Commission on the Status of Women  
Fifty-seventh session  

Review Panel  
“Equal sharing of responsibilities between men and women, including caregiving in the context of HIV/AIDS”  

Tuesday 12 March 2013,  
10.00 am to 1.00 pm,  
3.00 pm to 6 pm  

ISSUES PAPER

I. Introduction
In accordance with its multi-year programme of work, the Commission on the Status of Women will be reviewing at its 57th session in March 2013 progress in the implementation of the agreed conclusions of the 53rd session in 2009 on the theme “Equal sharing of responsibilities between men and women, including caregiving in the context of HIV/AIDS”.

The two sessions of the review theme are designed to critically examine measures, mechanisms and processes for accelerating the implementation of the agreed conclusions. Good practices and lessons learned, as well as gaps and challenges for the continued implementation of the 2009 agreed conclusions will also be highlighted. It is expected that the interactive dialogue will lead to strong recommendations for broadening, deepening and intensifying progress in the implementation, taking into account not only the challenges but also the opportunities stemming from the current global context.

II. Background
Pervasive gender inequalities are found in every country. These inequalities reflect imbalances of power between women and men, have negative social, political and economic consequences for women and men, girls and boys, and preclude women and girls from realizing their human rights. Achieving gender equality will require changes in attitudes, relationships, access to resources and decision-making, and will require a partnership between women and men and girls and boys, as well as, critically, the support of government, in the form of gender-responsive economic, social and political policies that are adequately resourced. Achieving gender equality requires that women and men equally share responsibilities, including caregiving in the context of HIV/AIDS, as emphasized in the 2009 agreed conclusion.

The agreed conclusions are consistent with previous commitments, such as those made in the Beijing Declaration and Platform for Action of 1995, the outcome of the twenty-third special session of the General Assembly in 2000, as well as in the outcome of the 2010 Annual Ministerial Review of the United Nations Economic and Social Council. The 2009 agreed conclusions also align with commitments made at the 1994 International Conference on Population and Development, the 1995 World Summit for Social Development, the 2000 Millennium Summit, and the 2002 World Summit on Children. They also would meet commitments made in the Convention on the Elimination of All Forms of Discrimination against Women and the Convention on the Rights of the Child, and the Optional Protocols thereto, undertakings made in the 2001 Declaration of Commitment on HIV/AIDS and the 2006 and 2011 Political Declaration on HIV/AIDS, as well the International Labour Organization's
Workers with Family Responsibilities Convention of 1981 and its corresponding Recommendation.

III. Critical issues

The implementation of the 54 action-oriented recommendations in the 2009 agreed conclusions can be considered through four distinct thematic areas: (i) gender norms and stereotypes, socialization and unequal power relations; (ii) sharing and balancing of life-work responsibilities; (iii) caregiving in the context of HIV/AIDS; and (iv) recognizing and valuing unpaid care work. The review theme panels will examine each of these thematic areas by highlighting progress and innovations driven by public policy, and initiatives of the UN system, civil society and the private sector in improving and accelerating the implementation of the agreed conclusions. The examples below are meant to be illustrative and not exhaustive in any way, and serve to stimulate an interactive discussion during CSW57.

A. Gender norms and stereotypes, socialization and unequal power relations

Evaluating progress made since 2009 requires the examination of gender-sensitive policy initiatives introduced or enhanced to transform gender norms and stereotypes. Such initiatives may target educational systems, the labour market, leadership, and the media, to foster images, attitudes, behaviours, identities and learning that promote gender equality and the equal sharing of responsibilities between women and men. Cumulatively, they can break down inequalities in power relations within households and between women and men and therewith contribute to improving and accelerating the equal sharing of responsibilities between women and men.

