



General Assembly

Distr.: General
17 June 2019

Original: English

Seventy-fourth session

Item 22 (b) of the preliminary list*

**Eradication of poverty and other development issues:
women in development**

World Survey on the Role of Women in Development

Report of the Secretary-General

Why addressing women's income and time poverty matters for sustainable development

Summary

The *World Survey on the Role of Women in Development* is focused on selected emerging development themes that have an impact on the role of women in the economy at the national, regional and international levels and is presented to the Second Committee of the General Assembly at five-year intervals. In its resolution [69/236](#), the General Assembly requested the Secretary-General to update the *World Survey* for consideration by the General Assembly at its seventy-fourth session. The present (eighth) *World Survey* is focused on the reasons for the high levels of income poverty and time poverty among women and contains an analysis of the rationale for taking an integrated policy approach to addressing the double bind experienced by women in that regard, as a timely and relevant means of achieving sustainable development, in particular in low-income contexts.

* [A/74/50](#).



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I. Why addressing women's income and time poverty matters for sustainable development

A. Introduction

1. With growing global attention being paid to the idea of “leaving no one behind”, the time is ripe for gaining insight into the unique ways in which poverty shapes and constrains the lives of women, as a means to inform policy action. Unpaid care and domestic work contribute to human well-being and feed into economic growth through the reproduction of a labour force that is fit, productive and capable of learning and creativity, however, women's disproportionate responsibility for that work increases their vulnerability to poverty. Discriminatory social norms and gender stereotypes position women and girls as the default providers of care,¹ which means that women are less able to acquire access to decent paid work, be financially independent and accumulate savings, assets or retirement income for their later years.

2. The costs of and responsibility for unpaid care and domestic work are borne unequally across both gender and household income status. Poorer women must compensate for the lack of public services or the lack of access to or their inability to afford time-saving technologies through multitasking and increased unpaid care and domestic work, often under harsh physical and environmental conditions. Poor women are also forced into vulnerable and insecure forms of survival work by economic necessity. The significant time spent by poor women in arduous forms of paid and unpaid work not only results in a vicious cycle of income and time poverty, but also leads to a decline in their physical and mental well-being.² Women's disproportionate share of unpaid care and domestic work is a global pattern across developing and developed countries alike, and it is intensified in low-income contexts by the lack of access to public services and basic infrastructure.

3. The double bind of income and time poverty is particularly pronounced for women of reproductive age, when they are often caring for young children. It may result in the intergenerational transmission of poverty, through child poverty and deprivations experienced by adolescent girls who take on excessive hours of unpaid care and domestic work.³ That additional burden puts the education and training opportunities of women and girls in jeopardy, potentially deepening their vulnerability to poverty across the life course. Such intergenerational dynamics have significant implications for gender equality, the empowerment of women and the enjoyment by women of their human rights, as well as wider and longer-term ramifications for poverty, inequality, well-being and the achievement of sustainable development.⁴

4. Traditional poverty indicators, including multidimensional indices, have tended to neglect the dimension of time use, despite its importance for understanding women's experiences of poverty. In studies examining the relationship between income poverty and time poverty, it was found that poverty rates increased significantly when time deficits were simulated and included alongside income

¹ Joan C. Tronto, *Caring Democracy: Markets, Equality and Justice* (New York and London, New York University Press, 2013).

² Deepta Chopra and Elena Zambelli, *No Time to Rest: Women's Lived Experiences of Balancing Paid Work and Unpaid Care Work – Global Synthesis Report for Women's Economic Empowerment Policy and Programming* (Brighton, Sussex, Institute of Development Studies, 2017).

³ International Labour Organization (ILO), *Global Estimates of Child Labour: Results and Trends, 2012–2016* (Geneva, 2017), sect. 1.7.

⁴ See A/68/293; see also United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women), “Redistributing unpaid care and sustaining quality care services: a prerequisite for gender equality”, Policy Brief No. 5, New York, 2016.

deficits.⁵ Income and time poverty are also often accompanied by deprivations in the areas of health, education and other indicators of well-being. For women and girls, the intersection of income poverty with time poverty affects their capacity to participate in education and to enjoy good health, rest and leisure, thereby depleting their capacities.⁶

5. Recognizing, reducing and redistributing unpaid care and domestic work as a core gender equality issue has been well articulated in international norms and standards. In 1995, in the Beijing Declaration and Platform for Action, the Fourth World Conference on Women highlighted the importance of addressing the unequal distribution of paid and unpaid work between women and men as an essential step towards achieving gender equality. A number of international human rights treaties, including the International Covenant on Economic, Social and Cultural Rights, the Convention on the Elimination of All Forms of Discrimination against Women, the Convention on the Rights of the Child and the Convention on the Rights of Persons with Disabilities, contain legally binding obligations for States parties to address the issue. The international human rights framework, as established by treaties such as those mentioned above, is complemented by labour standards, in particular the Workers with Family Responsibilities Convention, 1981 (No. 156), the Maternity Protection Convention, 2000 (No. 183) and the Domestic Workers Convention, 2011 (No. 189) of the International Labour Organization (ILO).

6. In target 5.4 of the Sustainable Development Goals, there is an explicit acknowledgement of the importance of public services, infrastructure and social protection policies for recognizing and valuing unpaid care and domestic work and of the promotion of shared responsibility for that work. In the agreed conclusions adopted by the Commission on the Status of Women at its sixty-third session ([E/2019/27-E/CN.6/2019/19](#), chap. I, sect. A), the Commission acknowledged that social protection systems, access to public services and sustainable infrastructure had not adequately addressed the needs of caregivers and care recipients. It also stressed the need for integrated approaches to the design, implementation and evaluation of social protection systems, public services and sustainable infrastructure that responded to the needs of women and girls and recognized and valued unpaid care and domestic work. The Commission also identified the importance of comprehensive, participatory, gender-sensitive poverty eradication strategies that addressed social, structural and macroeconomic issues in order to ensure an adequate standard of living for women and girls, including through social protection systems, access to public services and sustainable infrastructure.

7. The seventh *World Survey on the Role of Women in Development* ([A/69/156](#)) contained an examination of the twin challenges of achieving gender equality and building pathways to sustainable development. The present is the eighth *World Survey*. It contains an analysis of the rationale for implementing integrated policies to address high levels of income poverty and time poverty among women as a matter of priority for the achievement of sustainable development. The analysis is focused on human biological, financial and emotional sustainability and the depleting effects of income and time poverty on women and girls. It builds upon the report of the Secretary-General on social protection systems, access to public services and

⁵ Ajit Zacharias, Rania Antonopoulos and Thomas Masterson, *Why Time Deficits Matter: Implications for the Measurement of Poverty* (United Nations Development Programme and Levy Economics Institute of Bard College, 2012).

⁶ United Nations Development Fund for Women (UNIFEM), “The progress of women: empowerment and economics”, in *Progress of the World’s Women 2000*, UNIFEM biennial report (New York, 2000); and Shirin M. Rai, Catherine Hoskyns and Dania Thomas, “Depletion: the cost of social reproduction”, *International Feminist Journal of Politics*, vol. 16, No. 1 (2014).

sustainable infrastructure for gender equality and the empowerment of women and girls (E/CN.6/2019/3).

8. The ways in which policies address unpaid care and domestic work have far-reaching consequences for gender equality and the achievement of the Sustainable Development Goals. For example, policies could be focused on reducing the time it takes a girl to travel to school through the provision of a bicycle, which would increase her chances of completing her education. Considering and addressing the care needs of women with young children as part of public works programmes could simultaneously address both income poverty and time poverty for poor women. Investments in infrastructure, such as water and energy, can improve the productivity of women in their paid and unpaid work. Expanding opportunities for women to earn an income and reducing their care burdens through investments in social protection, public services and infrastructure are not separate objectives; they are inextricably linked. Achieving both objectives requires investment in physical and social infrastructure and attention to the cultural construction of care work.⁷

9. The present section contains: an overview of the current context in which income and time poverty among women is being addressed, with a focus on broader contextual challenges emanating from the global economic environment, climate change, growing inequalities and the status of women's livelihoods and access to decent work; an analysis of the important synergies among a range of Sustainable Development Goals related to gender equality and the empowerment of women and girls, unpaid care and domestic work, poverty eradication, education, health, decent work and infrastructure; a description of how poverty among women has been understood and evolved over time, highlighting the importance of time poverty as a critical but often neglected aspect of deprivation; and an overview of the following sections of the report.

B. Current context

1. Global economic uncertainty, growing inequalities and environmental threats

10. In the 2030 Agenda for Sustainable Development, the General Assembly set out an unprecedented commitment to addressing poverty and inequality in all its forms, including a strong pledge to achieve gender equality and leave no one behind. However, while the world continues to make progress in eliminating extreme poverty, the gains have been highly uneven both across and within countries. Dominant patterns of production and consumption are going in deeply unsustainable directions, with the over-exploitation of natural resources, the loss of habitats and biodiversity and the pollution of land, seas and the atmosphere becoming increasingly evident. Those trends are, in turn, jeopardizing the achievement of the Sustainable Development Goals.

11. As noted in the seventh *World Survey*, unsustainable patterns of development and environmental degradation disproportionately affect low-income countries and risk intensifying gender inequalities, because women and girls are often disproportionately affected by economic, social and environmental shocks and stresses. To prevent such a situation, the future of work and livelihoods must be premised on inclusive patterns of development that reduce inequalities, deliver economic security and are environmentally sustainable.⁸

⁷ Nancy Folbre, "Developing care: recent research on the care economy and economic development", paper commissioned by the International Development Research Centre, 2018.

⁸ ILO, *Work for a Brighter Future: Global Commission on the Future of Work* (Geneva, 2019).

12. In 2015, the number of people living in extreme poverty stood at 736 million, representing 68 million fewer people than in 2013. However, much of the reduction in extreme poverty over the past 25 years has been driven by the success of China and, more recently, of countries in South Asia, in lifting millions of people out of poverty. That rate contrasts with the much slower pace of poverty reduction in sub-Saharan Africa. On the basis of historical growth rates, the World Bank estimates that, by 2030, as much as 87 per cent of the world's extreme poor are likely to live in sub-Saharan Africa.⁹ A gender analysis of poverty has been limited, owing to conventional poverty measurements being based on household survey data, in which aggregate household-based income or consumption data are used to calculate per capita income (see sect. D).

13. In recent years, and in particular since 2010, the pace of poverty reduction has begun to decelerate¹⁰ and will likely remain low owing to growth uncertainties and volatilities in commodity prices.¹¹ The pattern of economic growth in recent decades indicates that, in places where rates of growth have been high, growth has tended to be accompanied with rising levels of income and wealth inequality.¹² The debates on inequality have largely focused on income inequality between households and the need for redistributive policies, but in applying a gender perspective, important questions are also raised about the drivers of socioeconomic disadvantage for women in poor households, such as unpaid care and domestic workloads.¹³

14. Inequalities within and among countries continue to be of significant concern. In more than half of 92 countries with comparable data over the period 2011–2016, growth rates among the bottom 40 per cent of the population were more than the national average, in line with target 10.1 of the Sustainable Development Goals; however, less than 25 per cent of the overall income or consumption accrued to the bottom 40 per cent, and the share going to the top 1 per cent of earners in many countries is of serious concern (E/2019/68, para. 31). While inequality within most countries has been rising, global income inequality has been falling, especially since 2000. The Gini coefficient, a statistical measure of income distribution, for global income fell from 69.7 in 1988 to 62.5 in 2013;¹⁴ however, if China were removed from those data, the decline would be marginal. Moreover, a Gini coefficient of 62.5 is still very high and suggests that levels of living among individuals in the world are still very different and are likely to remain so for a very long time.¹⁵ The country in which one is born or lives still largely determines one's income; as an example, the bottom 5 per cent of individuals in the United States of America are still richer than 68 per cent of the world's population.¹⁶ Those income disparities between developed

⁹ World Bank, *Poverty and Shared Prosperity 2018: Piecing Together the Poverty Puzzle* (Washington, D.C., 2018).

¹⁰ Ibid.

¹¹ François Bourguignon, "Global versus national inequality", in International Social Science Council, Institute of Development Studies and United Nations Educational, Scientific and Cultural Organization (UNESCO), *World Social Science Report 2016, Challenging Inequalities: Pathways to a Just World* (Paris, 2016).

¹² Ashwani Saith, "Inequality, imbalance, instability: reflections on a structural crisis", *Development and Change*, vol. 42, No. 1 (January 2011); and Hai-Anh Dang and Peter Lanjouw, "Inequality in India on the rise", Policy brief, vol. 6/2018, (Helsinki, United Nations University World Institute for Development Economics Research (UNU-WIDER), 2018).

¹³ Shahra Razavi, "Rising economic and gender inequality: intersecting spheres of injustice", in *World Social Science Report 2016*.

¹⁴ World Bank, *Poverty and Shared Prosperity 2016: Taking on Inequality* (Washington, D.C., 2016).

¹⁵ Yusuf Bangura, "Convergence is not equality", *Development and Change*, vol. 50, No. 2 (March 2019).

¹⁶ Branko Milanovic, *The Haves and the Have-nots: A Brief and Idiosyncratic History of Global Inequality* (New York, Basic Books, 2011); and Branko Milanovic, *Global Inequality: A New Approach for the Age of Globalization* (Cambridge, Massachusetts, Harvard University Press, 2016).

and developing countries are underpinned by significant differences in employment opportunities and livelihoods, but also by significant disparities in social protection systems that provide income security in response to life course contingencies and systemic shocks.¹⁷

15. Political and social polarization built on economic disparities and populism, competition for natural resources and environmental degradation, fragmented non-State armed actors and the absence of a political solution to evolving conflicts continue to underlie global insecurity (A/73/392, para. 4). The pursuit of gender equality in both developing and developed countries is being threatened in some contexts by the emergence and mobilization of conservative forces and extremist groups that increasingly resist the realization of either gender equality or women's and girls' human rights. Such forces exist on a spectrum, with diverse manifestations. However, a common feature is the misuse of religion, tradition and culture to curtail women's human rights and entrench stereotypical gender roles, in particular in relation to women's rights over their bodies and sexuality and women's and girls' rights to participate in public life, including in educational institutions, labour markets and politics (E/CN.6/2015/3, para. 378).

2. Livelihoods and decent employment: still not a level playing field for women

16. In many developing countries, growth has failed to generate structural transformations in the economy to deliver decent employment opportunities, and the labour force participation rates among women in most regions have hardly increased over the past two decades,¹⁸ with one constraint being women's disproportionate share of unpaid care and domestic work.

17. According to ILO, unemployment remains unacceptably high, especially among women.¹⁹ Two billion of the world's employed population, representing 61.2 per cent of global employment, work in the informal sector. Informal work refers to work carried out in the absence of labour regulation and with little or no social protection coverage, presenting a major challenge for sustainable development. Within the broad category of informal work, women tend to occupy the more disadvantaged positions and are more likely than men to work in more vulnerable settings, including as contributing family workers and home-based workers. Those are also categories of workers that are hard to reach through the usual social security, labour regulation and tax policies. While not all workers in the informal sector are poor, there is a strong positive relation between poverty, which is measured at the household level, and informal work, which is measured at the individual level. Furthermore, most people take up informal work not by choice but as a result of a lack of opportunities in the formal economy.²⁰

18. One of the main gains of the past two decades has been in the increasing access for women and girls to education, with positive implications for women's and girls' life chances. In developing countries, secondary education attendance is correlated with declines in early marriage and adolescent childbearing.²¹ Since 2000, globally, the enrolment of girls in secondary education has increased from 53.1 to 64.8 per cent.²² More work remains to be done in terms of closing substantial gaps among different groups of girls and reaching girls in rural areas, those belonging to minority

¹⁷ Yusuf Bangura, "Convergence is not equality".

¹⁸ UN-Women, *Progress of the World's Women 2019–2020: Families in a Changing World*.

¹⁹ ILO, *World Employment Social Outlook: Trends 2018* (Geneva, 2018).

²⁰ ILO, *Women and Men in the Informal Economy: A Statistical Picture*, 3rd ed. (Geneva, 2018).

²¹ UN-Women, *Progress of the World's Women 2019–2020*.

²² UN-Women, *Turning Promises into Action: Gender Equality in the 2030 Agenda for Sustainable Development* (New York, 2018).

ethnic groups and those in the poorest households. In addition, the narrowing gender gaps in education have not been matched by similar improvements in labour market outcomes and effective access for women to economic opportunities.²³

19. In fact, gender gaps in labour market indicators have not narrowed in a meaningful way over the past two decades.²⁴ Access for women to economic opportunities can enhance their well-being and amplify their voices within and beyond their households, while helping them to safeguard their families from economic deprivation.²⁵ Having an income or assets of their own is also critical for women in cases of relationship dissolution, whether as a result of divorce, separation or widowhood.²⁶ Although women can and do very often benefit from the earnings of household members, especially partners, through intrahousehold transfers, the ways in which such earnings are shared may not always be favourable to them.

20. The most significant change in the participation of women in the labour force has occurred in the Latin America and Caribbean region, where the rate of participation has risen by 10 percentage points, from 57 to 67 per cent between 1998 and 2018. The rates of participation of women in the labour force are also high in sub-Saharan Africa and have risen slightly over the same period. In contrast, in the Central and Southern Asia region, the rate has declined by 2 percentage points from an already low base, from 36 to 34 per cent between 1998 and 2018. A look at the patterns that lie behind those aggregate figures indicates that being married or in a union has a dampening effect on women's likelihood of participating in the labour force, whereas it has the opposite effect on men.²⁷ The presence of young children in the household also tends to reduce the labour force participation rate among women, although not everywhere, whereas it has the opposite effect among men. Discriminatory social norms and gender stereotypes that construct childcare and domestic work, such as cooking or cleaning, as the domain of women and breadwinning as the domain of men underpin those outcomes.

21. In addition to gender inequalities in the labour market, significant gaps in access to social protection also have an impact on income and time poverty among women. Although social protection coverage has expanded since the mid-1990s, progress has stalled in recent years as austerity measures have taken hold.²⁸ Less than one third of the world's population is covered by comprehensive social security systems, with women overrepresented among those who remain excluded, in part because in most countries social protection systems privilege those engaged in uninterrupted, full-time and formal employment.²⁹ In that respect, in his recent report on the subject (E/CN.6/2019/3), the Secretary-General reinforced the urgency of building national

²³ James Heintz, "Stalled progress: recent research on why labor markets are failing women", paper commissioned by the International Development Research Centre, 2018.

²⁴ ILO, *A Quantum Leap for Gender Equality: For A Better Future of Work for All* (Geneva, 2019).

²⁵ Mieke Meurs and Rita Ismaylov, "Improving assessments of gender bargaining power: a case study from Bangladesh", *Feminist Economics*, vol. 25, No. 1 (2019); Naila Kabeer, Simeen Mahmud and Sakiba Tasneem, *Does Paid Work Provide a Pathway to Women's Empowerment? Empirical Findings from Bangladesh*, Institute of Development Studies Working Paper, 2011, No. 375 (Brighton, United Kingdom of Great Britain and Northern Ireland, Institute of Development Studies, 2011); and Amartya K. Sen, "Gender and cooperative conflicts", in Irene Tinker, ed., *Persistent Inequalities: Women and World Development* (New York, Oxford University Press, 1990).

