support. The literature consulted here confirms the need for greater information on existing policies and how they already affect men’s participation as fathers.

**In Brazil, Instituto Papai,** Promundo and partners are carrying out an advocacy campaign and seeking to influence public policy. A bill, with the support these NGOs, is currently pending in Brazilian Congress that would extend paternity leave from its current five days to 15 days. As part of the campaign, a public service announcement has been developed with the participation of several well-known Brazilian actors who are fathers. The campaign is called “Da licença, sou pai” (which would roughly translates, as: “Give me leave, I’m a father”). Brazil’s largest TV networks have refused to air the public service announcement because they do not want to be held accountable for having to pay the 15 days leave for their employees.

**Review national public health policies, including maternal and child health (particularly the involvement of fathers in birth) to consider the involvement of men.** Limited evidence would suggest that greater positive involvement by men in child health, prenatal care and childbirth is mutually beneficial to children, women and men themselves. A recent review of evaluated interventions with men in the area of health promotion concluded that interventions to engage men in prenatal care showed positive results in terms of improved birth outcomes, but nearly none of these interventions has been scaled up or lasted beyond the impact evaluation phase (Barker, Ricardo & Nascimento, 2007). In three cities in Brazil, the non-governmental organization, Instituto Papai and partner organizations are working to engage health professionals and raise awareness among men and women about the Brazilian law that gives women the right to have someone (including their male partner) accompany them during childbirth. Few public hospitals (where the vast majority of births take place in Brazil) make this option available to women, often believing that men do not belong in the delivery room. The campaign, called “Pai Não É Visit” (translation: The Father is not a Visitor), seeks to encourage hospitals to guarantee that this option is available and encourage women to include the fathers of the child in the birthing process.

**Study alternatives for men’s involvement in early childhood development policies.** Several countries in the region have national policies and publicly supported initiatives related to early childhood development. These policies and initiatives should be reviewed to explore possibilities to engage men to a greater extent, including recruiting additional men as caregivers or staff. In Brazil, a National Network on Early Childhood Development, coordinated by Promundo, has developed a national policy for ECD which includes recommendations on engaging more men in child care work and seeking ways to engage fathers and men more directly in ECD. Some Scandinavian countries have reviewed their early childhood policies seeking to promote gender equality from the earliest ages and promoting gender equality in the play activities promoted in ECD centers.

**Support alternative fatherhoods, including recognizing and supporting the right of same-sex couples to form civil unions or marriages, to adopt children and/or to have their own children through assisted reproduction.** Even though evidence shows that same-sex couples can provide as good a home for children as heterosexual couples, many
barriers still exist to gay adoption and fatherhood. It is imperative that same-sex couples have the same individual and familial rights as heterosexual couples.

**Making health and other social services more friendly to men.** If men are often lacking in their caregiving, men themselves are often not cared for and seldom care for their own bodies and health. Numerous studies confirm that health and social services are often seen as female spaces or as “foreign to men.” If program staff and policymakers seek to engage men in providing care, it is also imperative to offer care for men.

**Conclusions**

The social division of labor is probably the most complex and difficult aspect of gender inequalities. The association of production with men and reproduction with women is so deeply ingrained in the organization and structure of workplaces and family life that changing it via policies and programs is not an easy task. Nonetheless, the evidence confirms that men’s and women’s involvement and division of caregiving is constantly in flux, and that men can – in specific conditions and settings – be encouraged to become more involved in domestic chores and caregiving. These conditions include policies that promote paternity leave, flexible work policies, economic necessity and in some cases program interventions.

Above all this is an area where we can appeal to the positive in men. Most of the world’s adult men will become or are already fathers; nearly all men describe positive relationships and happiness in their interactions with some children in their lives. Appealing to men’s self-interest and the well-being derived from their connections to children is a tremendous potential engine for driving changes in gender equality. Of course, men’s involvement in children does not – as we have seen – always mean that women’s burdens of work are reduced. But it is clear that appealing to men’s interest in engaging in the lives of children – their own daughters and sons – and other children, is a way forward in the cause of gender equality.
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