Transforming gender stereotypes in education requires getting more girls into schools and into educational programmes where they are under-represented (such as in science, technology, engineering and mathematics), ensuring that the curriculum does not reinforce gender stereotypes, confronting stereotypical masculine behaviour, as well as ensuring that governments allocate adequate resources to these efforts. In Nepal, for example, efforts to increase enrolments of girls by their enhanced access to separate sanitation facilities resulted in increased funding under the Millennium Development Goals Acceleration Framework of UNDP.\(^1\) In Kenya, encouraging women to enter non-traditional vocational training demonstrated positive results from using concrete examples of women’s potential increased earnings in male-dominated jobs.\(^2\) The Government of Lebanon, with support from UNESCO, took steps to eliminate gender stereotypes from school textbooks and the content of education. Similar textbook reviews and curriculum revisions have been initiated since 2009 in countries such as Indonesia, Thailand and Vietnam.\(^3\)

The “One Man Can Campaign”, “the Fatherhood Project” and the “My Dad Can Campaign” in South Africa challenge gender stereotypes by encouraging men to increase their participation in child care and other household responsibilities.\(^4\)

Between 2009 and 2012, the Stepping Stones Community of Practice expanded the disbursement of its training packages on gender, HIV, communication and relationship skills, which has increased the agency of women and girls in undertaking informed decisions regarding sexual behaviour and in so doing reduce the prevalence of HIV/AIDS by changing prevailing gender stereotypes.\(^5\) In Senegal, a sustained boost in spending on education as a share of gross national product from 3.2 per cent to 5.7 per cent increased primary enrolments and eliminated the gender gap in education over a very short period of time, demonstrating the need for adequate government resources to challenge gender stereotypes.\(^6\)

Changing gender stereotypes in the economy requires sustaining and expanding women's economic opportunities, in part by facilitating entry into the labour market as well as in non-traditional occupations. In Croatia, the 2009 Labour Act prohibits employers from refusing employment and
dismissing pregnant women. In Rwanda in 2012 Promundo evaluated the impact of a village savings and loan programme on household and partner dynamics, and concluded that women and men responded positively to the training material that sensitively challenged pervasive gender stereotypes about household responsibilities. The New Opportunities for Women Programme in Jordan offers short-term wage subsidies and employment skills training in non-traditional occupations for private sector firms hiring young female graduates. The United Arab Emirates have taken steps to equip women to become pioneers and innovators in the transition towards a green and knowledge-based economy.

Measures to facilitate the entry of women into senior leadership roles have been adopted to challenge conventional gender stereotypes around decision-making power. Since 2009, a number of countries, including Belgium, France, Iceland, Malaysia and the Netherlands, have introduced or formalized quotas for women in senior decision-making positions in private sector companies, following the introduction of such a policy in Norway in 2005. Similarly, a number of countries have introduced legislative measures designed to increase the representation of women in government, such as in Belgium, Burkina Faso, France, Jordan, Mexico, Poland, Saudi Arabia, Senegal, Uruguay and Uzbekistan. This has proven to facilitate the entry of women into senior positions in government and the private sector.

Playing a central role in confronting gender stereotypes, public policy and practice for the media has helped portray women and men as equals in society as well as tackling employment practices in the media sector. For example, Vietnam has undertaken a campaign 'real men don't hit women' through various media outlets. The European Union’s Audiovisual Media Services Directive (2010) prohibits discrimination based on sex or sexual orientation in television and video-on-demand. In 2012 UNESCO, in cooperation with the International Federation of Journalists among others, published a global framework for gender-sensitive indicators for the media which integrates two important perspectives, namely equality between women and men working in the media and equality in news reporting on women and men.

B. Sharing and balancing life-work responsibilities

Gender-responsive legal arrangements and frameworks, including labour laws and more flexible family-friendly employment policies, as well as gender-responsive social provisioning and physical infrastructure have proven effective in promoting equal sharing of responsibilities between women and men through enhanced engagement and entry of men into childcare and other household tasks. This has not only reduced stereotypical biases that childcare is a woman’s responsibility.

Government labour market measures facilitating household balancing of life-work responsibilities are critical for reducing gender pay gaps and promoting family-friendly workplaces that facilitate the men’s enhanced engagement in caring of their children and undertaking other household tasks. This is an area that requires far larger scale than is currently the case and provisions need to be put in place to monitor the impact on the equal sharing of life-work responsibilities. For example, evaluations indicate that 90 per cent of discriminatory pay structures are to women’s disadvantage. However, some progress has been made since 2009, including Sweden’s Discrimination Act of 2009, which mandates measures to ensure pay equity in all companies with 25 or more employees. In 2010 the Republic of Korea amended its Act on the Promotion of Creation of Family-friendly Social Environment, to include an incentive framework for government and employers to create a family-friendly social environment and workplace.