²⁶ UN-Women, *Progress of the World's Women 2019–2020*.

²⁷ Ibid.

²⁸ See E/CN.6/2019/3; see also Isabel Ortiz and others, *The Decade of Adjustment: A Review of Austerity Trends 2010–2020 in 187 Countries*, Extension of Social Security Series, No. 53 (Geneva, ILO, 2015).

²⁹ ILO, *World Social Protection Report 2017–19: Universal Social Protection to Achieve the Sustainable Development Goals* (Geneva, 2017).

social protection floors in ways that were gender-responsive, in line with the Social Protection Floors Recommendation, 2012 (No. 202) of ILO.

C. Addressing income and time poverty among women in the context of the 2030 Agenda

22. A unique aspect of the 2030 Agenda is the recognition of the interlinkages and synergies among its Sustainable Development Goals and targets, underlining the idea that the achievement of one target is dependent on the achievement of others. The eradication of poverty is therefore closely linked to progress in other Goals, such as gender equality, education, health, decent work and the provision of basic infrastructure. The inclusion of a specific target on unpaid care and domestic work (see box I) in Goal 5 underscores the importance of recognizing the value of such work to societies and economies, of reducing its quantity and drudgery and of redistributing such work within households and societies in order to achieve gender equality and sustainable development.³⁰ In some countries, “satellite accounts” have been used to measure non-market work and make visible the sheer volume of such work and its significance to the economy.

Box I

Defining unpaid care and domestic work

Direct care involves hands-on or face-to-face personal and often emotional contact, such as feeding a child or bathing an older person. In contrast, domestic work (or housework) such as cleaning and doing laundry, which is sometimes referred to as indirect care, can involve little, if any, personal engagement. The latter activities, which enable direct care, can absorb a significant amount of time. The work of producing goods for household consumption, such as gathering food from a garden, collecting firewood or fetching water, is not a component of unpaid care work, despite the fact that it is unpaid; it is within the production boundary of the System of National Accounts, although it is seldom accurately measured or valued, except in time-use surveys. Unpaid care and domestic work, however, are explicitly excluded from the System of National Accounts and are therefore traditionally overlooked in economic analyses.^a

Time-use surveys are an essential tool for measuring the temporal demands of childcare and long-term care, that is, caring for adults who require assistance owing to old age or disability. In many surveys, respondents are asked to report the number of minutes in a day or days that they spent carrying out unpaid care and domestic activities, as well as who they were with and where they were when carrying out direct care activities. However, time-use surveys often fail to capture the time spent on “supervisory” or “on-call” responsibilities, that is, the time during which the carer is in charge of a person but not involved in any specific activity with them. In fact, analyses of time-use surveys that captured such supervisory responsibilities indicated that such responsibilities were very time-consuming, in particular among women.^b

^a Folbre, “Developing care”.

^b Michelle J. Budig and Nancy Folbre, “Activity, proximity, or responsibility? Measuring parental childcare time”, in Nancy Folbre and Michael Bittman, eds., *Family Time: The Social Organization of Care* (Abingdon, Oxon, United Kingdom, Routledge, 2004).

³⁰ UN-Women, *Turning Promises into Action*.

23. Despite the prioritization of unpaid care and domestic work as part of the Sustainable Development Goals, strategies to promote the economic empowerment of women as a tool for economic growth too often neglect the significant time spent by women in unpaid care and domestic work and the value of non-market work for families, societies and economies.³¹ Underlying those strategies is an assumption that everyone has adequate time to devote to earning an income or enough resources to compensate for the deficits in care and household production that will ensue, by purchasing market substitutes, such as paid childcare services or cooked meals.³² Such a view entrenches the idea that women's time is infinitely elastic. The perceived narrative that the economic empowerment of women as a tool for economic growth is a win-win situation for all neglects the dangers of overwork among the poorest women, given that they struggle with intense and heavy paid and unpaid workloads, leading to time poverty and depletion (see box II).

Box II

Defining time poverty and depletion

Time poverty is broadly understood as the lack of time needed for individuals to meet their basic requirements for rest and leisure, also known as discretionary time, owing to an excess of paid work and unpaid care and domestic work.^a The basic assumption underlying the concept is that the high burden of unpaid care work shouldered by women, compared with men, in terms of the number of hours in a day, prevents them from devoting more hours, if any, to paid work and therefore keeps them in poverty, as measured in monetary terms or in multidimensional terms. The idea that overwork, both paid and unpaid, has an impact on leisure and personal care, especially sleep and rest, is also implied.^b

The concept of depletion is focused on the consequences of unpaid care and domestic work for individuals, households and communities. Depletion occurs when the outflows of unpaid care and domestic work, combined with the inflows of medical care, income earned and leisure time, fall below a threshold of human biological, financial and emotional sustainability.^c For individuals, depletion can be physical and mental and measured through indicators such as low body mass index, tiredness, sleeplessness, reduced self-worth and insufficient time for oneself, for the enjoyment of friendships and for participation in community life. For households, depletion can take the form of a reduction in collective household resources, such as leisure time spent together, as a result of extended work days or less disposable income to carry out essential household activities. For communities, depletion can be the lack of resources for community support and networks.^d

^a Clair Vickery, "The time-poor: a new look at poverty", *Journal of Human Resources*, vol. 12, No. 1 (Winter, 1977).

^b Jacques Charmes, input submitted for the expert group meeting on the *World Survey on the Role of Women in Development*, New York, 4 and 5 February 2019.

^c Rai, Hoskyns, and Thomas, "Depletion".

^d Ibid.

24. Unpaid care and domestic work provide the foundation upon which individuals, families, societies and economies survive and thrive and are closely connected to several aspects of sustainable development. As women and girls bear a disproportionate share of that work, it can hamper their access to income-generating

³¹ Kweilin Ellingrud and others, *The Power of Parity: Advancing Women's Equality in the United States* (McKinsey Global Institute, 2016).

³² Ajit Zacharias, *How Time Deficits and Hidden Poverty Undermine the Sustainable Development Goals*, Policy Note, No. 2017/4 (Levy Economics Institute of Bard College, 2017).

work and impede their capacity to escape poverty and be financially independent and accumulate savings, assets or retirement income, thereby impeding the realization of Sustainable Development Goals 8, 1 and 5, respectively. In low-income households, the time and drudgery associated with unpaid care and domestic work differs significantly depending on the availability and quality of basic infrastructure, such as piped water, on-site sanitation, electricity and transport, as well as access to time-saving appliances such as grinders and fuel-efficient cooking stoves, factors addressed under Goals 6, 7, 9 and 11. When women in poor households seek to increase their income by engaging in paid employment, without the added provision of services and infrastructure, the work will likely be arduous and poorly paid; they will likely continue to face both income poverty and time poverty, alongside other deprivations, in areas such as health, housing and education, which are covered under Goals 3, 11 and 4, respectively.³³

25. The redistribution of unpaid care and domestic work does, however, present challenges. Low-income households do not often have the option to reduce and outsource their unpaid care and domestic work through market substitutes, such as by purchasing ready-made foods or hiring care workers. Because of the application of discriminatory social norms and gender stereotypes, those tasks cannot be easily redistributed from women and girls to men and boys. The intensity of unpaid care and domestic work undertaken by women and girls in poor families can create a poverty trap. As a result of the time and energy spent on unpaid responsibilities, women are constrained in their capacity to seek income-generating opportunities, and, because of their income poverty, they are unable to afford a reduction in the time and drudgery associated with unpaid care and domestic work.³⁴

26. In such contexts, poor women's responsibility for unpaid care and domestic work may be transferred to their older children, in particular daughters, who tend to spend a considerable amount of time caring for siblings. For both girls and boys, the consequences of such delegation can be dire, because it absorbs their time and energy after school, or leading to their performing poorly in school or dropping out entirely.³⁵ It is often assumed that households, and in particular women in the household, will continue to provide care to their members through whatever socioeconomic and demographic changes may come. Women's time is not infinitely elastic, however, and coping strategies can produce unintended outcomes.³⁶ In the context of health crises, for example, girls can miss out on school because of time spent fetching water and looking after bedridden family members. When caring for elderly relatives, women may be obliged to reduce their income-earning work or forgo promotions and training opportunities.

27. The 2030 Agenda also includes the promise to leave no one behind, because it is recognized that different kinds of inequality, both vertical, such as income inequality, and horizontal, such as among social groups, often overlap and exacerbate one another, thereby intensifying disadvantage.³⁷ In the context of growing inequalities across the globe, understanding differences in the time spent on unpaid care and domestic work is crucial. Living in a rural area, for example, tends to

³³ Zacharias, *How Time Deficits and Hidden Poverty Undermine the Sustainable Development Goals*.

³⁴ Ibid.

³⁵ Chopra and Zambelli, *No Time to Rest*.

³⁶ Diane Elson, "Male bias in macroeconomics: the case of structural adjustment", in Diane Elson, ed., *Male Bias in the Development Process* (Manchester, United Kingdom, and New York, Manchester University Press, 1995).

³⁷ Stephan Klasen and Marc Fleurbaey, "Leaving no one behind: some conceptual and empirical issues", Committee for Development Policy Background Paper No. 44, [ST/ESA/2018/CDF/4](#) (New York, United Nations, Department of Economic and Social Affairs, 2018).

increase the time a women allocates to unpaid care and domestic work.³⁸ That trend is due to the generally lower level of access in rural locations to labour-saving technologies, processed foods and basic infrastructure, such as water on tap, although infrastructure and service deficiencies can be equally dire in overcrowded urban slums (see sect. IV).³⁹

28. Time-use data from India indicates that women who live in poor households spend as much as 24 per cent of their work time on collecting firewood and water, whereas women in non-poor households allocate about one half of that, or 12 per cent of their work time, to such tasks.⁴⁰ In Latin American countries, in which economic inequality is relatively high by global standards, women in the poorest income quintile allocate significantly more time to unpaid care and domestic work than those in the richest quintile.⁴¹ The consistently low amounts of time spent by men on those tasks, regardless of their household income level, are also striking.

29. To address the high levels of income and time poverty among women, an integrated public policy approach is needed that brings together action on social protection, public services, infrastructure and decent work within an enabling macroeconomic environment. Although social protection instruments such as cash transfers have become increasingly prevalent ways for reducing income poverty and increasing demand for public health and education services, if they are to advance gender equality, women's unpaid care and domestic workloads must be taken into account in the development of such instruments and of a broader social protection system that ensures adequate investments in, and enables access for women to, high-quality and affordable public services (see sects. III and IV). Investments in gender-responsive infrastructure, such as in the areas of transport, electricity and water, are critical for freeing up women's time and increasing the productivity of women in their paid and unpaid work. Viable rural road networks and safe urban transport systems, for example, can enhance the mobility of women and girls, enabling them to acquire access to markets, education, training and other public services. Similarly, without affordable childcare services, women often struggle to gain access to decent work, which would allow them to secure social protection entitlements through employment.

30. Income poverty and time poverty, however, do not always go together. Although some poor people are overworked, others may suffer from enforced idleness as a result of a lack of paid employment opportunities and thus be unemployed, underemployed or even discouraged from looking for work.⁴² Policies are needed that stimulate livelihoods and labour demand. The advantages of investments in social infrastructure and care services include: reducing drudgery and increasing the productivity of women in their unpaid work, thereby increasing the "supply" of women in the labour force; stimulating "demand" for women in the labour force; and

³⁸ ILO, *Care Work and Care Jobs for the Future of Decent Work* (Geneva, 2018), fig. 2.10.

³⁹ Sylvia Chant and Cathy McIlwaine, *Cities, Slums and Gender in the Global South: Towards a Feminised Urban Future* (Abingdon, Oxon, United Kingdom, Routledge, 2016).

⁴⁰ Indira Hirway, "Understanding poverty: insights emerging from time use of the poor", in Rania Antonopoulos and Indira Hirway, eds., *Unpaid Work and the Economy: Gender, Time Use and Poverty in Developing Countries* (New York, Palgrave MacMillan, 2010).

⁴¹ UN-Women, *Progress of the World's Women 2019–2020*.

⁴² Diane Elson, "Unpaid work, Millennium Development Goals and capital accumulation", presentation at the Levy Economics Institute of Bard College conference on unpaid work and the economy, Annandale-on-Hudson, New York, October 2005.

creating new jobs in the care sector and in infrastructure services, such as energy and transport.⁴³

31. The 2030 Agenda provides a unique opportunity to systematically address the high levels of income and time poverty among women in an integrated manner. Such an approach will create important synergies for making progress across multiple Sustainable Development Goals, including with regard to poverty, nutrition, health, education, gender equality, water and sanitation, infrastructure, decent work and inclusive growth.

D. Understanding and measuring poverty among women: gaps and challenges

32. A key challenge in understanding women's experiences of poverty stems from the way in which poverty measurements are commonly conceptualized. Income poverty measurements, based on an internationally or nationally defined level of income to distinguish between the poor and non-poor, are generally based on household survey data, in which aggregate household-based income or consumption data are used to calculate per capita income (see sect. II). Although there are extensive debates on the adequacy of the levels of income used to determine poverty and extreme poverty thresholds,⁴⁴ feminist scholars have drawn attention to the problem of using the household as the unit of analysis for the measurement of poverty.

33. Household measurements of poverty do not take account of the ways in which income is managed within households, such as who has access to and control over money, resources and assets. Rather than being a cohesive unit, in which resources are pooled equitably or in which all members are equally poor or non-poor, households are characterized by interactions and relationships of both cooperation and conflict that are based on gender-related power dynamics.⁴⁵ Differences in the power and position of household members, usually based on gender and age, shape the intrahousehold allocation of resources. A large number of poor women are, in fact, living in households that are not in the lowest quintile, and the bottom 20 per cent is the group often targeted for assistance in anti-poverty programmes.⁴⁶ Using male or female household headship as a metric for disaggregation has posed problems as well, given the lack of clarity on how "headship" is understood by both survey enumerators and respondents and the heterogeneity of households that are maintained by women without the presence of adult men.

34. Income-based poverty measurements are also limited because they are focused solely on monetary deprivation rather than overlapping deprivations, such as the lack of, or limited access to, health care, housing, education and infrastructure. Poverty is

⁴³ UN-Women, *Turning Promises into Action*; UN-Women, *Promoting Women's Economic Empowerment: Recognizing and Investing in the Care Economy* (New York, 2018); and Jerome De Henau, Susan Himmelweit and Diane Perrons, "Investing in the care economy: simulating employment effects by gender in countries in emerging economies", paper commissioned by the International Trade Union Confederation, January 2017.

⁴⁴ Martin Ravallion, Shaohua Chen and Prem Sangraula, "Dollar a day revisited", Policy Research Working Paper, No. 4620 (Washington, D.C., World Bank, 2008).

⁴⁵ Amartya Sen, *Gender and Cooperative Conflicts*, Working Paper, No. 18 (Helsinki, UNU-WIDER, 1987); and Bina Agarwal, "'Bargaining' and gender relations: within and beyond the household", *Feminist Economics*, vol. 3, No. 1 (1997).

⁴⁶ Naila Kabeer, "Gender, poverty, and inequality: A brief history of feminist contributions in the field of international development", *Gender and Development*, vol. 23, No. 2 (2015); and Caitlin S. Brown, Martin Ravallion and Dominique van de Walle, "Are poor individuals mainly found in poor households? Evidence using nutrition data for Africa", Working Paper No. 24047 (Cambridge, Massachusetts, National Bureau of Economic Research, 2017).

not one-dimensional, but a complex multidimensional phenomenon, emblematic of a state in which the lives of individuals are continuously “battered and diminished in all kinds of different ways”.⁴⁷ Given that the need for measurement tools that capture overlapping deprivations has been recognized, multidimensional measurements of poverty have evolved in recent decades.⁴⁸

35. One advantage of some non-income measurements, such as education and health, is that they can be measured at the individual, rather than household, level. Yet multidimensional analyses of poverty have tended to use household-level measurements, such as access to housing or infrastructure. Although households collectively suffer from poverty, deprivation and unequal access to public services, not all members of a household suffer in the same way or to the same extent. Furthermore, whereas multidimensional analyses of poverty have taken into account lack of access to infrastructure, such as water and sanitation, as an area of deprivation, they have not explicitly focused on time poverty as an overlapping dimension of deprivation. The recently developed individual deprivation measurement has been designed to overcome the lack of individual-level poverty data and to include gender-specific indicators such as those relating to time use.⁴⁹ However, scaling up the measurement requires new data collection, which will take significant time and resources.

36. In addition to the measurement of poverty, the understanding of the gender dimensions of poverty has also evolved beyond an empirical observation of whether women are more likely than men to be poor, to an understanding of the complex processes and structures that drive women’s experiences of poverty. Poverty is both a “state” and a “process”, with women and men experiencing the state of poverty differently and often unequally and becoming impoverished through processes that sometimes, although not always, diverge.⁵⁰ Although gender-responsive measurements of poverty are urgently needed, equal attention must be paid to the processes that contribute to poverty in order to inform the design of policies and actions. The division of labour between women and men, both paid and unpaid, is a key driver of poverty among women, along with the unequal distribution of assets, resources and entitlements within the household.

E. Overview of the eighth *World Survey*

37. The information provided in section II is based primarily on a global analysis of poverty data from the World Bank, in which the recently developed Global Monitoring Database was used to provide new insights on poverty and deprivation from a gender perspective, revealing that income and time poverty were particularly acute among women 25 to 34 years of age in households with dependent children. The intersection of income poverty with time poverty, aggravated by the lack or absence of services and basic infrastructure, leads to the depletion of women’s capacities by leaving little time for sleep, rest or leisure. In the analysis conducted, it is shown that women and girls who face multiple and intersecting forms of inequality,

⁴⁷ Amartya Sen, “A decade of human development”, *Journal of Human Development*, vol. 1, No. 1 (2000).

⁴⁸ Sabine Alkire and James Foster, “Counting and multidimensional poverty measurement”, *Journal of Public Economics*, vol. 95, Nos. 7 and 8 (2011); and Gisela Robles Aguilar and Andy Sumner, “Who are the world’s poor? A new profile of global multidimensional poverty”, Working Paper No. 499 (Washington, D.C., Center for Global Development, 2019).

⁴⁹ Sharon Bessell, “The individual deprivation measure: measuring poverty as if gender and inequality matter”, *Gender and Development*, vol. 23, No. 2 (2015).

⁵⁰ Naila Kabeer, “Monitoring poverty as if gender mattered: a methodology for rural Bangladesh”, Discussion Paper No. 255 (Brighton, United Kingdom, Institute of Development Studies, 1989).

in terms of gender, income, location and race and ethnicity, are among the most disadvantaged.

38. Section III is focused on ways in which policies can support women who juggle intense forms of work along with the maintenance and care of their households so that they may achieve economic security without further deepening the income and time poverty trap. The section includes a review of the role of social protection instruments, most notably paid maternity leave, in strengthening income security among women at a critical juncture in their life course when they need respite from paid work and the role of social transfers, such as child and family benefits, to supplement earnings and any private transfers from other earners in the household. Women in low-income contexts also need labour market interventions that can help them to build sustainable livelihoods and accumulate assets to support themselves and their families in the longer term.

39. In section IV, public services and basic infrastructure are highlighted as critical to addressing income and time poverty among women. In low-income contexts, in particular, boosting household-level access to sufficient electricity, safe water and sanitation is key to reducing poverty among women by avoiding the depletion of their capacities and increasing their productivity in paid and unpaid labour. Investments in high-quality education and affordable health-care and childcare services help to put more time at women's disposal, build human capabilities and create jobs in the care sector.

40. Section V is focused on the challenges of financing the social investments outlined in the preceding two sections. The dominant view that social policy represents only a form of government consumption expenditure is challenged in the section. The long-term impacts of social services, including education, health and early childhood development, on productivity are reviewed, to illustrate their long-term benefits. The section contains examples of ways in which resources can be mobilized, including by improving the efficiency of tax systems, expanding tax bases, introducing new taxes, generating revenues from natural resource utilization and halting tax evasion and avoidance.

41. Section VI sets out conclusions and recommendations, including a call for enhanced investments in an integrated package of policy responses that work in tandem to increase economic security among women, reduce the drudgery and intensity of unpaid care and domestic work and put more time at their disposal, as the foundation for more equal and sustainable economies and societies.

II. Understanding poverty among women: income and time poverty and the pressures of care work

A. Introduction

42. The unequal distribution of unpaid care and domestic work, between women and men and between families and societies more broadly, is a key source of economic disadvantage for women. According to data from 90 countries, women devote on average around three times more hours per day to unpaid care and domestic work than men.⁵¹ Owing to the resulting time constraint, women participate less in paid work compared with men and, when they do engage in paid work, they are more likely to engage in lower-quality and lower-paying jobs that can be more easily combined with unpaid care and domestic work responsibilities. Moreover, because of the combined responsibility of paid work and unpaid care and domestic work, women have limited

⁵¹ UN-Women, *Progress of the World's Women 2019–2020*.

time remaining for education, rest and leisure. As recognized at the sixty-third session of the Commission on the Status of Women, the inadequate provisioning of public services and sustainable infrastructure further intensifies the constraints on women's income and time. For poor women and girls and those belonging to marginalized groups, the deprivation of access to public services and infrastructure is particularly acute.

43. Despite the importance of monitoring and addressing the economic disadvantage for women, global estimates on their income poverty are unavailable. That is because data on extreme poverty rely on household surveys, which are not designed at present to capture poverty at the individual level.⁵² Comparable estimates on the number of women and girls and men and boys living in income-poor households, prepared for the present report, provide new insights into the gender profiles of the poor.⁵³ In the analysis, women and girls are defined as income-poor if they live in an income-poor household; all women and girls in poor households are assumed to be poor, whereas all women and girls in non-poor households are assumed to be non-poor. The same definition is applied to men and boys. In turn, a household is considered poor if the per capita consumption of its members (or per capita income, depending on the country) falls below the international poverty line of US\$ 1.90 per day, which is the standard definition of absolute extreme poverty under the global monitoring framework for the Sustainable Development Goals and targets of the 2030 Agenda.⁵⁴ To complement measurements of the international poverty line and capture the various dimensions of poverty, other measurements, including non-monetary measurements, are also used to assess poverty among women (see box III).

Box III

Measurements of poverty: definitions and concepts

In the present section, three different measurements of poverty are used, each of which has its strengths and limitations. First, the international poverty line is a useful standardized measurement for evaluating acute material deprivation across countries, but poverty may also depend on the average living standards in a country or region. In Latin America and the Caribbean, for example, where inequality is high, many people experience poverty and hardship, even though only 4 per cent of the population lives on less than US\$ 1.90 per day.

The second measurement of poverty is the composite measurement of a household's cumulative living standard, for which a household's assets, such as televisions and bicycles, are used to assess its socioeconomic status. The wealth index of the Demographic and Health Survey is one such measurement, which touches on a range of deprivations in addition to a household's socioeconomic status, including inadequate access to water and sanitation and the quality of housing (see sect. D).

⁵² As noted in section I, nationally representative household surveys, in which the household is the unit of measurement, are the main source for measuring poverty. Such measurements, however, lack granularity on intrahousehold dynamics, such as individual or sex differential consumption patterns, and information on how resources are pooled and shared between household members (Sylvia Chant, "Re-thinking the 'feminization of poverty' in relation to aggregate gender indices", *Journal of Human Development*, vol. 7, No. 2 (2006); Julian Lampietti and Linda Stalker, *Consumption Expenditure and Female Poverty: A Review of the Evidence* (Washington, D.C., World Bank, Development Research Group/Poverty Reduction and Economic Management Network, 2000); and "Monitoring global poverty: report of the Commission on Global Poverty (World Bank, Washington, D.C., 2017)).

⁵³ Developed through an ongoing partnership between UN-Women and the World Bank, using the global monitoring database, updated in 2019, see UN-Women and World Bank (forthcoming), "Gender differences in poverty and household composition through the lifecycle", 2018.

⁵⁴ See metadata for Sustainable Development Goal indicator 1.1.1.

From a gender perspective, the wealth index, like the international poverty line, remains limited, given that assessments of poverty at the household level do not take into account power dynamics and intrahousehold inequalities in the sharing of household wealth and assets, income and consumption.

The above-mentioned measurements of poverty are set out in conjunction with information on a third measurement, namely, time poverty. Measured and recorded at the individual level, time poverty is broadly understood as a lack of discretionary time, including time used to meet basic requirements for rest and leisure, owing to excessive hours spent at work, both paid and unpaid (see box II). Time poverty is an important dimension of well-being that has significant implications for income poverty reduction and gender equality.

44. In section B below, the link between care and income poverty is considered through an analysis of income poverty data by sex, age and household composition. Women face the greatest risk of income poverty during the period in which they are most pressed for time, owing to the presence of young children needing care in the household, regardless of whether they are living in a couple, alone or in an extended household. Moreover, although having children increases the likelihood of living in poverty for both men and women, women assume the risk earlier in the life course and are more likely than men to face poverty alone, for example, in a lone-parent household. In section C, data from time-use surveys are examined to illustrate the unequal division of unpaid care and domestic work between women and men within the household. Section D is focused on how the inadequate provisioning of services and infrastructure exacerbates time poverty among women and perpetuates a cycle of poverty. Section E contains an analysis of how income and time poverty are experienced most acutely by women and girls facing multiple and intersecting forms of discrimination and marginalization.

B. Income poverty among women and the pressures of care work

45. The disproportionate share of unpaid care and domestic work shouldered by women contributes to a greater risk of income poverty. An analysis of data from 91 developing countries, covering 78.1 per cent of the world's population, indicates that there are specific pressure points in women's life course that place them at greater risk of poverty compared with men. For example, poverty rates for women between 25 and 34 years of age are two percentage points higher than for men in the same age cohort. That is equivalent to a total of 49 million poor women and girls, compared with 40 million poor men and boys.⁵⁵ When adjusted for the fact that men outnumber women in the population, the results indicate that, globally, women between 25 and 34 years of age are 25 per cent more likely than men to live in extreme poverty.⁵⁶

46. The difference in extreme poverty rates among women and men between 25 and 34 years of age coincides with differences in men's and women's life courses. Women marry and have children earlier in life than men. The responsibility for caring for young dependents earlier in life deprives women of opportunities to develop their capabilities and diminishes their chances of gaining access to decent work. Controlling for individual characteristics, such as age, marital status, education and employment status, and for household characteristics, the analysis indicates that

⁵⁵ Based on a full sample of all ages, 348 million women and girls live in extreme poverty, compared with 341 million men and boys.

⁵⁶ UN-Women and World Bank (forthcoming), "Gender differences in poverty and household composition through the lifecycle", 2018.

women between 25 and 34 years of age with children below the age of 5 years are 4.8 percentage points more likely than those who have no young children to live in extreme poverty. Having a young child in the household increases the likelihood of poverty among men as well, but the magnitude is smaller, at 2.6 per cent.⁵⁷

1. Children and their caregivers constitute an overwhelming majority of the extreme poor

47. Extreme poverty rates are highest among children, decreasing among young adolescents and young adults and stabilizing among those around 50 years of age. Children between 0 and 14 years of age in particular are disproportionately represented among the poor, accounting for 28 per cent of the total population but 46 per cent of the extreme poor.⁵⁸ Overall, individuals below the age of 35 years account for 76 per cent of those living in extreme poverty.⁵⁹

48. When poverty rates are disaggregated by sex and age, the data reveal that women are particularly vulnerable to poverty between the ages of 25 and 34 years, when gender gaps are widest (see figure I).⁶⁰ Globally, there are 125 women between the ages of 25 and 34 years for every 100 men in the same age group living in extreme poverty. The gender gap among those older than 24 years coincides with the phase in the life course of family formation and child-rearing, during which women and their families face increased expenses associated with having children, while also experiencing time constraints on engaging in paid work.⁶¹ The pattern is consistent across all regions with available data, but the depth and duration of the gender gaps vary between regions. In Latin America and the Caribbean and sub-Saharan Africa, for example, where adolescent birth rates are the highest, the gap surfaces earlier in a young woman's life and is already present among those between the ages of 15 and 19 years.⁶²

⁵⁷ Ibid.

⁵⁸ Equivalence scales are not used in the analysis.

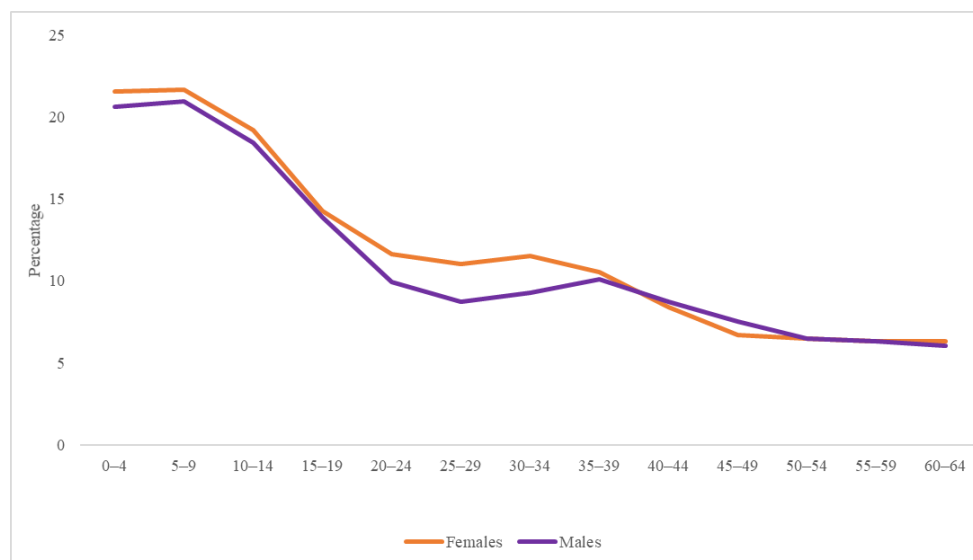
⁵⁹ UN-Women and World Bank (forthcoming) "Gender differences in poverty and household composition through the lifecycle", 2018.

⁶⁰ The gender gap narrows and is no longer evident among individuals between 35 and 39 years of age and between 40 and 45 years. This is likely the result of a confluence of factors, including older children in the home entering the labour market and women joining and rejoining the labour force, which improves household capital generation and accumulation.

⁶¹ Globally, the average age of women at marriage is 23.3 years, compared with 26.6 for men. See UN-Women, *Progress of the World's Women 2019–2020*.

⁶² UN-Women, *Progress of the World's Women 2019–2020*. In sub-Saharan Africa, 43 per cent of the population lives on less than US\$ 1.90 per day. In that region, 57.2 per cent of those aged between 25 and 34 years of age living in extreme poverty are women. In Latin America and the Caribbean, even though only 4 per cent of the population lives in extreme poverty, women are overly represented, accounting for 57.9 per cent of those aged between 25 and 34 years of age living in extreme poverty.

Figure I
Proportion of people living in extreme poverty globally, by age and sex



Source: UN-Women and World Bank, “Gender differences in poverty and household composition through the lifecycle”, based on the World Bank global monitoring database, updated in 2019.
Note: Extreme poverty defined as living on US\$ 1.90 per day. Based on a sample of 91 countries.

49. Because women begin family formation and taking on child-rearing responsibilities earlier, actions reinforced by discriminatory social norms and gender stereotypes, women struggle to balance, and in some cases forgo, completing their education or engaging in paid work to care for children early in life.⁶³ Global data on labour force participation, disaggregated by age and sex, indicate a similar pattern; as discussed in section B.3, the gender gap in labour force participation increases sharply among women of reproductive age.⁶⁴

2. Increased risk of poverty in households with children, in particular for women with children

50. Households with larger numbers of dependents, many of whom are children, have higher income poverty rates (see box IV),⁶⁵ partly because of the higher expenditures that such families incur, such as child-rearing costs, and the difficulty of combining caregiving with paid work. However, the risk of poverty is different for

⁶³ Andrew Morrison and Shwetlana Sabarwal, “The economic participation of adolescent girls and young women: why does it matter?”, Prem Notes, No. 128 (Washington, D.C., World Bank, 2008); Saranga Jain and Kathleen Kurz, *New Insights on Preventing Child Marriage: A Global Analysis of Factors and Programs* (Washington, D.C., International Center for Research on Women, 2007); United Nations Children’s Fund (UNICEF), *Early Marriage: A Harmful Traditional Practice: A Statistical Exploration* (New York, 2005); and Jennifer Parsons and others, “Economic impacts of child marriage: a review of the literature”, *The Review of Faith and International Affairs*, vol. 13, No. 3 (2015).

⁶⁴ UN-Women, *Progress of the World’s Women 2015–2016: Transforming Economies, Realizing Rights* (New York, 2015).

⁶⁵ A regression analysis based on a sample of 91 countries, controlling for individual characteristics, such as age, marital status, education, employment status and household size, indicates that the ratio of dependents to earners is a significant predictor of poverty: the higher the ratio of children to adults between 25 and 34 years of age, the higher the likelihood of poverty among women and men in that age group. See UN-Women and World Bank, “Gender differences in poverty and household composition through the lifecycle”.

women and men. Compared with men, a higher proportion of women between 25 and 34 years of age live in households in which they are likely to have dependents, especially young children.⁶⁶

Box IV

Household composition: indicators and definitions

A household comprises one individual living alone or many persons living together and making common provisions for food, shelter and other essentials for living. Members of a household are often related to each other, but households also comprise persons who are both related and unrelated.^a The focus in the present section is on the following household types, which are shown by the income poverty analysis to be overrepresented among the extreme poor between 25 and 34 years of age:

(a) **Households of couples with children** are households in which a married or in-partnership couple is present with at least one biological, step, adopted or foster child under the age of 18 years. Forty-four per cent of the extreme poor live in such households;

(b) **Lone-mother households** are households in which a lone mother of any age is present with at least one biological, step, adopted or foster child below the age of 18 years. Although only 3 per cent of the extreme poor live in such households, that represents 2 million young women between 25 and 34 years of age who are lone mothers living in extreme poverty;

(c) **Extended households** are households in which all persons are related to each other, but at least one member is outside the nuclear family unit, such as with a parent-child relationship. Forty-seven per cent of the extreme poor live in extended households. Among the regions with the highest rates of extreme poverty, such as Central and Southern Asia and sub-Saharan Africa, some 40 per cent of children under the age of 15 years live in large extended households.

The remaining 6 per cent of the world's extreme poor live in one-person households, households of couples without children and households of persons who are unrelated.

^a *Principles and Recommendations for Population and Housing Censuses* (United Nations publication, Sales No. E.15.XVII.10).

51. Globally, individuals between 25 and 34 years of age living in households of couples with children are overrepresented among the extreme poor. Whereas 39.7 per cent of individuals in that age range live in such households, they make up 44.2 per cent of the extreme poor. Women represent a greater share of such individuals: globally, 58 per cent of the extreme poor between 25 and 34 years of age living in households of couples with children are women (see figure II).

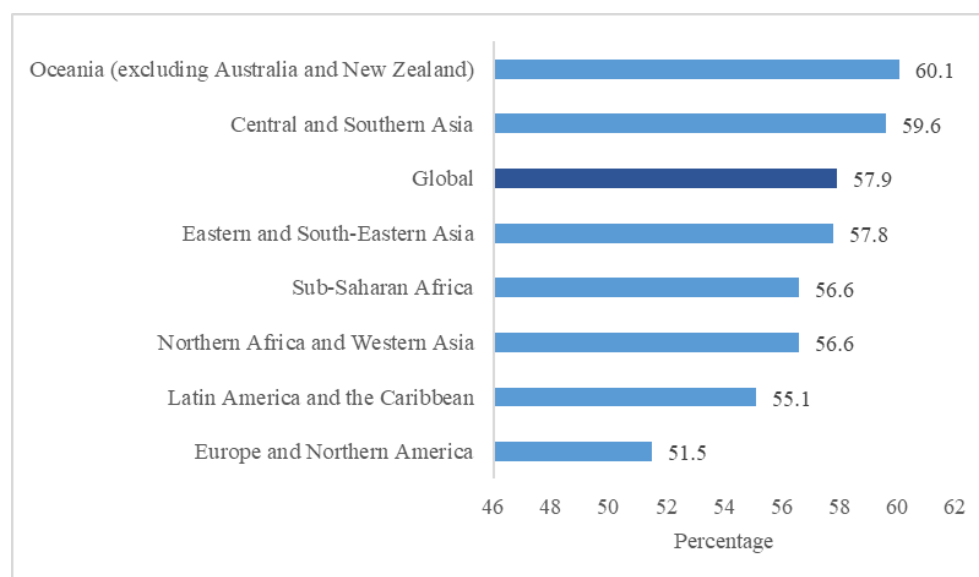
52. The significant poverty risk for children and their likely caregivers, who are primarily women between 25 and 34 years of age, illustrates the intersection between the pressures of care and income poverty among women. A multivariate analysis of poverty rates for women and men with and without children confirms the greater

⁶⁶ Globally, whereas 45.5 per cent of women between 25 and 34 years of age live in households of couples with children in which at least one child is below the age of 18 years, the corresponding figure for men is 33.9 per cent. Similarly, women are more likely than men to live in lone-parent households with dependent children: 3.5 per cent of women between 25 and 34 years of age live in lone-mother households with at least one child below the age of 18 years. In contrast, 0.08 per cent of men between 25 and 34 years of age live in lone-father households with at least one child below the age of 18 years.

vulnerability of women to income poverty. The presence of a child under 5 years of age in the household increases poverty rates for women by 4.9 percentage points and for men by 2.6 percentage points.⁶⁷

Figure II

Proportion of women between 25 and 34 years of age among those living in extreme poverty in households of couples with children, by region



Source: UN-Women and World Bank, “Gender differences in poverty and household composition through the lifecycle”, based on the World Bank global monitoring database, updated in 2019.