A number of Government labour market measures can facilitate the balancing of life-work responsibilities, including financial support to caregivers and ensure that they which will not only recognize women’s work but also facilitate men’s enhanced role in childcare on a larger scale. For
example, in 2010 France introduced pension credits for caregivers, including fathers, to compensate for periods of unpaid care work. In the Republic of Korea (2011), Italy (2012), and more recently in Australia (2013), paid paternity leave, of varying lengths and various levels of compensation, were introduced, to encourage men to undertake childcare. Since 2011 it is possible for mothers in Chile to take postnatal maternity leave, and pass between one-half and two-thirds of the leave to the father.

A number of countries introduced, or reformed, childcare support measures which helped reduce the childcare demands on women and redistribute it to fathers as well as to public daycare facilities, allowing women to join the labour market. For example, some 38 child and family centers were set up in Australia in 2009 to address the care needs of indigenous families and their young children. The Canadian province of Ontario introduced a programme of full day kindergarten; Malaysia dedicated part of its fiscal stimulus to developing childcare facilities for both private and public sector employees; and in 2009 Chile launched the “Chile grows with you” with provision of 3,500 free childcare centers for the 40 percent most vulnerable families. The Federal Daycare Programme for Working Mothers in Mexico provides childcare services to children (1-4) from households with less than minimum wage. The President of Uruguay set up a working group in 2010 to coordinate the design of a national system of care.

Domestic workers spend long hours for low pay, have low levels of social protection, and often have no ability to claim days off, resulting in significant life-work imbalances. The most significant global result since 2009 is the adoption of the 2011 ILO Domestic Workers Convention (No. 189) and the accompanying Recommendation (No. 201). While the Convention will come into force in 2013; as of December 2012 Mauritius, Uruguay and the Philippines had ratified C189 and at least 20 other countries are examining its ratification.

At the national level, a number of initiatives have emerged since 2009 to improve the terms and conditions of employment for domestic workers. For example, El Salvador launched a national campaign in 2010 to extend social security coverage to domestic workers, and Cameroon, through its Socio-Judicial Revaluation of Domestic Employment initiative, provided greater legal protection for domestic workers. In 2012, Bahrain extended the coverage of certain provisions of its new Labour Law to domestic workers, including those relating to labour contracts, wage calculation, annual leave and dispute settlement.

In terms of wages, Brazil has seen a gradual increase in the minimum wage, which is of direct benefit to domestic workers paid the minimum wage. Since 2011, domestic workers in Chile and Zambia have been entitled to the minimum wage. In terms of statutory leave, Spain approved new regulations in 2011 providing domestic workers with the right to 30 days of annual paid leave, of which at least 15 must be consecutive, Thailand announced that domestic workers will gain a right to a weekly rest day, public holidays and sick leave in 2012; and as of 2013 foreign domestic workers in Singapore have been entitled to a weekly rest day under work permits issued or renewed from the start of the year.

C. Caregiving in the context of HIV/AIDS

In evaluating progress in the implementation of the agreed conclusions it is necessary to focus on both support and policy measures that have been put in place to strengthen the accessibility of care services, including formal government services and informal community-based arrangements, to alleviate the responsibilities that fall on women and girls in communities and households in the context of HIV/AIDS. Caregiving in the context of HIV/AIDS in households and communities is often driven by
stereotypical gender division of labour, where women carry out most of the unpaid care work in the household; unpaid and nominally paid care work in the community; and constitute the majority of home-based caregivers (non-household members) supporting those living with HIV/AIDS.

Caregivers’ support networks have emerged and strengthened since CSW53 to make visible the contributions made care workers in mitigating the impact of HIV/AIDS on families and communities, secure additional resources and sustain this vital community service. For example, the Care Givers Action Network commenced operations in Africa, providing policy input, research and advocacy for caregiving in the context of HIV/AIDS; members of the Home-based Care Alliance in Kenya participated in the National AIDS Strategic Planning and Implementation process, and home-based caregivers in Cameroon formed and national Home-Based Care Alliance.