53. Similarly, women are far more likely than men to live in lone-parent households, and such households tend to be poorer than households of couples with children.⁶⁸ Women raise their children on their own for a variety of reasons, including widowhood, separation, divorce, the migration of their spouse to another city or country or as a matter of preference or life choice.⁶⁹ The fact that women are often financially dependent on partners and spend more time in unpaid care and domestic work places lone mothers at greater risk of poverty. In Latin America and the Caribbean, for example, women between 25 and 34 years of age living in lone-mother households are overrepresented among the extreme poor. In that region, 6.2 per cent of women in that age range live in such households. Among the extreme poor, however, the proportion is 14.2 per cent (see figure III).

54. Lone mothers are not income-poor because they avoid paid work. In fact, a high proportion of them in high-income countries, typically close to or above 80 per cent, are actively involved in some form of paid work.⁷⁰ Despite high employment rates, families with lone mothers face considerable poverty risks. Discrimination and stigma on the basis of family and marital status, along with inadequate income support, are

⁶⁷ In addition, having a child under 5 years of age increases the likelihood of poverty more than having any children who are 18 years old or under. See: UN-Women and World Bank, “Gender differences in poverty and household composition through the lifecycle”.

⁶⁸ UN-Women, *Progress of the World's Women 2019–2020*. Based on data from 86 countries and territories, an estimated 84.3 per cent of lone-parent households are headed by women.

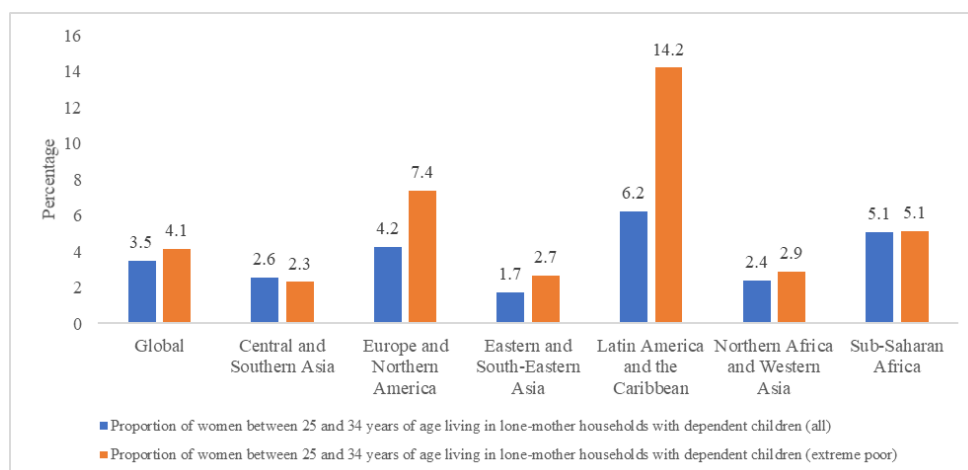
⁶⁹ In other cases, women do not have a preference or choice, for example, in cases in which a partner does not want to take part in child-rearing and does not provide emotional or financial support.

⁷⁰ UN-Women, *Progress of the World's Women 2019–2020*.

key drivers of the higher poverty rates among lone-mother households. In a study of six member countries of the Organization for Economic Cooperation and Development (OECD), researchers found that divorce had substantial negative effects on women's incomes, which were significantly larger than any such effects on men.⁷¹

Figure III

Proportion of lone mothers between 25 and 34 years of age in extremely poor households with at least one child under 18 years of age, by region



Source: UN-Women and World Bank, “Gender differences in poverty and household composition through the lifecycle”, based on the World Bank global monitoring database, updated in 2019.

Note: Oceania, excluding Australia and New Zealand, is not shown owing to an insufficient sample size.

55. Individuals between 25 and 34 years of age in extreme poverty are also overrepresented across all regions in extended households, defined as households in which all persons are related to each other, but with one or more persons outside the nuclear family unit, such as a parent-child relationship. Globally, 39 per cent of individuals in that age group live in extended households, but among the extreme poor, the proportion is 47 per cent

56. Women represent a greater share of individuals between 25 and 34 years of age living in extreme poverty in extended households (see figure IV). Women who reside in extended households have a greater probability of living in extreme poverty than those who live in other types of household; they are 4.7 percentage points more likely to live in extreme poverty than women living alone or in couple-only households.⁷² For poor women and men, extended households are part of a broader livelihood strategy for coping with extreme poverty, enabling the sharing of housing and other limited resources, among other things.⁷³

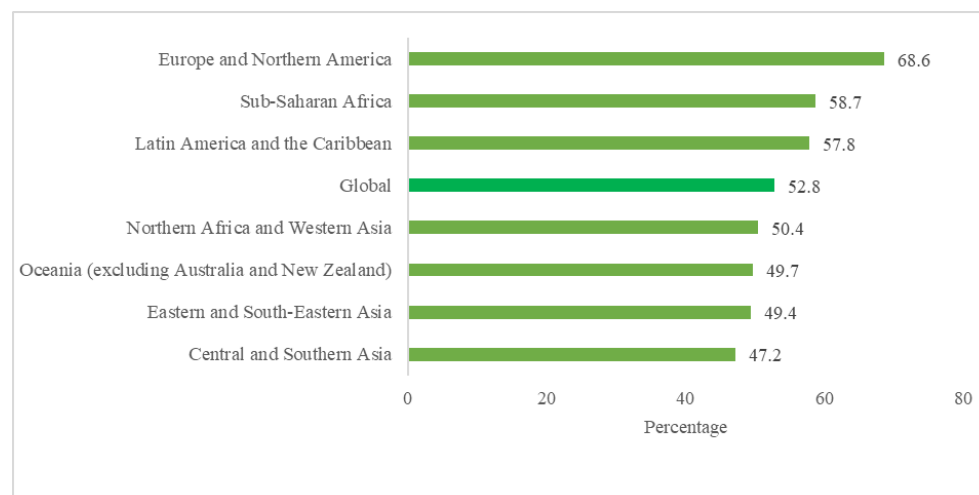
⁷¹ Ibid.

⁷² UN-Women and World Bank, “Gender differences in poverty and household composition through the lifecycle”. Extended households raise the probability of being poor for men as well, but the magnitude is lower, at 3.8 percentage points.

⁷³ Sara Randall and Ernestina Coast, “Poverty in African households: the limits of survey and census representations”, *The Journal of Development Studies*, vol. 51, No. 2 (2015).

Figure IV

Proportion of women between the ages of 25 and 34 years among those living in extreme poverty in extended households, by region



Source: UN-Women and World Bank, “Gender differences in poverty and household composition through the lifecycle”, based on the World Bank global monitoring database, updated in 2019.

57. While living with extended family members may support individuals in buffering high living costs,⁷⁴ power dynamics related to age and gender can create hierarchies and inequalities. Girls in extended households in which a greater number of members need care may end up leaving school to take on additional domestic responsibilities, such as cooking, fetching water, cleaning or caring for younger siblings, cousins or elderly relatives.⁷⁵ Furthermore, male partners and older parents also often control whether women engage in paid work, rendering them financially dependent on their male partners and their partner’s family.⁷⁶ In other cases, living in extended households can enable greater sharing of childcare responsibilities, most often in the form of younger women seeking help from other adult women, such as their own mothers, grandmothers and other female relatives.

3. Dampening effects of paid employment on income poverty for women and the importance of the quality of work

58. The engagement of women in paid employment does not automatically reduce their risk of poverty. A broader range of factors, including the nature of paid employment and the distribution of economic resources within the household, influences whether women can use access to income as a way to escape poverty. For example, economic activities that take place within the confines of family relations, most notably in family farms and enterprises, are least likely to involve direct

⁷⁴ For example, the prevalence of extended households increased in Brazil and Colombia during the 1980s and 1990s in response to impoverishment and underemployment in cities. See: Randall and Coast (2015).

⁷⁵ UN-Women, *Turning Promises into Action*.

⁷⁶ In Nepal, for example, a study found that daughters-in-law in multigenerational households were often financially dependent on their in-laws and husbands, who controlled household finances and financial decision-making, including whether they could engage in paid work. See: Lu Gram and others, “Revisiting the patriarchal bargain: the intergenerational power dynamics of household money management in rural Nepal”, *World Development*, vol. 112 (December 2018).

remuneration and thus least likely to support women in becoming economically independent.⁷⁷

59. Nevertheless, in the aggregate, paid employment has a dampening effect on income poverty. Globally, for women between 25 and 34 years of age, the incidence of extreme poverty is lowest for those engaged in paid employment and highest for those who work as contributing family workers or own-account workers. For those not participating in the labour force, the incidence of extreme poverty is 8 percentage points higher for women compared with men, at 18.3 per cent and 10.0 per cent, respectively (see table).

60. The low quality of work available often counters the dampening effect of employment on income poverty (see sect. III). In sub-Saharan Africa, because of the widespread prevalence of extreme poverty and limited access to social protection, individuals often engage in paid employment for economic survival, taking on arduous and potentially hazardous work. In that context, labour market participation rates are relatively high for both women and men, but decent work opportunities are limited. A large share of individuals between 25 and 34 years of age, especially women, work for low pay or without any direct pay in precarious, informal jobs; 56.3 per cent of all women and 55.0 per cent of all men in that age range work as unpaid or own-account workers in sub-Saharan Africa. The share rises to 64.9 per cent for women and 67.9 per cent for men in the same age group among the extreme poor.⁷⁸

61. In Central and Southern Asia, rising household income levels, driven by improvements in decent work for men, have been followed by declining employment rates for women.⁷⁹ Studies show that sectors that attract female workers have expanded least.⁸⁰ Given the poor quality of paid employment available to women, in the context of long hours of unpaid care and domestic work, improvements in household income levels may be easing the pressure on women to seek outside employment.⁸¹ An overwhelming majority of women between 25 and 34 years of age (76.2 per cent) are out of the labour force, whereas only 4.2 per cent of men in that age group are not in the labour force.⁸²

⁷⁷ UN-Women, *Progress of the World's Women 2019–2020*.

⁷⁸ UN-Women and World Bank, “Gender differences in poverty and household composition through the lifecycle”.

⁷⁹ The trend is driven by declines in employment among lower middle-income households. The poorest still face pressure to engage in paid work, regardless of the quality and pay of the available work. See Stephan Klasen and Janneke Pieters, “What explains the stagnation of female labour force participation in urban India?”, *The World Bank Economic Review*, vol. 29, No. 3 (2015).

⁸⁰ Ibid.

⁸¹ UN-Women, *Progress of the World's Women 2019–2020*.

⁸² UN-Women and World Bank, “Gender differences in poverty and household composition through the lifecycle”.

Extreme poverty rates among individuals between 25 and 34 years of age, by sex and employment status

Region	Women				Men			
	Paid employment	Contributing family worker or own-account worker	Unemployed	Out of labour force	Paid employment	Contributing family worker or own-account worker	Unemployed	Out of labour force
Central and Southern Asia	15.2	13.8	10.5	13	13.4	14	14.6	11.7
Europe and Northern America	0.1	0.3	0.5	2	0.6	0.1	0.4	0.5
Eastern and South-Eastern Asia	0.6	4.8	1.6	3.5	1.6	0.8	4.4	2.5
Latin America and the Caribbean	0.5	11.3	2.9	7.5	3.1	0.7	19.8	4.5
Northern Africa and Western Asia	0.1	0.7	0.7	0.6	0.7	0.5	0.7	0.7
Oceania (excluding Australia and New Zealand)	5.4	19.1	26.8	20.7	20.9	8.5	20.7	28.6
Sub-Saharan Africa	21.3	48.9	37.7	50.9	40.5	19.3	44.8	39.6
Global	3.3	23.2	8.4	18.3	8.7	5.3	23.7	10

Source: UN-Women and World Bank, “Gender differences in poverty and household composition through the lifecycle”, based on the World Bank global monitoring database, updated in 2019.

62. Access to high-quality paid employment is needed to mitigate the risk of poverty among women, however, despite the protection from poverty that paid employment can provide, women often reduce their labour force participation upon marriage and when they are of reproductive age. Globally, over half of women of working age who are married or in a union are in the labour force, namely 52.1 per cent, compared with 65.6 per cent of those who are single or have never married and 72.6 per cent of divorced or separated women. The labour force participation rates for men indicate far less variation by marital status, with men who are married or in a union recording the highest rate of labour force participation, at 96.1 per cent. Marriage seems to depress the labour force participation rate for women, whereas it has the opposite effect on men.⁸³

63. In summary, the specific vulnerability of women between 25 and 34 years of age is driven by earlier marriage and child-rearing, combined with discriminatory social norms and gender stereotypes, which entrench their role as caregivers, and unequal power dynamics in the household, which limit their access to resources and opportunities. Moreover, when responsibility for unpaid care and domestic work is unequally divided between women and men, along with the inaccessibility of time-saving infrastructure, women face longer workdays in order to enter into paid employment, undermining their health and well-being.⁸⁴

C. Time poverty and depletion among women

64. Unlike other resources, time is finite. All responsibilities and tasks must fit within the 24 hours in a day. The concept of time poverty, therefore, is not defined by taking away or adding hours, but by how such a finite resource is used. Women and girls are time-poor when excessive hours are spent in paid and unpaid work, leaving little or no time for rest or leisure.⁸⁵ For women and girls who bear the responsibility

⁸³ UN-Women, *Progress of the World's Women 2019–2020*.

⁸⁴ Ibid.

⁸⁵ Stella Chatzitheochari and Sara Arber “Class, gender and time poverty: a time-use analysis of British workers’ free time resources”, *The British Journal of Sociology*, vol. 63, No. 3 (September 2012).

of paid and unpaid care and domestic work, time poverty often forces them to make harsh trade-offs, including having less time for self-care, which can have adverse impacts on their health and well-being and is described in some studies as depletion (see box II).

65. There are several factors that determine the allocation of time among individuals in a household. Demographic factors, such as the presence of children and older people requiring care, play a key role. Economic factors are also important, requiring individuals to balance the financial and care needs of the family with paid work, subsistence production and unpaid work. Social norms, which set expectations of how individuals should spend their time, also play a critical role, in particular the expected division of labour between women and men.⁸⁶

66. Because of discriminatory social norms and gender stereotypes about care as being “women’s work”, women must often balance competing demands on their time, including earning an income alongside their unpaid care and domestic responsibilities. Data from time-use surveys are key to understanding how people spend their time and, consequently, time poverty. The comparability of the data across countries, however, remains an issue. Accurately capturing simultaneous tasks, as well as the type and intensity of various forms of work, are also a challenge (see box V).

Box V

Measuring unpaid care and domestic work: time-use surveys

Understanding differences between women and men and within groups of women in the use of time is the first step towards reducing and redistributing unpaid care and domestic work between women and men and between families and communities. Time-use surveys remain unavailable or ad hoc in many countries, and few are carried out regularly.^a In addition, differences in methodology and definitions constrain the comparability of data in the following three problem areas: survey design and administration; measurement of time devoted to direct, or person-to-person, care; and the classification of unpaid household work and production of goods for personal consumption.

Design and administration of time-use surveys

Time-use surveys typically comprise data based on two forms of data collection, namely, time diaries, which contain a complete enumeration of activities during a 24-hour period, often using international classifications of time-use activities, and methodologies, which are based on a set of stylized questions on a reference period of one week.^b The direct observation method is a third option, which is costly and rarely used^c but can be useful in contexts in which literacy levels are low and self-reporting is therefore difficult. Discrepancies, even small ones, in the design of surveys have implications for the comparison of basic tabulations across countries.

Measurement of time devoted to direct care

Measurements of time devoted to direct care, including both active and supervisory care, vary across surveys, leading to inconsistent and incomplete measurement. The need to remain physically present to supervise and assist young children, household members with disabilities and frail older persons is a major constraint on the labour force participation of working-age adults, in particular

⁸⁶ Asliahn Kes and Hema Swaminathan, “Gender and time poverty in sub-Saharan Africa”, in C. Mark Blackden and Quentin Wodon, eds., *Gender, Time-use, and Poverty in Sub-Saharan Africa*, World Bank Working Paper No. 73 (Washington, D.C., World Bank, 2006).

women. The extent to which supervisory care is captured in time-use surveys varies. Even when supervisory care is included in the survey questionnaire, it is sometimes excluded from the calculation of unpaid labour time.^d

Classification of unpaid domestic work and goods for personal consumption

The production of goods for personal consumption falls within the production boundary of the System of National Accounts and is thus included as paid work, whereas the production of household goods for personal consumption falls outside the production boundary and is thus included as unpaid work. The collection of firewood and carrying of water are typically deemed paid work even if they are rarely captured in labour force surveys, whereas building a fire or heating water are considered unpaid work.^e

In 2013, at the nineteenth International Conference of Labour Statisticians, convened by ILO, the leading authority for measurement issues in the field of labour, it was decided to revise and expand the definition of work and narrow the definition of the labour force. Under the new definitions, the production of household goods for personal consumption is included in the broader definition of work, but individuals engaged exclusively in the production of goods for their own consumption are no longer part of the labour force, making their contributions invisible.^f The conceptual ambiguity surrounding activities predominantly performed by women leads to inconsistencies in the measurement of paid and unpaid work.

^a As many as 84 countries have conducted time-use surveys at least once since 2000, but only 24 per cent of them have data from 2010 or later. See UN-Women, *Turning Promises into Action*.

^b Time-use surveys based on stylized questions are a minority and problematic in cases in which the list of activities is too short and limited.

^c Mayra Buvinic and Elizabeth M. King, *Invisible No More? A Methodology and Policy Review of How Time-use Surveys Measure Unpaid Work* (Washington, D.C., Data2X, 2018).

^d Ibid.

^e In the classification used for Latin America, the Classification of Time-Use Activities for Latin America and the Caribbean, such activities are classified as the production of goods for personal use but many surveys distinguish the latter category as unpaid work and include time spent on such activities in the total count of time spent on unpaid work.

^f Stephan Klasen and others, *What drives female labor force participation? Comparable micro-level evidence from eight developing and emerging economies* (Institute of Labor Economics, 2019). In sub-Saharan Africa, a substantial share of the population, many of whom are women, are involved in subsistence farming, namely, the production of goods for their own consumption. Depending on how the new definitions are applied, women engaged in such activities will no longer be captured as engaged in the labour force.

1. Time spent on unpaid care and domestic work: higher rates for women than men, especially with children present in the household

67. Globally and in all regions, women spend more hours of the day on unpaid care and domestic work than men, on average three times as much. If paid and unpaid work are combined, women in almost all countries work longer hours than men each day.

68. Data from 88 countries and areas indicate that women on average spend 18 per cent of the day on unpaid care and domestic work, whereas men allocate 7 per cent of the day to the same activities.⁸⁷ The gender gap in unpaid care and domestic work is wide across all regions, but is at its widest in the Northern Africa and Western Asia

⁸⁷ United Nations, Department of Economic and Social Affairs, Global SDG Indicators database Available at <https://unstats.un.org/sdgs/indicators/database/> (accessed on 29 May 2019).

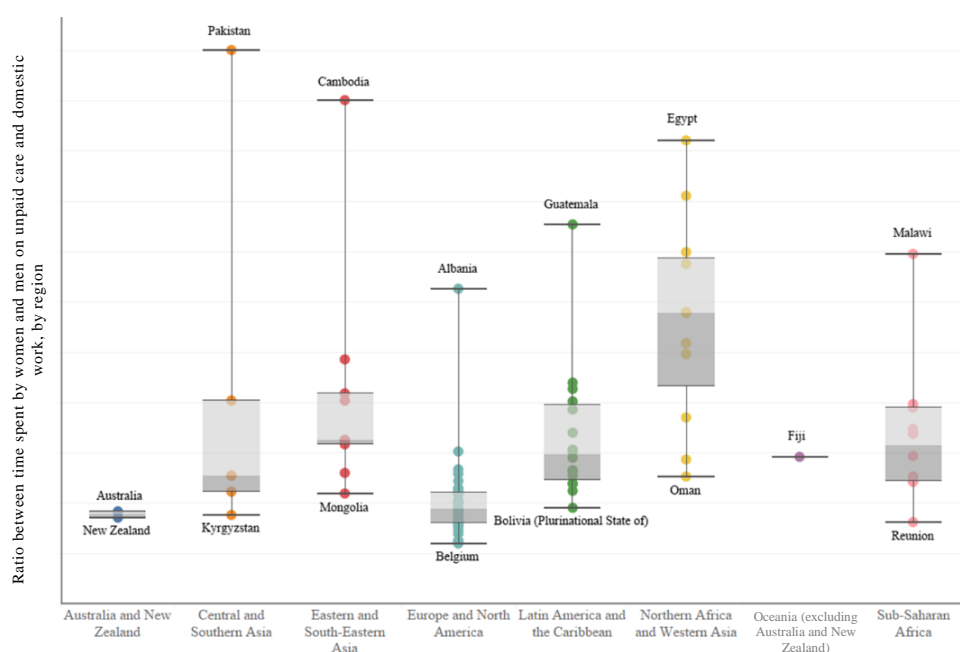
region, in which women do six times as much unpaid care and domestic work as men (see figure V).

69. Disaggregated by age, the data for a subset of 29 countries indicate that the time spent on unpaid care and domestic work is highest among women between 25 and 44 years of age, compared with those between 15 and 24 years and with those between 45 and 64 years.⁸⁸ The peak in care responsibilities among women coincides with the period during which they are most likely to have young children at home. As noted above, it is also the stage in the life course in which they are significantly more likely to face income poverty compared with men.

70. The gap between women and men in time spent on unpaid care and domestic work is widest among those with children at home. Available data for a sample of 49 countries indicate that women with children at home spend more time each day than men on childcare. Some 32 per cent of women are engaged in childcare, compared with 17 per cent of men. In 14 of the 49 countries in the study, the time that women spent caring for children is one hour more than the time spent by men.⁸⁹

Figure V

Ratio between time spent by women and men on unpaid care and domestic work, by region



Source: UN-Women, *Progress of the World's Women 2019–2020*.

Note: These data are the most recent available data for 88 countries and territories between 2001 and 2017. The age group is 15 years and older, where available, or 18 years of age and older in Ghana. In a number of cases, data are for those 10 years of age and older or 12 years of

⁸⁸ Based on a subsample of 29 countries in Latin America and the Caribbean and developed regions, as well as data for South Africa. See A. Mukherjee, “Global Patterns on Gender Differences in Time Spent on Unpaid and Paid Work”, UN-Women discussion paper (2018).

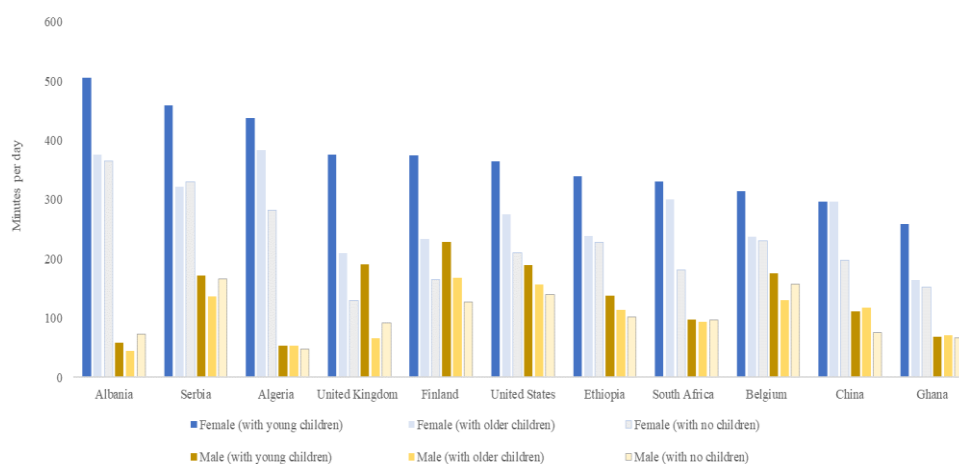
⁸⁹ J. Charmes, “Measuring time-use: an assessment of issues and challenges in conducting time-use surveys with special emphasis on developing countries. Methodological inconsistencies, harmonization strategies and revised designs”, report for the UN-Women flagship programme initiative “Making Every Woman and Girl Count” (2019); and J. Charmes, “How women and men spend their time across the world and how it is changing over time”, invited paper to the panel session on the theme “Women’s initiative and development over the course of civilization”, 2019 Beijing Forum.

age and older. In the case of Thailand, for 2015, data are for those 6 years of age or older, and in the United Republic of Tanzania, for 2014, for those 5 years of age or older. Data for Bulgaria, Denmark, Latvia the Netherlands, Slovenia and Spain correspond to time spent on unpaid care by those between 20 and 74 years of age only. The shaded box represents the middle 50 per cent of countries in the region in terms of the ratio between time spent by women and men on unpaid care and domestic work. The line below the box represents the range for the bottom 25 per cent of countries, with the country with the lowest ratio identified. The line above the box represents the range for the top 25 per cent of countries, with the country with the highest ratio identified. Dark and light grey shading in the figure represent the range for the middle 50 per cent of countries divided into the second and third quartiles. In the case of Qatar, only urban areas are covered in the analysis. Differences across countries should be interpreted with caution on account of the heterogeneity of surveys and countries in definitions, methodology and sample coverage. See United Nations, Department of Economic and Social Affairs, Global SDG Indicators Database for further information on the country-level data.

71. The age of children influences the time that women spend on unpaid care and domestic work. The unpaid care and domestic work undertaken by women is greater when young children are present, compared with when only older children are present. The amount of work decreases as the age of the youngest child increases (see figure VI).

Figure VI

Time spent on unpaid care and domestic work in selected countries, by gender and presence of children in the household, latest available year



Source: ILO, *World Employment Social Outlook: Trends 2018*.

Notes: The figure includes the following 11 countries in which time-use surveys were conducted between 2008 and 2016: Albania (2010–2011), Algeria (2012), Belgium (2013), China (2008), Ethiopia (2013), Finland (2009), Ghana (2009), Serbia (2010–2011), South Africa (2010), United Kingdom of Great Britain and Northern Ireland (2015) and United States of America (2016). The age group is 15 years and older. The term “young children” refers to the presence of children between 0 and 4 years of age in the household, and the term “older children” refers to the presence of children between 11 and 17 years.

72. In addition to the presence of children, household wealth and income status also make a difference in the size of the gender gap in unpaid care and domestic work. A study of 11 countries in Central and South America found that women in households in the poorest quintile allocate significantly more time to unpaid care and domestic

work than those in the richest quintile. Time inputs for men were consistently low, regardless of the household income level.⁹⁰

73. Global data on the time spent on arduous tasks, such as the collection of water and firewood, disaggregated by sex, are not available for all countries. However, based on available data, women allocate more time than men each day to those activities. A study of time use in Madagascar, disaggregated by sex, found that women spent half an hour more per day than men collecting firewood. A time-use study in Pakistan found that women allocated close to half an hour more per day collecting water than men.⁹¹

74. Owing to discriminatory social norms and gender stereotypes regarding unpaid care and domestic work, there is often a high degree of intergenerational transfer of unpaid care work from women to children, in particular girls, rather than redistribution between women and men. A study of time use and time poverty across four countries found that, in addition to women shouldering the responsibility for unpaid care work, children were also responsible for such work as collecting water and fuel. Girls performed such tasks more often than boys, at 32 per cent and 20 per cent, respectively.⁹² The result is the intergenerational transfer of time poverty and an increased risk of poverty among future generations.

2. Combining paid work with unpaid care and domestic work: no time for rest and leisure

75. Not only do women carry out a greater share of unpaid care and domestic work, but when they engage in paid work, as is often the case, their total work time is higher than men's; women spend on average an hour more each day than men on paid and unpaid care and domestic work.⁹³ In Latin America and the Caribbean, women engaged in paid and unpaid care and domestic work do an hour and a half more work on average each day than men.⁹⁴ The excessive amount of time spent by women on paid and unpaid work results in physical and emotional depletion and leaves little discretionary time for personal care or leisure.

76. Women's time poverty is particularly exacerbated in low-income contexts because of limited access to public services and basic infrastructure. In a time-use study in Guatemala, survey data revealed that women were 18 percentage points more likely than men to face time poverty.⁹⁵ Among those most affected by time poverty were indigenous women, women with young children at home and women in low-income households.⁹⁶ Similarly, in Guinea, time-use data indicate that women, overall, are 15 percentage points more likely to be time-poor than men. Among those in rural settings, the gap is even wider. Women living in rural areas are 22 percentage points more likely to be time-poor than men.⁹⁷

⁹⁰ UN-Women, *Progress of the World's Women 2019–2020*.

⁹¹ Based on sample in which both women and men engaged in water collection activities.

⁹² Chopra and Zambelli, *No Time to Rest*.

⁹³ Based on a sample of 73 countries. See J. Charmes, "Measuring time-use: an assessment of issues and challenges in conducting time-use surveys with special emphasis on developing countries. Methodological inconsistencies, harmonization strategies and revised designs", and "How women and men spend their time across the world and how it is changing over time".

⁹⁴ Sarah Gammage, "Time pressed and time poor: unpaid household work in Guatemala", *Feminist Economics*, vol. 16, No. 3 (2010).

⁹⁵ Ibid. For measurement purposes, time poverty was defined in the study as at least 12 hours per day dedicated to a combination of paid and unpaid care and domestic work.

⁹⁶ Ibid.

⁹⁷ Elena Bardasi and Quentin Wodon, "Working long hours and having no choice: time poverty in Guinea", *Feminist Economics*, vol. 16, No. 3 (2010). Based on a time poverty line of 50 hours per week.

77. The context and nature of paid and unpaid work also contribute to time poverty and depletion. In rural contexts, women have a prominent role in agriculture and also do the bulk of the unpaid care and domestic work, including gathering water and firewood, processing food crops, cooking, caring for children and the elderly and tending to the sick. The time and effort needed to fulfil such responsibilities are intensified in the absence of basic infrastructure (see sect. IV).⁹⁸

78. When asked about competing demands, women report feeling depleted, with no time left for rest and leisure. Researchers conducting a study⁹⁹ in Indore, India, were informed by women that: “We go to sleep at 11 p.m. and then wake up at 4 a.m. or 5 a.m. in the morning; there are some days when we go to sleep without food since we’re too tired to eat”. Another interviewee, Manjari Rajkumar, an 18-year-old tribal woman with two children who worked with a brick-kiln and in construction, reported the following:

One has to lift water and get it. It is very far; you take it on your head and bring it; one’s head too hurts. Once you are back with water, one does all the work like cleaning and cooking, all the work, to bathe and clean the kids, take a shower oneself, clean clothes. All the work and then there is no rest at all.

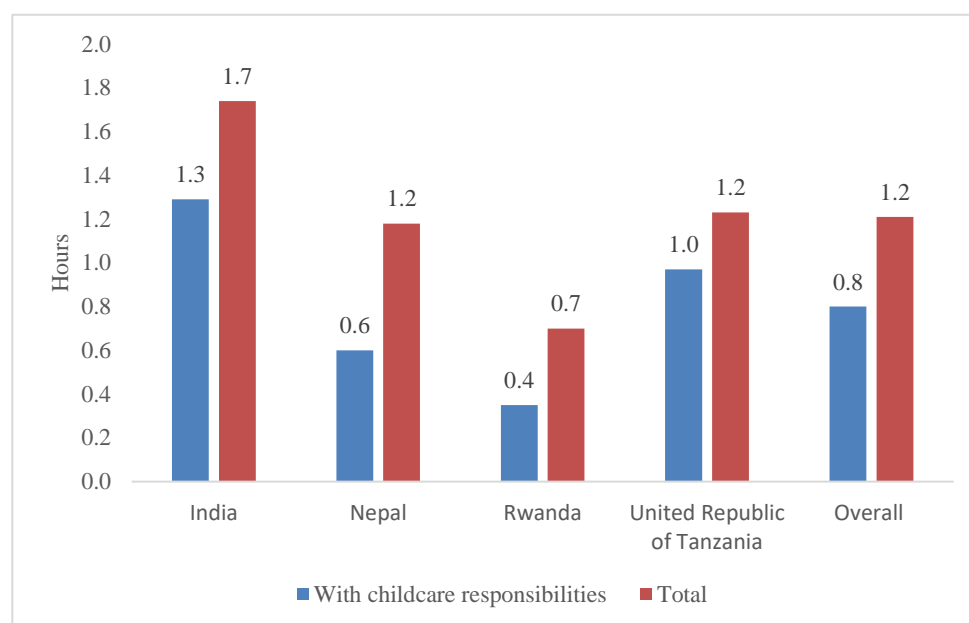
79. Women obtain very little respite from their unpaid care and domestic work responsibilities. In a time-use study conducted in India, Nepal, Rwanda and the United Republic of Tanzania to measure changes in the distribution of unpaid care and domestic work during periods when women were pregnant, researchers found that, overall, men took on more unpaid care and domestic work. Direct person-to-person care, however, was taken up by either older women, in 31 per cent of families, or daughters, in 16 per cent. The same study also looked at how women’s sleep patterns were affected by time poverty, and researchers found that women across the four countries had high levels of interrupted sleep. In India, for example, when women reported sleeping 8 hours, only 5 hours and 17 minutes were uninterrupted, signalling significant physical and emotional depletion. Any time spent on personal care and hygiene had to take place at the same time as their caregiving activities. In the United Republic of Tanzania, for example, when women reported spending a total of 1.25 hours per day on personal care, hygiene and leisure, for an hour of that time they were also engaged in the direct care of children in the home (see figure VII).¹⁰⁰

⁹⁸ Kes and Swaminathan, “Gender and time poverty in sub-Saharan Africa”.

⁹⁹ Chopra and Zambelli, *No Time to Rest*; and Shirin Rai, Catherine Hoskyns and Dania Thomas, “Depletion and social reproduction”, Centre for the Study of Globalisation and Regionalisation working paper, No. 274/11 (2010).

¹⁰⁰ Chopra and Zambelli, *No Time to Rest*.

Figure VII
Time spent on personal care, hygiene and leisure in selected countries



Source: Chopra and Zambelli, *No Time to Rest*.

80. The excessive amount of time spent by women on paid and unpaid care and domestic work also results in physical and emotional depletion. The results of a study conducted in the Philippines, Uganda and Zimbabwe revealed a relationship between long hours of care work and women reporting injury and illness linked to such tasks. In the Philippines, 74 per cent of women reported an injury, illness, disability or other physical or mental harm as a result of collecting water for laundry. Headaches linked to care work were reported by 47 per cent of women interviewed in the Philippines, 20 per cent in Uganda and 28 per cent in Zimbabwe. About one third of the women in all three countries also reported that they had not had time for cooking, washing clothes and personal care in the preceding week.¹⁰¹

81. Time poverty not only has a depleting effect on women, it also inhibits the ability of societies to achieve gender equality. An analysis of time poverty in a group of women organic coffee farmers in Mexico revealed that, owing to time poverty arising from paid and unpaid work responsibilities, they were unable to fully participate in organizational governance of the coffee business, resulting in very low levels of women in leadership roles. They missed out on valuable opportunities to advance their careers and contribute to their economic security, including leadership and business development skills.¹⁰²

D. Deprivation of access to public services and basic infrastructure

82. The intensity and nature of unpaid care and domestic work vary widely both across and within countries, reflecting the ways in which deprivations in other

¹⁰¹ Lucia Rost, and Sandrine A. Koissy-Kpein, *Infrastructure and Equipment for Unpaid Care Work: Household Survey Findings from the Philippines, Uganda and Zimbabwe – 2017 Household Care Survey Report* (Oxford, United Kingdom, Oxfam International, 2018).

¹⁰² Sarah Lyon, Tad Mutersbaugh and Holly Worthen, “The triple burden: the impact of time poverty on women’s participation in coffee producer organizational governance in Mexico”, *Agriculture and Human Values*, vol. 34, No. 2 (June 2017).

dimensions, including access to income, public services and basic infrastructure, such as basic drinking water, sanitation and clean energy, exacerbate the time constraints that women face as they juggle competing demands. In poor rural and urban contexts, in which households are deprived of access to public services and basic infrastructure, women most often bear the brunt by carrying out tasks such as collecting water for household use. There is evidence that lack of access to infrastructure and time-saving appliances for women increases their likelihood of experiencing time poverty.¹⁰³

83. Moreover, the data on access to public services and basic infrastructure indicate large disparities within countries, with implications for income and time poverty among women (see sect. I). The intersection of income and geography is a predictor of access; remote, rural areas characterized by high rates of poverty, as well as slums and informal settlements with high concentrations of poverty, are often most deprived of access to infrastructure and service provision.

1. Access to public services and basic infrastructure among the rural poor

84. Women and girls are responsible for collecting water in 80 per cent of households without access to drinking water on the premises.¹⁰⁴ The task of collecting water is particularly arduous for those in the poorest households in rural areas. In Lesotho, the average time needed for a round trip to and from a water source for those who do not have water on the premises is 39.5 minutes, yet the time varies widely across households. In rural households, water collection takes an average of 45.5 minutes, whereas in urban households it takes 17.6 minutes. Among the poorest households, the average time is 48.3 minutes, compared with 29.7 among the richest.¹⁰⁵

85. Across developing countries, in urban areas, there is better access to drinking water than in rural areas, and high-income groups have significantly better access than low-income groups.¹⁰⁶ In Pakistan, 41 per cent of urban households have access to safely managed drinking water, compared with 32 per cent of rural households; large differences also exist across income and ethnic groups.¹⁰⁷ The results of a study in Uganda indicate that geographical inequalities in access to water have significant impacts on time poverty among women. Women in the Kaabong district of Uganda, where access to water is limited, viewed water collection as particularly onerous from the perspective of time poverty.¹⁰⁸

86. Similar to the situation regarding water, women and girls are tasked with the responsibility of searching for firewood when other energy sources are unavailable. Women travel long distances in search of firewood needed for cooking and heating their homes. They risk being subjected to violence on the way and face long-term health problems related to the impact of indoor air pollution and carrying heavy loads on their bodies.