At the global level, ILO adopted a new international labour standard in 2010 which contains anti-discrimination measures for those in paid caregiving in the context of HIV/AIDS. Evidence from sub-Saharan Africa has revealed the economic value of unpaid female care in the context of HIV/AIDS. The study found that tens of thousands of unpaid female caregivers between the ages of 20 and 49 routinely donate on average 69 hours per month to care for the sick and vulnerable—a donation of time worth significant economic value. This evidence has fed into policy development, such as in Kenya where GROOTS Kenya used this evidence in their advocacy efforts during the formulation of the national strategy to address HIV. In Uganda, the Uganda Community Based Association for Child Welfare used the evidence to influence the country's Health Sector Strategic Planning III exercise, which led to home-based caregivers to be selected as the Village Health Teams in the district of Bugiri. Together, community based caregivers been able to marshall the evidence that is need to inform the policy process surrounding recognizing, organizing and remunerating caregiving in the context of HIV/AIDS to achieve results.

Advocacy to address the gender equality dimensions of HIV has led to policy and programme interventions in a range of areas. In 2009 UNDP launched the Universal Access for Women and Girls Now! (UA Now!) initiative in 10 countries to accelerate progress towards achieving universal access to HIV prevention, treatment, care and support for women and girls, and in so doing rendering visible the gender equality dimensions of HIV/AIDS. In 2011-2012, UN-Women supported networks of women living with HIV (WLHIV) and caregivers in 26 countries that resulted in their increased participation in HIV policy and programming processes. UN-Women also worked with national AIDS coordinating authorities (NACAs) in 22 countries to integrate gender equality into HIV strategies, policies, laws, institutions, budgets, and accountability frameworks. In 2009 in South Africa the Expanded Public Works Programme Phase 2 accelerated job creation in early childhood development and home- and community-based care for people with AIDS, tuberculosis and malaria. Since 2009 there has been a marked expansion of home-based care programs for families living with HIV/AIDS. Among others, the Stephen Lewis Foundation and Pathfinder International are international NGOs that are actively involved in supporting home-based care. Since 2009 it has been increasingly the case that home-based care organizations that are supported with external resources such as Pathfinder International have shifted from being informal providers of care and support into becoming formal organizations that provide training, stipends and support for home-based care workers.

Since 2009 a number of countries have introduced cash transfer programs that have been targeted at households to reduce new infections and HIV-related risky behaviour and, in so doing, reduce the amount of caregiving that is needed. As of 2012, 41 countries in Sub-Saharan Africa have a cash transfer program for households affected by HIV/AIDS. In Malawi the short-term Zomba cash transfer program targeted at girls to keep them in school and to reduce marriage and pregnancy rates, reduced HIV risk by 64 per cent over the life of the project. In Tanzania a year-long RESPECT cash
transfer program run by a non-governmental organization significantly reduced new HIV infections, and had implications for the amount and distribution of caregiving work. In Kenya the government-run Cash Transfer for Orphans and Vulnerable Children has resulted in a marked delay of first sexual acts by young people, reductions in unprotected sex, fewer sexual partners for women, and increased secondary school enrolment, which has positively impacted the amount and distribution of caregiving in the context of HIV/AIDS.\textsuperscript{32}

These initiatives demonstrate that it is possible to formulate support and policy interventions that affect the amount of caregiving that is necessary in the context of HIV/AIDS. However, in addition to support to unpaid, community and home-based caregiving national health systems need addressed caregiving as part of the government policy agenda. Government-funded national health systems need to to address the caregiving needs in the context of HIV/AIDS, including through support to caregivers, most of whom are women and girls.

D. Recognizing and valuing unpaid care work

Recognizing the centrality of unpaid care work to human welfare requires concerted efforts to make such work visible through use of time use surveys, improved measurement tools, capacity-building, and integration of unpaid care work into broader policy-making and budget frameworks.

A first step in recognizing unpaid care work is to measure it. Since 2009, formal, national, statistically representative time use surveys designed to capture paid and unpaid care work were conducted in several countries, such as Albania, Algeria, Australia, Belgium, Bosnia and Herzegovina, Brazil, Bulgaria, Canada, Colombia, Croatia, Djibouti, Estonia, Ethiopia, Finland, France, Guatemala, Hungary, India, Ireland, Japan, Macedonia, Mexico, the Morocco, the Netherlands, New Zealand, Norway, Romania, Serbia, Spain, Sweden, Turkey, the United Kingdom and the United States.\textsuperscript{33} Time use surveys were also carried out in villages, districts and regions.