¹⁰³ The results of a study in Guatemala indicated that a lack of access to infrastructure and time-saving appliances increased the probability of experiencing time poverty among women. There was a statistically significant relationship between the lack of access to piped water and the probability of women experiencing income and time poverty. In addition, there was a significant relationship between the probability of women experiencing income and time poverty and whether a household had an electric or gas stove and whether the household used fuelwood. See: Gammage, "Time pressed and time poor".

¹⁰⁴ World Health Organization (WHO) and UNICEF, *Progress on Drinking Water, Sanitation and Hygiene: 2017 Update and SDG Baselines* (Geneva, 2017).

¹⁰⁵ UN-Women calculations based on data from ICF International.

¹⁰⁶ UN-Women, *Progress of the World's Women 2015–2016*.

¹⁰⁷ WHO and UNICEF, *Progress on Drinking Water, Sanitation and Hygiene*.

¹⁰⁸ Oxfam International, *Gender Roles and the Care Economy in Ugandan Households: The Case of Kaabong, Kabale and Kampala Districts* (Oxford, United Kingdom, 2018).

87. The use of solid fuels for cooking and heating is widespread in sub-Saharan Africa. An estimated 85.7 per cent of households rely on such fuels, but the deprivation of access to clean energy for household use is evident across developing countries. Disparities in wealth and between rural and urban areas are noteworthy, with low-income and rural households relying on solid fuels to a much greater extent than high-income and urban households. The results of a study on the effects of time poverty on poor rural women in Nepal¹⁰⁹ illustrates the impact that the lack of access to water and clean energy has on well-being among women. Kamla Giri, of Chandannath, Nepal, who was interviewed for the study in May 2016, reported the following:

We don't even get to sit; resting is not possible. When we go to collect firewood in the morning, we carry flatbread with salt. How long can we survive on that? We don't have water to drink. We come back thirsty and tired carrying the basket. Even after coming back we have to arrange many things, such as water, the stove, food, the grass and look for the cattle.

88. Apart from increasing time poverty for women, the deprivation of access to infrastructure and basic services have an impact on health and well-being, including on the ability of women to practise adequate menstrual hygiene management (see box VI).

Box VI

Deprivation of access to water and sanitation and the impact on menstrual hygiene management

Lack of adequate water, sanitation and hygiene has an adverse impact on the well-being of women and girls. When water is not available on the premises, it is women and girls who most commonly bear the time-consuming and physically exacting burden of water collection.^a Ill health caused by lack of water, sanitation and hygiene services has a similar impact on well-being among women; it increases the need to care for sick family members, which is a responsibility that falls primarily on women and girls. In contrast, when access to services and the quality of services are improved, it has a positive impact on the well-being of women and their families. Studies show a clear association between adequate access to water, sanitation and hygiene services and health outcomes, including reduced neonatal mortality,^b skin infections,^c gastrointestinal illnesses, such as diarrhoea, and acute respiratory infections. A less explored implication of lack of adequate access to water and sanitation infrastructure is its impact on menstrual hygiene management.

A recent cross-national study of 18 low-income and middle-income countries highlights the linkages between lack of access to water, sanitation and hygiene services and whether women and girls are able to engage in menstrual hygiene management in a way that upholds their privacy and dignity.^d Critical components of menstrual hygiene management include privacy and access to soap and water. As data collection on specific indicators is still extremely limited,^e the study used data on the population that was practising open defecation and the population without an observed handwashing facility with soap and water on the premises to estimate the number of women and girls who were unable to engage in adequate menstrual hygiene management. Standardized estimates on time trends for those two indicators are being tracked globally in the global monitoring framework for the Sustainable Development Goals.

¹⁰⁹ Anwesha Ghosh and others, *A Trapeze Act: Balancing Unpaid Care Work and Paid Work by Women in Nepal*, Institute of Development Studies working paper, No. 500 (Brighton, United Kingdom, Institute of Development Studies, 2017).

In 2015, 13 per cent of the world's population practised open defecation, suggesting that at least half a billion women and girls faced particular challenges in finding privacy for menstrual hygiene management. The rate of open defecation varies greatly by country, with the highest percentages reported in rural parts of the Niger (86 per cent), Mozambique (52 per cent), Ethiopia (34 per cent) and Nigeria (34 per cent).^f Similarly, the percentage of women who lack access to handwashing facilities with soap and water on the premises also varied widely. Averages for countries such as Honduras, Tajikistan and Tunisia were below 30 per cent, whereas averages in Ethiopia, Mozambique, Nigeria and Uganda were well over 80 per cent. The lack of handwashing facilities with soap and water on the premises suggests that women in such groups face particular difficulties in obtaining access to soap and water to practice adequate menstrual hygiene management.^g

The lack of adequate water, sanitation and hygiene services, including the supply of hygiene materials, assets, including social recognition of the importance of menstrual hygiene management, and spaces, including safe, private and readily accessible spaces for washing and bathing, inhibits the ability of millions of women and girls to practise adequate menstrual hygiene management. Not only does it infringe upon their dignity and well-being, it also often limits their ability to participate equally in education, income generation and other activities. Increasing access to adequate infrastructure promotes the ability of women and girls to escape poverty and fully enjoy their human rights.^h

^a WHO and UNICEF, *Progress on Drinking Water, Sanitation and Hygiene*; and Mami Sommer and Bethany Caruso "Menstrual hygiene management and WASH", in Jamie Bartram and others, eds., *Routledge Handbook of Water and Health* (Abingdon, Oxon, Routledge, 2015).

^b Victor Rhee and others, "Maternal and birth attendant hand washing and neonatal mortality in southern Nepal", *Archives of Pediatrics and Adolescent Medicine*, vol. 162, No. 7 (July 2009).

^c Stephen P. Luby and others, "Effect of handwashing on child health: a randomized controlled trial", *The Lancet*, vol., 366, No. 9481 (July 2005).

^d Libbet C. Loughnan and others, "What can existing data on water and sanitation tell us about menstrual hygiene management?" *Waterlines*, vol. 35, No. 3 (July 2016).

^e Information is being collected for the sixth and current round of the Multiple Indicator Cluster Survey on menstrual hygiene management in countries globally, including the impact on participation in and use and disposal of menstrual hygiene management materials, and the availability of services, assets and spaces for such management.

^f Loughnan and others, "What can existing data on water and sanitation tell us about menstrual hygiene management?"

^g Ibid.

^h Ibid.

2. Access to public services and basic infrastructure among the urban poor

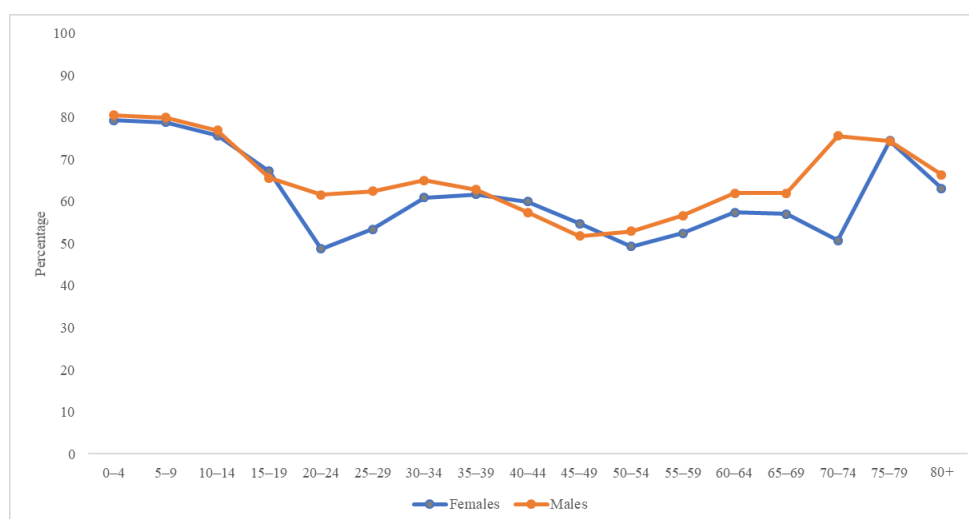
89. Moving from rural areas to cities often offers the hope of new opportunities for women and girls, yet inequalities in access to benefits and opportunities persist, contributing to urban poverty. There tend to be lower rates of extreme poverty in urban areas compared with rural areas. In fact, globally, 80 per cent of those living on less than US\$ 1.90 per day live in rural areas. The other 20 per cent of the extreme poor live in urban areas, most often in overcrowded slums that lack access to public services and basic infrastructure.

90. Based on data from 51 countries across Southern Asia, Latin America and the Caribbean and sub-Saharan Africa, women between 20 and 34 years of age are more likely to live in slums than men. Those living in slum conditions lack access to basic drinking water, defined as access to an improved water source that is available within a 30-minute round trip, basic sanitation, which refers to the use of improved toilets that are not shared by several households, durable housing, sufficient living space or

security of tenure. In Kenya approximately 63 per cent of women between 20 and 34 years of age live in slums, compared with 54 per cent of men in the same age group (see figure VIII). For a large number of women living in slums, the lack of access to basic infrastructure leads to time poverty and adverse effects on their well-being.¹¹⁰

Figure VIII

Proportion of individuals living in slums in Kenya, by age and sex



Source: Azcona and others, *The Effects of Rapid Urbanization in a Gender Unequal World* (forthcoming).

91. In South Africa, over 4 million inhabitants live in slum conditions. Time-use data show that women in such settings allocate significant amounts of time to domestic work¹¹¹ (201 minutes per day) and the care of persons (33 minutes per day), which is higher than the national average for South Africa of 195 minutes per day for domestic work and 29 minutes per day for the care of persons. In addition, women living in slums spend significantly more time engaged in informal work, which is often characterized by low pay and is of low quality. In South Africa, that includes own-account activities, such as food processing, textile work and petty trading. Women in slums engage in such forms of work at higher rates than their counterparts in other settings, including in urban formal, rural formal and tribal areas.¹¹²

92. It is estimated that, by 2050, urban areas will house 68 per cent of all the people in the world.¹¹³ By 2030, one in every three people will live in a city with at least half a million inhabitants.¹¹⁴ Unless there are investments in the provision of public services and basic infrastructure, women will face an elevated risk of income poverty and time poverty in urban settings, in particular where their access to decent work and economic resources remains limited.

¹¹⁰ G. Azcona and others, *The Effects of Rapid Urbanization in a Gender Unequal World* (forthcoming).

¹¹¹ This is referred to in the survey instrument as household maintenance work.

¹¹² South Africa, Statistics Division, *South Africa Time-use Report 2010* (2010).

¹¹³ United Nations, Department of Economic and Social Affairs, Population Division. 2018. *2018 Revision of World Urbanization Prospects*.

¹¹⁴ United Nations, Department of Economic and Social Affairs, *The World's Cities in 2016* (New York, 2016).

E. Multiple forms of discrimination and the furthest behind: deepening poverty and disadvantage

93. In order to leave no one behind, the benefits of sustainable development must reach everyone. Women and girls who endure multiple and intersecting forms of discrimination, including on the basis of wealth, location and ethnicity, are found to face the greatest deprivations, not only in one dimension but across multiple dimensions of well-being. A study of multidimensional deprivation in Colombia, Nigeria and Pakistan highlights large disparities within and between countries across a wide range of outcomes related to the Sustainable Development Goals, including in access to education, health, basic water and sanitation and decent work.

94. Poor women in rural areas face significant deprivation of access to public services and basic infrastructure, which is further compounded for marginalized groups of women. As discussed in the previous section, the lack of access to clean energy and water has significant implications for the time and well-being of women. For example, in all three countries, women and girls in the richest urban households register the highest access rates with respect to clean fuels, and those in the poorest rural households the lowest rates. In Colombia, the most deprived were indigenous women and girls in the poorest rural households; 75.8 per cent lack access to clean cooking fuel, compared with 0 per cent of women and girls in the richest urban households.¹¹⁵

95. In Pakistan, where only 38.1 per cent of households in rural areas have drinking water within a 100-metre distance, women between 20 and 39 years of age reported spending on average 5.4 hours on domestic work, including fetching water and fuel, compared with 1.6 hours reported for men. The same women reported allocating less time to rest owing to illness: 4.6 hours, compared with 5 for men.¹¹⁶ Data on the deprivation of access to basic drinking water showed that differences in access were compounded by location, wealth and ethnicity: 51 per cent of Pashtun women in poorest rural households lacked access to basic drinking water services, compared with only 0.3 per cent of Sindhi women in richest urban households.¹¹⁷

96. Women in poor households often face multiple deprivations, which increases their risks of also facing income poverty and time poverty. In Nigeria, an estimated 15 per cent of all women between 18 and 49 years of age, or 5.2 million people, are simultaneously deprived in four dimensions related to the Sustainable Development Goals, namely, education, health, work and access to basic infrastructure. Such women were not only married before the age of 18 years and deprived of education, but also reported no agency in health-care decisions and that they were not working at the time of the survey. Almost all respondents (99.9 per cent) lacked access to clean cooking fuel in their homes, and 59.0 per cent lacked access to basic water services. Similarly, 50 per cent lacked access to basic sanitation services. The deprivations were particularly stark for poor women who faced multiple forms of discrimination. Hausa and Fulani women were disproportionately represented among those experiencing multidimensional deprivation, making up 54.6 per cent and 19.2 per cent of the total, respectively, a much higher share than their corresponding share within the country's population, at 32.3 per cent and 7.7 per cent, respectively.¹¹⁸

¹¹⁵ UN-Women, *Turning Promises into Action*.

¹¹⁶ Pakistan, Statistics Division, *Time-use Survey 2007* (2009).

¹¹⁷ UN-Women, *Turning Promises into Action*.

¹¹⁸ Ibid.

III. Strengthening income security among time-poor women: the role of gender-responsive social protection systems

A. Introduction

97. As noted in section II, the risk of being income-poor coincides with a period in women's life course when they are caring for young children and experiencing a constraint on the time that they have available for paid work, creating a cycle of income poverty and time poverty. Income-pooling within the household through intrahousehold transfers is an important mechanism through which non-earners can be protected from poverty. However, in many low-income contexts, a single, often low, income is insufficient to pull the entire household out of poverty. Even when women with young children in low-income settings shoulder a heavy burden of unpaid care and domestic work, the compulsion to earn an income to meet basic needs pushes them into whatever form of paid work they can find. The pressure to engage in paid work is particularly acute when there are no other earners in the household with whom women can pool their income, which is evident in the heightened risk of poverty of lone-mother households.

98. Social protection systems that are gender-responsive and age-responsive can deliver the social transfers and services needed to provide income security at specific junctures in women's life course when they are most vulnerable to poverty, especially before and after childbirth and when they have young children.¹¹⁹ Women who live in poverty also need employment opportunities that meet the standards of decent work, to support themselves and their families in the longer term. To be gender-responsive, women's unpaid care and domestic work must be taken into account in the design and implementation of both social protection systems and labour market interventions, rather than their operating on the basis of a masculinist norm under which workers are expected to be unfettered by childcare and domestic responsibilities.

99. In the present section, the ways in which social protection policies and labour market interventions can work in tandem to provide women with sustainable routes out of poverty is explored, building on the deliberations at the sixty-third session of the Commission on the Status of Women, held in March 2019, and contributing to advancing its recommendations on social protection systems, public services and sustainable infrastructure for gender equality and the empowerment of all women and girls, through concrete policy analysis and lessons learned (see [E/CN.6/2019/3](#) and [E/2019/27-E/CN.6/2019/19](#)).

100. Section B contains an examination of why women of reproductive age in low-income settings need income protection, especially around the time of childbirth and in the period of their life course in which they have young children. Section C contains some of the key social protection instruments that can provide income security to working-age women. In recognition of the fact that the best form of social security remains a decent job,¹²⁰ section D contains an analysis of a range of interventions aimed at supporting the incomes and livelihoods of women who live in poverty, and section E contains some overarching lessons learned.

¹¹⁹ See [E/CN.6/2019/3](#); and ILO, *World Social Protection Report 2017–19*.

¹²⁰ ILO, *Social Security for Social Justice and a Fair Globalization* (Geneva ILO, 2011), p. 17.

B. Harsh trade-offs: the vicious cycle of poverty and arduous paid and unpaid work among women

101. Narratives of the economic empowerment of women posit engagement in paid work as the pathway through which women can find empowerment and sustained routes out of poverty.¹²¹ Although the argument may hold in contexts in which women are able to acquire access to decent employment opportunities, it has far less purchase in contexts in which women are compelled to take on poorly paid, physically exacting and unprotected forms of work. Research on labour markets in developing countries has drawn attention to the structural features of economies that create barriers for access for women. They include social and legal barriers to participation in some contexts and pervasive informality and gender-based occupational segregation in many others, including within the informal economy itself, that concentrate women in more precarious and low-return economic activities.¹²² Unpaid responsibilities for care and domestic work place further constraints on the ability of women to acquire access to better paid work that may be at a distance, entailing time, transport costs and risks to their safety, especially when those factors are compounded by restrictive social norms that limit their mobility.¹²³

102. Globally, informal employment constitutes a greater source of employment for men than for women.¹²⁴ Of the 2 billion workers in informal employment worldwide, 740 million are women. The global averages hide important cross-country variations, however. In low-income and lower-middle income countries, a higher proportion of women than men are in informal employment: 92.1 per cent of employed women and 87.5 per cent of employed men in low-income countries and 84.5 and 83.4 per cent, respectively, in lower-middle income countries.¹²⁵ Furthermore, women in the informal economy are more often found working in the most vulnerable situations, for example as contributing family workers. Income losses owing to poor health, combined with high out-of-pocket payments in the absence of social health protection, are a major cause of poverty among women who work in the informal sector.

103. There is a clear positive relationship between poverty and informality; the poor face higher rates of informal employment, although with some important disparities owing to the fact that employment is an individual-based measure, whereas poverty is measured at the household level and thereby strongly affected by household size and composition.¹²⁶ It is noteworthy that, when poverty rates are compared between women and men who are in informal employment in most developing countries, and more generally in most countries that have the highest incidence of poverty, more women than men in informal employment live in households that fall below the poverty line.¹²⁷

104. In low-income settings, women's engagement in paid work is often a strategy for coping with household poverty, involving harsh trade-offs between the need for income for household survival and the time allotted for unpaid care and domestic work. As illustrated in figure IX, although the presence of young children in the household dampens women's labour force participation (it increases men's

¹²¹ Woetzel and others, *The Power of Parity*.

¹²² Martha Chen and others, *Progress of the World's Women 2005: Women, Work and Poverty* (New York, UNIFEM, 2005); and ILO, *Women and Men in the Informal Economy*.

¹²³ James Heintz, "Stalled progress".