The 2009 Mexican time use survey, for example, was used to identify and evaluate the economic contribution of women in both their paid and unpaid care work, and resulted in estimates of time poverty for Mexico in 2011 and the construction of satellite accounts for the health sector in 2010 and household work in 2011.\textsuperscript{34} Estimates of the size and value of unpaid care work in Italy, Poland and the United States were published. In 2012 Colombia became the first country to mandate the collection of time use surveys to account for the activities of unpaid care work in the national economy.\textsuperscript{35} A series of indicators to quantify care, including unpaid care, and support in the context of HIV/AIDS, is currently being piloted in South Africa and Zambia.\textsuperscript{36}

Fostering equal sharing of responsibilities between women and men requiresthe integration of unpaid care work into all stages of the policy cycle. This in turn requires building capacity in gender-aware economic policy analysis. Since 2009, UNDP has supported the Global Gender and Economic Policy Management Initiative (GEPMI), which seeks to build capacity for integrating a gender-equality perspective into economic policy making.\textsuperscript{37} Targeting policy-makers, GEPMI includes specific modules on unpaid care work, gender-responsive data collection and time use surveys, the integration of unpaid care work into economic policy analysis and macroeconomic modelling. In a similar vein, in 2010 UNRISD produced \textit{Time Use Studies and Unpaid Care Work}, which empirically examines patterns of paid and unpaid care work by gender in eight countries in order to demonstrate its relevance for policy purposes.\textsuperscript{38} Cumulatively, work on data collection and capacity building since 2009 has significantly enhanced the ability of economists and policy-makers in Africa and Asia in particular to begin to construct gender-responsive economic policies that recognize the role of unpaid care work in economic processes.
IV. Format of the interactive dialogue

Four segments will be organized around the four above-mentioned themes to allow for a thorough review of progress in implementing the 2009 agreed conclusions.

Each segment will begin with two presentations (7-10 min) demonstrating concrete action to implement the agreed conclusions. Member States, entities of the United Nations system and non-governmental organizations will participate in the ensuing dialogue, and are encouraged to share their experiences in implementing the agreed conclusions, highlighting achievements, gaps and challenges, as well as good practices and lessons learned. Interventions from the floor will be limited to three minutes. Each of the four thematic segments will conclude with comments and observations by a discussant who will offer a critical analysis of stakeholders’ progress; and present policy options for broadening, deepening and intensifying the implementation of the 2009 agreed conclusions. The outcome of the review will consist of a moderator's summary that will highlight the key findings and recommendations of the event.

V. Issues for consideration in the interactive dialogue

During the interactive dialogue, participants will highlight concrete initiatives taken since 2009 and identify means to broaden, deepen and intensify implementation of the 2009 agreed conclusions. They will focus on global, national, and sub-national activities in support of the agreed conclusions, and will provide where possible supporting data, statistics and other quantitative and qualitative information to illustrate monitoring and reporting initiatives.

Specific questions for consideration during the interactive dialogue include:

1. What are some good practices and lessons learned by governments and multilateral organizations in monitoring efforts to promote an equal sharing of responsibilities between men and women, including caregiving in the context of HIV/AIDS?
2. What are some of the gaps and challenges constraining efforts towards broadening, deepening and intensifying an equal sharing of responsibilities between men and women, including caregiving in the context of HIV/AIDS?
3. What measures have been implemented or are needed to be implemented by governments to ensure greater policy coherence between macroeconomic policies, poverty reduction strategies, gender equality commitments, and measures to promote an equal sharing of responsibilities between men and women, including caregiving in the context of HIV/AIDS?
4. What are examples of measures that have been initiated to ensure that domestic resources are allocated in a way that promotes an equal sharing of responsibilities between men and women, including caregiving in the context of HIV/AIDS?
5. What, if any, has been the effective impact of the above measures?

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7 ILO Conditions of Work and Employment Branch, personal communication.
16 ILO Conditions of Work and Employment Branch, personal communication.
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