¹²⁴ According to ILO, 63.0 per cent of all employed men and 58.1 per cent of all employed women are in informal employment. See ILO, *Women and Men in the Informal Economy*.

¹²⁵ ILO, *Women and Men in the Informal Economy*.

¹²⁶ Ibid.

¹²⁷ Ibid.

participation) in middle-income and high-income countries; in low-income countries, it does not have a similar impact. In poor settings, poverty may in fact compel women to join or remain in the workforce to support their families, even when young children are present in the household.¹²⁸

Figure IX

Impact of the presence of children under 6 years of age in the household on labour force participation, by sex and country income group



Source: ILO, *World Employment Social Outlook: Trends 2018*.

Note: Latest available year used for global and income group percentages. Percentages for middle-income and low-income countries include men and women 18 to 54 years of age; for high-income countries include women and men 25 to 54 years of age, owing to higher participation in tertiary education. Ordinary least squares regressions estimated for men and women in the global and each income group percentages. All estimated coefficients are statistically significant, except for that of women in low-income countries.

105. Given the types of work that women in low-income contexts are engaged in, whether in agriculture or street hawking, the combination of heavy and intense unpaid care and domestic work and arduous and insecure paid work, exacerbated by the lack of accessible and affordable infrastructure and public services, results in physical and emotional depletion. As set out in box VII, that depletion can have adverse consequences for the health and nutrition of both women and their children.

¹²⁸ Jan Priebe, "Child costs and the causal effect of fertility of female labour supply: an Investigation for Indonesia, 1993–2008", Courant Research Centre: Poverty Equity and Growth Discussion Paper, No. 45 (Göttingen, Germany, University of Göttingen, 2010).

Box VII

Harsh trade-offs: findings from mixed-method research in Pakistan

Agriculture accounts for the bulk of the labour force participation of women in Southern Asia, but neither their agricultural work nor their care work is properly recognized or valued. Part of the price of such neglect is paid by women workers and their children, in terms of their levels of health and nutrition.

A study on the link between the agricultural work of women and their health and nutrition outcomes in Sindh Province in Pakistan was purposively designed to capture paid and unpaid work, with a focus on groups of women who face intersecting forms of inequality – on the basis of gender, caste or tribe and class. The findings of the study were that more than three times as many women worked than what was captured in official data sources. Moreover, two of every three rural mothers reported undertaking some agricultural work while pregnant, and over one third undertook physically demanding labour, such as cotton harvesting.^a Women who worked on the cotton harvest were undernourished, with a lower body mass index than other women, and their children were significantly more likely to be stunted than those of mothers who did not undertake such work, even after controlling for household socioeconomic status.^b Many of those who worked in agriculture, in particular in activities such as cotton harvesting, reported that they did so to provide food for their families. However, the low-paying work left them with insufficient income and little energy or time to ensure good nutrition for themselves or their children.

Creating change requires formal recognition of women as farmers and agricultural workers whose input must be taken into account in policymaking and who must be provided with adequate public support, including through technology, infrastructure and the provision of public services, and universal maternity benefits so as to recognize women as workers and provide them with income security.

^a Sidra Mazhar, Mysbah Balagamwala and Haris Gazdar, “The hidden economic backbone: women in agriculture”, paper presented at the International Conference on Gender, Work and Society, Lahore, Pakistan, April 2017.

^b Nitya Rao and others, “Women’s agricultural work and nutrition in South Asia: from pathways to a cross-disciplinary, grounded analytical framework”, *Food Policy*, vol. 82 (January 2019).

C. Role of social protection in enhancing income security among women

106. Social protection is recognized as a human right, including in the Universal Declaration of Human Rights. More recently, the Social Protection Floors Recommendation, 2012 (No. 202) of ILO, and its endorsement in the 2030 Agenda, has given further impetus, and provided concrete guidance, for putting into place mechanisms to guarantee income and health security. At its sixty-third session, the Commission on the Status of Women stressed the importance of establishing or strengthening inclusive and gender-responsive social protection systems, including social protection floors, to ensure full access to social protection for all without discrimination of any kind (see [E/2019/27-E/CN.6/2019/19](#)).

107. Nearly all developed countries have built substantial social protection systems by allocating between 20 to 27 per cent of gross domestic product (GDP), and in some cases more than 27 per cent, to their development, without sacrificing growth, given

that they combated poverty and inequality.¹²⁹ Calculations of the cost of closing social protection gaps today indicate that, of the 150 countries considered, close to half could do so by allocating less than 2 per cent of GDP to social protection and 80 per cent could do so by allocating less than 5 per cent of GDP to social protection,¹³⁰ which challenges the idea that social protection is unaffordable, an issue explored in more depth in section V below.

108. The present section contains an analysis of two components of the social protection floor that are particularly important for reducing poverty among women of working age who have children, with a view to offsetting the impoverishing effects of having young children in the household, namely, the provision of paid maternity and parental leave and universal child and family transfers. Expanding the coverage of paid maternity and parental leave, in particular to workers in the informal sector, is of the utmost importance for maternal and newborn health. Well-designed social protection transfers, such as child and family benefits, are a complementary measure that can reduce poverty and enhance income security for families with children, which, as indicated in section II, are disproportionately represented among the poor.

1. Expanding paid maternity and parental leave coverage to women in informal employment

109. Maternity protection is essential to the promotion of the health, nutrition and well-being of both mothers and infants.¹³¹ By preventing income loss during such a critical period, maternity benefits enable women to rest and recover from childbirth and establish breastfeeding practices.¹³² By providing employment protection, women are able to maintain their connection to the labour market, while being assured that they will not lose their job simply owing to their pregnancy or their having taken maternity leave. Whereas paid maternity leave is a recognition of the need for recovery from childbirth and supports women and protects their income while they do so, caring for infants and children is work that can be shared between women and men, therefore in countries in which maternity leave is already in place, the role of paternity and parental leave schemes should be expanded.

110. Maternity benefit schemes that fully or partially replace women's earnings during the final stages of pregnancy and after childbirth still cover only a minority of women. According to the latest available data, globally, only 41.1 per cent of women between 15 and 49 years of age with a newborn child receive maternity benefits, with regional coverage being as low as 15.8 per cent in Africa and 33.4 per cent in Asia and the Pacific, compared with over 80 per cent in Europe and Central Asia.¹³³ Furthermore, most maternity cash benefit schemes only cover women who are in formal employment. In the absence of basic income security, women who work in the informal sector in physically exacting jobs often continue working for too long into their pregnancy or begin working too soon after childbirth, with adverse health

¹²⁹ Michael Cichon, "Hardly anyone is too poor to share: a basic level of social protection is affordable almost everywhere", *Finance and Development*, vol. 55, No. 4 (December 2018).

¹³⁰ Ibid.; and Mira Bierbaum and others, *A Social Protection Floor Index: Monitoring National Social Protection Policy Implementation*, discussion paper (Berlin, Friedrich Ebert Foundation, 2016).

¹³¹ Jody Heymann, Amy Raub and Alison Earle, "Creating and using new data sources to analyze the relationship between social policy and global health: the case of maternal leave", *Public Health Reports*, vol. 126, supplement 3 (2011); and Mohammad Hajizadeh and others, "Paid maternity leave and childhood vaccination uptake: longitudinal evidence from 20 low- and middle-income countries", *Social Science and Medicine*, vol. 140 (September 2015).

¹³² ILO, "Maternity cash benefits for workers in the informal economy", Social Protection for All Issue Brief (November 2016).

¹³³ ILO, *World Social Protection Report 2017–19*.

consequences (see box VII). Extending maternity coverage to women in informal employment is therefore a priority.

111. Another fundamental component of maternity protection is effective access to medical care during pregnancy and childbirth, as well as postnatal care, as a core component of universal health coverage. One of the key barriers to access to health services is financial. Out-of-pocket expenses¹³⁴ are a far more prevalent form of health expenditure in low-income and middle-income countries than they are in high-income countries, and they are particularly burdensome for low-income households.¹³⁵ Affordable health care is particularly important for women, because they typically have less personal income and face more costly health conditions, such as pregnancy and childbirth (see sect. IV).

112. The ILO Maternity Protection Convention, 2000 (No. 183) contains a set of minimum standards for the design of cash benefits during maternity leave, including its duration, benefit size and financing modality, and access to health services for women of reproductive age and their children. The Convention applies to all employed women, including those in atypical forms of work (article 2). However, in practice, workers in the informal sector are frequently excluded from maternity coverage, especially when coverage is offered through social insurance schemes.

113. Social insurance schemes, funded through contributions from both employers and employees and sometimes complemented by government funds, form the vast majority of programmes providing maternity benefits. Such schemes operate in 138 countries, of which 7 also provide social assistance schemes; another 50 countries, mostly in sub-Saharan Africa, Asia and the Middle East, operate a mandatory period of maternity leave through employer liability to finance the mother's salary.¹³⁶

114. The Convention indicates that compulsory social insurance or publicly funded programmes are the preferred vehicles for the provision of maternity benefits to women. For women who do not meet the qualifying conditions, such as women who work in informal employment and cannot make regular contributions, the provision of adequate benefits should be financed by social assistance on the basis of a means test. The collective modalities of financing leave, which allow risk-pooling, are preferable to employer liability provisions, which oblige employers to bear the cost of maternity directly and may lead to discrimination in the hiring of women of reproductive age.¹³⁷ In recent years, some countries, including Jordan in 2011 and Rwanda in 2016, have been moving away from employer liability and towards collectively financed maternity benefits.¹³⁸ In countries in which maternity benefits are still paid solely by employers, the priority is therefore working to include maternity benefits under the national social insurance scheme to allow risk-pooling and more equitable financing mechanisms.

2. Extending protection to workers in the informal sector to achieve universal coverage

115. The employer liability model is not a feasible solution for protecting women workers in the informal economy, especially those who are self-employed. The challenge for many developing countries has been to design systems that can provide coverage and be responsive to the specific conditions of women who work in the informal sector, many of whom are self-employed. Factors such as limited contributory capacity, lack of a recognized employer or multiple employers, irregular

¹³⁴ User fees and charges are one form of out-of-pocket payment.

¹³⁵ ILO, *Social Security for Social Justice and a Fair Globalization*, p. 44.

¹³⁶ ILO, *World Social Protection Report 2017–19*.

¹³⁷ Bina Agarwal, "Maternity benefits or jobs", *The Indian Express*, 12 July 2018.

¹³⁸ ILO, "Maternity cash benefits for workers in the informal economy".

and unpredictable earnings, geographical and time constraints in complying with administrative procedures and low visibility and lack of a voice in policymaking and collective bargaining processes are among the barriers to effective coverage.¹³⁹

116. Some countries have extended their national social insurance schemes to cover wage workers in the informal sector who have a defined employer. In South Africa, since 2003, domestic workers and agricultural workers have been included under the Unemployment Insurance Fund, which also finances maternity benefits. The maternity benefits are paid over a maximum of 17 weeks at 66 per cent of the worker's wage or salary. Employers and workers each contribute 1 per cent of the value of the worker's monthly salary to the Fund.¹⁴⁰

117. It has been more challenging to extend coverage to other groups of workers in the informal sector, especially those who are self-employed and therefore lack a defined employer. The Lao People's Democratic Republic introduced voluntary coverage for workers in the informal sector in its National Social Security Fund in 2014. In order to be eligible for maternity cash benefits, which are set at 80 per cent of the average reference wage for 90 days, the insured person must have made contributions for at least 6 months within the preceding 12 months. Coverage has remained limited to date, however, due to the low and irregular earnings of most workers in the informal sector, in particular those who are self-employed.¹⁴¹ The case of the Lao People's Democratic Republic indicates that voluntary coverage without mechanisms that adapt and simplify the administrative procedures of social insurance, such as through decentralized mobile registration units, and without the Government intervening to subsidize the contributions of workers in precarious employment, is likely to reach only a minority of workers in the informal sector.

118. Given the difficulties that workers in the informal sector have in making regular contributions, countries such as Bangladesh, Bolivia, Ghana, India and Indonesia have turned to non-contributory maternity cash benefits. Some of the cash benefits are directed to pregnant women and their offspring, typically children under 2 years of age. Receipt of the cash benefit is often made conditional upon meeting certain requirements, such as registration, antenatal and postnatal care visits and institutional delivery, and, in some cases, there is a cap on the number of pregnancies covered.¹⁴² Although most existing non-contributory schemes are limited in terms of the number of women whom they cover and the benefit level that they provide, they could form the basis for working towards a universal entitlement. According to ILO, the cost of a universal maternity benefit paid for four months at 100 per cent of the national poverty threshold would not exceed 0.41 per cent of GDP in most low-income and lower-middle-income countries.¹⁴³

119. The accessibility of benefits in terms of the time needed to comply with administrative procedures is also critical, as is the extent to which maternity benefits enable access to affordable and accessible health-care services for pregnant women and mothers of newborn children (see sect. IV). Mongolia has combined contributory and non-contributory maternity benefits to reach its sparsely populated rural and nomadic population and has achieved universal coverage (see box VIII).

¹³⁹ Martina Ulrichs, *Informality, Women and Social Protection: Identifying Barriers to Provide Effective Coverage*, ODI Working Paper No. 435 (London, Overseas Development Institute, 2016).

¹⁴⁰ ILO, "Maternity cash benefits for workers in the informal economy".

¹⁴¹ Ibid.

¹⁴² ILO, *Social Protection for Maternity: Key Policy Trends and Statistics*, Social Protection Policy Papers, No. 15 (Geneva, 2015).

¹⁴³ Ibid.

Box VIII

Combining contributory and non-contributory schemes to achieve universal coverage: the case of Mongolia

Mongolia provides universal maternity protection by combining a number of different schemes, services and mechanisms. As in many other countries, formal employees are covered by the contributory social insurance scheme on a mandatory basis and receive the maternity benefit for four months at a replacement rate of 100 per cent of their wage or salary. Other workers, including herders and self-employed workers in the informal economy, can join the scheme on a voluntary basis; they can receive maternity benefits for four months at a replacement rate of 70 per cent of their selected reference wage after they have made contributions for 12 months. In addition, maternity cash benefits are also provided under the social welfare scheme, a non-contributory social assistance programme, to all pregnant women and mothers of infants regardless of their contribution to the social insurance scheme, status in employment or nationality. The benefit (approximately US\$ 20 per month in 2015) is paid from the fifth month of pregnancy for a period of 12 months.

A unified system of a “one-stop shop” for services has been set up in all provinces of Mongolia since 2007, bringing together under one roof various government ministries and offices, including those for social insurance, social welfare, civil registration and employment counselling. That innovative model facilitates access and reduces the amount of time needed by claimants to complete forms and other administrative requirements. Further efficiency has been gained through the related mobile services, bringing government offices to beneficiaries in order to increase access to services for rural and herder communities in sparsely populated regions.^a

^a ILO, “Maternity cash benefits for workers in the informal economy”.

120. Protecting the income security, health and well-being of women during periods of maternity is a critical short-term priority, however, longer-term strategies are also needed to transform the stereotypical gender roles that assign the bulk of childcare to women. In recent decades, many countries have reformed their leave policies by introducing or extending paternity leave and providing incentives to increase the use of parental leave by fathers. Whereas in 1994, only 40 countries reported statutory paternity leave provisions, in 2015, the number had gone up to 94 of the 170 countries considered. For example, Myanmar and Uruguay extended paternity leave, financed through social insurance, and Iran (Islamic Republic of) introduced compulsory leave of two weeks for fathers in 2003. The Lao People’s Democratic Republic and several countries in Latin America have also introduced or extended paid leave for fathers in recent years.¹⁴⁴

121. Such measures are far more likely to reach men who are in formal employment. Moreover, research regarding developed countries suggests that specific measures may be needed to encourage men to actually take childcare-related leave. In those countries, mothers still take the bulk of parental leave; use of parental leave by fathers has increased in countries in which specific incentives are in place that reserve a non-transferable portion of parental leave for fathers on a “use it or lose it” basis.¹⁴⁵

¹⁴⁴ ILO, *World Social Protection Report 2017–19*.

¹⁴⁵ OECD, “Parental Leave: Where Are the Fathers?” Policy Brief, March 2016.

3. Universal or nearly universal child-oriented and family-oriented cash transfers

122. Child-oriented cash transfers have proliferated in recent decades across many developing countries, to offset some of the costs of raising children and to support investments in developing children's capabilities. Child-oriented financial transfers originated historically in Western Europe, with the motivation being the elimination of poverty and hardship.¹⁴⁶ Such transfers have the potential to enhance income security for families at the greatest risk of income poverty and those experiencing time constraints due to increased care needs (see sect. II).

123. In the past two decades, many developing countries have introduced or extended the reach of non-contributory child-oriented cash transfers, with the payment typically being made to mothers, sometimes conditional upon their taking their children for regular health checks. Cash transfers are associated with a range of positive outcomes in terms of school attendance and health-service usage among children and a reduction in child labour.¹⁴⁷

124. Although cash transfers can make a positive difference for women of reproductive age, the potential of cash transfers is not realized when the benefit levels are low and narrowly targeted on the basis of means testing or proxy means testing. Food security and nutrition objectives can only be met if cash transfers are substantial enough to cover food needs and also essential non-food requirements such as health-care and education expenses. Setting cash transfers higher than the cost of the minimum food basket would therefore allow for at least some essential non-food needs to be met.¹⁴⁸ Furthermore, in the context of volatile and rising food prices, the real value of cash transfers can erode very quickly. Systems of price indexation, which are often proposed as a solution, are in many countries typically slow and insufficient.¹⁴⁹ Low benefit levels can be compounded by irregular and inconsistent payments, reducing any empowering impact that cash transfers may have for women.¹⁵⁰

4. Risks of narrow targeting

125. Targeting cash transfers to the poor raises the risk of exclusion errors, in which those for whom a benefit is intended are denied it. Exclusion errors are especially likely in contexts in which it is difficult to accurately identify the poor, owing to information that is missing because income sources are informal and irregular and to weak State administrative capacities.¹⁵¹ A comparison of social protection schemes across a range of developing countries indicates that, the more narrowly a programme is targeted, the greater the population of poor people that is excluded.¹⁵² In a recent study of social protection schemes across low-income and middle-income countries,

¹⁴⁶ Mary Daly, *Child-related Financial Transfers and Early Childhood Education and Care: A Review of Key Developments, Impacts and Influences in Child-related Support to Families*, Discussion Paper, No. 3 (New York, UN-Women, 2015).

¹⁴⁷ Francesca Bastagli and others, *Cash Transfers: What does the Evidence Say? A Rigorous Review of Impacts, and the Role of Design and Implementation Features* (London, Overseas Development Institute, 2016).

¹⁴⁸ Stephen Devereux, *Realizing the Right to Social Security and the Right to Food*, ESS Working Paper No. 51 (Geneva, ILO, 2015).

¹⁴⁹ Jayati Ghosh, "Cash transfers as the silver bullet for poverty reduction: a skeptical note", *Economic and Political Weekly*, vol. 46, No. 21 (May 2011), p. 69.

¹⁵⁰ Christiana Gbedemah, Nicola Jones and Paola Pereznieta, *Gendered Risks, Poverty and Vulnerability in Ghana: Is the LEAP Cash Transfer Programme Making a Difference?*, Project Briefing, No. 52 (London, Overseas Development Institute, 2010).

¹⁵¹ Thandika Mkandawire, *Targeting and Universalism in Poverty Reduction*, Social Policy and Development Programme Paper, No. 23 (Geneva, United Nations Research Institute for Social Development (UNRISD), 2005).

¹⁵² Stephen Kidd, "Rethinking targeting in international development", *Pathways' Perspectives on social policy in international development*, No. 11 (October 2013).

researchers found that, in programmes that targeted the poorest 25 per cent, or a smaller, poorer subset, of a population, the exclusion errors were significant: 12 of 25 such schemes had exclusion errors above 70 per cent of their intended beneficiaries and 5 had errors above 90 per cent.¹⁵³ In another study, of 30 countries in sub-Saharan Africa, researchers found that on average about three quarters of underweight women and undernourished children were not found in the poorest quintile, i.e. the bottom 20 per cent of the population, that is usually targeted for assistance.¹⁵⁴ In contrast, universal, or near universal (see box IX), benefits not only reduce administrative costs, they are also more effective in reaching poor women and children who may be “hidden” in households that are not among the poorest.

Box IX

Social protection to support families and advance gender equality in South Africa

The Child Support Grant was introduced in South Africa in 1998, on the basis of recommendations of the Lund Committee on the reform of the child and family support system. The Grant is aimed at redressing the exclusion of large numbers of poor African women and children from the previous policy, the State Maintenance Grant, and tailored to be responsive to the diversity of family forms in South Africa.^a

The Child Support Grant is a flat-rate cash transfer paid to the primary caregiver (parent, grandparent or other relative or non-relative) of a child under 18 years of age, based on the household income of the primary caregiver, which includes that of a spouse, if relevant. In 2016, the Grant reached 11.6 million (60 per cent) of children.^b It is a targeted scheme, but with a wide reach. Despite gender-neutral eligibility requirements, 98 per cent of the beneficiaries in 2014 were women.^c Evaluations have found that the Grant was acting as a small but useful supplement to the household budget,^d with a proven positive impact on child and adolescent poverty, health, nutrition and education and reduction in the incidence of substance abuse.^e Although the Grant has reduced chronic poverty and the depth of poverty among women and lone-mother households, it has not been able to fully address the unequal distribution of poverty between women and men in the country.^f

The Child Support Grant is a good example of broad-based targeting that excludes the relatively well-off groups. Such targeting is easier to conduct and less costly. Its wide reach also enhances the perceived fairness of the transfer, compared with narrowly targeted schemes.

^a Shireen Hassim, “Gender equality and developmental social welfare in South Africa” in Lourdes Beneria and others, *Gender and Social Policy in a Global Context: Uncovering the Gendered Social Structure of “The Social”* (Basingstoke, United Kingdom, Palgrave, 2006).

^b Leila Patel, “The child support grant in South Africa: gender, care and social investment”, in James Midgley, Espen Dahl and Amy Conley Wright, eds., *Social Investment and Social Welfare: International and Critical Perspectives* (Cheltenham, United Kingdom, Edward Elgar Publishing, 2017).

^c Department of Social Development, 2014, as cited in *ibid.*, p. 109.

^d Debbie Budlender and Francie Lund, “South Africa: a legacy of family disruption”, *Development and Change*, vol. 42, No. 4 (September 2011), p. 941.

^e Alejandro Grinspun, “No small change: the multiple impacts of the Child Support Grant on child and adolescent well-being”, in Aislinn Delany, Selwyn Jehoma and Lori Lake, eds., *South African Child Gauge 2016* (Cape Town, Children’s Institute, University of Cape Town, 2016).

^f Dorrit Posel and Michael Rogan, “Gendered trends in poverty in the post-apartheid period, 1997–2006”, *Development Southern Africa*, vol. 29, No. 1 (2012).

¹⁵³ Stephen Kidd and Diloá Athias, *Hit and Miss: An Assessment of Targeting Effectiveness in Social Protection*, Working Paper, March 2019 (Development Pathways and Church of Sweden, 2019).

¹⁵⁴ Brown, Ravallion and van de Walle, “Are poor individuals mainly found in poor households?”.

5. Conditionality as additional hurdles that women must overcome

126. The conditionalities that are widely attached to cash transfers, such as requiring proof of children attending regular health checks, in particular those for which the fulfilment of conditions depends upon the availability and quality of public services, are another concern.¹⁵⁵ Not all targeted schemes have conditionalities, but a significant proportion of schemes do have them. Unconditional cash transfers, such as the old-age pension schemes in Brazil and Namibia and the Child Support Grant in South Africa (see box IX), have achieved equally positive outcomes in terms of children's well-being without the added imposition of conditionalities.¹⁵⁶

127. To date, there is no conclusive evidence indicating that it is the conditionalities per se that create positive outcomes in terms of child health and nutrition, as opposed to the simple injection of cash into the household.¹⁵⁷ Furthermore, the expectation that conditionalities are to be fulfilled by mothers increases the demands on women's time, often at the expense of their paid work.¹⁵⁸ Without adequate investments in public services, conditionalities may simply push women and children to use health and educational facilities that are understaffed and of poor quality, while exacerbating the time constraints that women already face (see sect. IV). Rather than reflecting negligence, failure to comply with programme requirements may be owing to the lack of accessible services or their poor quality (see box X).¹⁵⁹

Box X

Costs of conditionalities: evidence from the Juntos programme in Peru

The National Programme for Direct Assistance to the Poor, known as Juntos, in Peru is a conditional cash transfer programme that seeks to interrupt the intergenerational cycle of poverty through investments in children's human capital.^a The programme targets rural households in the Andes and Amazon regions of the country that are classified as poor or extremely poor and have at least one pregnant woman, child, young person or adolescent up to 19 years of age. In order to receive the 200 soles (US\$ 60) every two months, mothers registered in the programme must ensure that they and their children meet a set of conditionalities, or "shared responsibilities". They include antenatal exams for pregnant women, regular growth and nutrition check-ups for children under 5 years of age and regular school attendance for children up to 19 years of age or graduation from secondary school. In 2018, approximately 693,980 households of 730,206 registered households received payments, including 11,435 pregnant women.^b

In-depth research has indicated that, although the cash helps women to afford basic household goods and provides some increase in self-esteem,^c the imposition of conditionalities has had negative unintended consequences and hidden costs for the women who are required to meet them.^d

Women are required to comply with conditionalities even when the quality and accessibility of public services are poor. In rural areas, women sometimes walk to the nearest health clinic only to find it closed or understaffed.^e If the clinic is unable to

¹⁵⁵ ILO, *Social Security for Social Justice and a Fair Globalization*, p. 118.

¹⁵⁶ Ibid.

¹⁵⁷ Stephen Kidd, "To condition or not to condition: what is the evidence?", *Pathways' Perspectives on social policy in international development*, No. 20 (March 2016).

¹⁵⁸ Maxine Molyneux, *Change and Continuity in Social Protection in Latin America: Mothers at the Service of the State?*, Gender and Development Programme Paper, No. 1 (Geneva, UNRISD, 2007); and Sylvia Chant, "The 'feminization of poverty' and the 'feminization' of anti-poverty programmes: room for revision?", *Journal of Development Studies*, vol. 44, No. 2 (2008).

¹⁵⁹ Tara Patricia Cookson, *Unjust Conditions: Women's Work and the Hidden Costs of Cash Transfer Programmes* (Oakland, California, University of California Press, 2018).

serve them or their children, they must return, as many times as necessary, until they find it open and able to record their compliance. The time they spend attempting to acquire access to the services is not counted in routine monitoring and evaluations, yet it has a depleting effect on women.^f Significant investments are needed therefore to improve the quality and accessibility of public services, especially health-care services, in rural Peru.^g Moreover, women report being treated poorly by clinic staff because of their ethnicity and poverty.

^a See www.juntos.gob.pe/nosotros/nuestro-proposito.

^b Peru, Ministerio de Desarrollo e Inclusión Social, “Nacional”, InfoJUNTOS database. Available at www2.juntos.gob.pe/infojuntos.

^c Maxine Molyneux and Marilyn Thomson, “Cash transfers, gender equity and women’s empowerment in Peru, Ecuador and Bolivia”, *Gender and Development*, vol. 19, No. 2 (2011).

^d Cookson, *Unjust Conditions*.

^e Ibid.

^f Ibid.

^g OECD, *OECD Reviews of Health Systems: Peru 2017* (Paris, OECD Publishing, 2017).

128. For the above reasons, the Commission on the Status of Women, in the agreed conclusions adopted at its sixty-third session, urged Governments to assess the need for and promote the revision of conditionalities, where they existed, to avoid reinforcing gender stereotypes and exacerbating women’s unpaid work, and to ensure that non-compliance did not lead to punitive measures that excluded women and girls who were marginalized or in vulnerable situations (see [E/2019/27-E/CN.6/2019/19](http://www.un.org/womenwatch/daw/cesw/2019/27-E/CN.6/2019/19)).

129. Cash transfers must also be backed by supply-side investments in health, education and childcare services and by accessible basic infrastructure, such as affordable and safe transport, so as to achieve the desired outcomes (see [E/CN.6/2019/3](http://www.un.org/womenwatch/daw/cesw/2019/3)). In low-income countries, in which demand for services is likely to be hampered by major supply-side constraints, it may be more effective to reallocate the resources needed to administer the conditionalities and use them to improve existing public services (see sect. IV).¹⁶⁰

D. Enhancing income security among women through labour market interventions

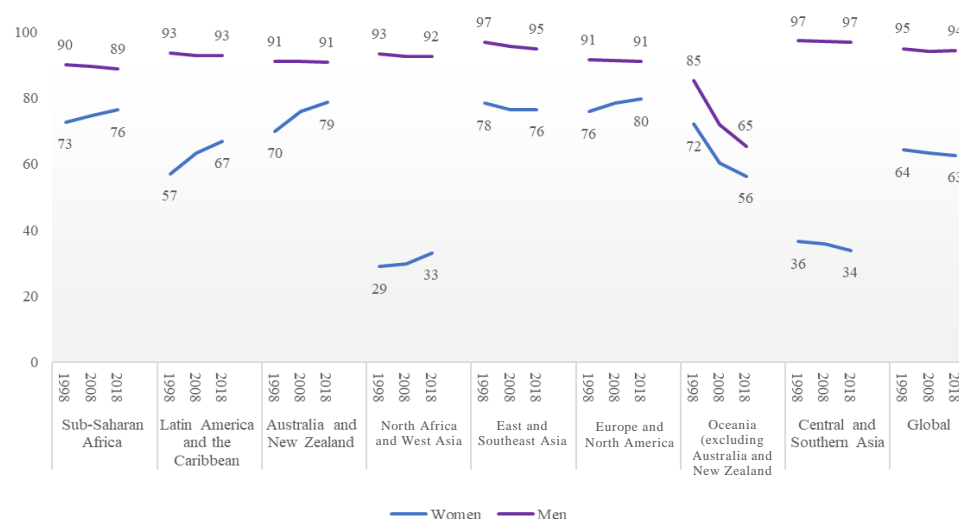
130. Although social protection systems can go a long way in addressing poverty and inequality, creating sustainable routes out of poverty also requires labour market interventions to boost the quality and quantity of the employment that is available. The most significant change in the labour force participation rate among women over the past two decades has been in the Latin America and the Caribbean region, where it has risen by 10 percentage points, from 57 to 67 per cent, between 1998 and 2018 (see figure X). In contrast, in the Central and Southern Asia region, there was a decline of 2 percentage points from an already low baseline, from 36 to 34 per cent. The latter is largely driven by the trend in India, where the labour force participation rate among women has stagnated in urban areas¹⁶¹ and has seen a concentrated decline among younger married women 25 to 40 years of age in rural areas.¹⁶²

¹⁶⁰ ILO, *Social Security for Social Justice and a Fair Globalization*.

¹⁶¹ Klasen and Pieters, “What explains the stagnation of female labour force participation in urban India?”.

¹⁶² Luis A. Andres and others, “Precarious drop: reassessing patterns of female labour force participation in India”, Policy Research Working Paper No. 8024 (Washington, D.C., World Bank, 2017); and Jayati Ghosh, “Time poverty and the poverty of economics”, *METU Studies in Development*, vol. 43, No. 1 (2016).

Figure X
Labour force participation rate among individuals 25 to 54 years of age, by sex and region, 1998–2018



Source: UN-Women, 2019.

Note: Data refer to the latest available in the reference period for 188 countries. The sample of 188 countries covers most of the world's population 25 to 54 years of age in 2018.

131. The stagnation in employment prospects for women that is evident in many regions is underpinned by multiple factors. Macroeconomic policy plays a critical role in creating an environment that encourages an improvement in the quantity and quality of jobs available by increasing the overall demand for labour in the economy. There has been sluggish growth in labour demand since the 1980s, because the rates of investment in support of employment creation have significantly declined in many parts of the world.¹⁶³ Incorporating employment targets into the formulation of monetary policy, alongside inflation targets, is seen as an effective way of stimulating economic activity and job creation in the aggregate.¹⁶⁴

132. There are a number of actions that Governments can take to provide income security and support labour market participation for those who face significant constraints in gaining access to decent work. In developed countries, income security for those who cannot find paid work is typically provided through time-bound transfers from unemployment insurance or long-term social assistance schemes. In many developing countries, however, either such schemes do not exist or they reach only a minority of workers, especially given that, in those countries, a large proportion of workers are in the informal economy.¹⁶⁵ Since the global financial crisis of 2008, increasing attention has been paid to strengthening counter-cyclical measures that can respond effectively to economic downturns by boosting incomes, economic activity and labour demand.¹⁶⁶

¹⁶³ Yilmaz Akyüz, *From Liberalization to Investment and Jobs: Lost in Translation*, Working Paper No. 74 (Geneva, International Labour Organization, 2006); and Aurelio Parisotto and Nikhil Ray, *Rethinking Macroeconomic Policies for Full Employment and Inclusive Growth: Some Elements*, Employment Working Paper No. 238 (Geneva, ILO, 2017).

¹⁶⁴ UN-Women, *Progress of the World's Women 2015–2016*.

¹⁶⁵ ILO, "Social protection for women and men of working age", in ILO, *World Social Protection Report 2017–19*.

¹⁶⁶ Parisotto and Ray, *Rethinking Macroeconomic Policies for Full Employment and Inclusive Growth*.

133. Public works programmes, which have a long history in developing countries,¹⁶⁷ are usually seen as suitable interventions because they can deliver in-kind income security, namely, paid work, to poorer sections of the population. Asset-building interventions have also emerged in recent years to target the very poor, aimed at building up their asset base and nurturing entrepreneurship. However, such interventions can only work for working-age women with young children if they are responsive to their already long hours of unpaid and often arduous domestic and care work, rather than assuming that poor women have a significant amount of idle time at their disposal.

1. Public works programmes to support the income security and right to work of women

134. Public works programmes combine employment and social protection, offering some degree of income security to those who are unemployed, underemployed or earn low incomes. Such programmes have sometimes been introduced as temporary measures, in response to economic crises or natural disasters, that were then phased out when conditions improved. Such was the case for the Unemployed Heads of Household Programme in Argentina, which was launched during the 2001 economic crisis and concluded in 2010.¹⁶⁸ In other cases, such programmes have been maintained on a more permanent basis, as with those established under the Mahatma Gandhi National Rural Employment Guarantee Act in India.

135. Public works programmes are aimed at creating employment through a public investment strategy. They have tended to include a significant proportion of poor women among their beneficiaries.¹⁶⁹ However, a number of evaluations have revealed limitations, in both the design and implementation of those programmes, that pose specific constraints for poor women with childcare responsibilities, including the lack of childcare facilities at worksites and the limited participation of women in social audits and monitoring efforts.¹⁷⁰ The section below is focused on a selected number of programmes that constitute significant interventions, due to their large scale and to explicit attention having been paid in their design to being inclusive of women in poor households.

2. Invisibility of women's unpaid care responsibilities in the design of public works programmes

136. In India, the Mahatma Gandhi National Rural Employment Guarantee Act, which established the world's largest public works programme, initiated through a pilot project in 2006, entitles every rural household to 100 days of waged employment. It envisages the inclusion and empowerment of women by implementing a 33 per cent quota, equal wages for women and men, worksites in proximity to residences and the provision of childcare facilities at worksites. In addition to providing guaranteed employment for rural populations, especially during the lean agricultural season, the scheme is also aimed at building rural infrastructure and assets.¹⁷¹

¹⁶⁷ S. Mahendra Dev, "Experience of India's (Maharashtra) employment guarantee scheme: lessons for development policy", *Development Policy Review*, vol. 14, No. 3 (September 1996).

¹⁶⁸ UN-Women, *Progress of the World's Women 2015–2016*.

¹⁶⁹ Ibid.

¹⁷⁰ Deepta Chopra, "Taking care into account: leveraging India's MGNREGA for women's empowerment", *Development and Change* (forthcoming); and UN-Women, *Progress of the World's Women 2015–2016*, pp.143–146.

¹⁷¹ Mubashira Zaidi and Shraddha Chigateri, "Making Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) more care-responsive", August 2017.

137. Although in practice the participation of women has varied across states, the national average has exceeded the 33 per cent quota; it has hovered around 55 per cent from 2015 to the present,¹⁷² with a large proportion being women belonging to marginalized groups, including tribal and lower caste groups.¹⁷³ A positive outcome of the programme, given its large scale, has been to raise the wages of women agricultural workers in the vicinity of the worksites and reduce the gap between women's actual wages and the minimum wage.¹⁷⁴ Other benefits have included the reduced need for distress migration in search of work, more regular and predictable working hours and relatively better wages and working conditions compared with the alternative employment options.¹⁷⁵

138. However, through in-depth research, blind spots and barriers that pose specific hurdles for low-income women have also been identified. Most significantly, there was very limited availability of childcare facilities at worksites, even though it was mandated. In many cases, children were seen alongside their mothers at work and, in some cases, older children were brought to worksites to watch over younger siblings.¹⁷⁶ That research highlights the need for the better integration of public works programmes with the *anganwadi* preschool centres for children under 6 years of age provided by the Integrated Child Development Services of India (see box XIII).

139. Other concerns reported by women included the arduous nature of the manual labour, delays in the payment of wages and difficulties in gaining access to banks, given their distance from them and inability to use automated teller machines. Women also expressed the need for more than the 100 days of work that were made available to them, given the paucity of other kinds of paid work available in the area.¹⁷⁷ Women's concerns were rarely channelled back into programme implementation, however, and research has revealed a lack of monitoring of gender provisions, including whether childcare facilities were being provided and their quality, and that a gender perspective had not been incorporated into considerations of the appropriateness or benefits of the assets built by the programme. The priorities of women, including strengthening the density of fuelwood plants and trees, water bodies and the Integrated Child Development Services childcare centres, received far less attention than did roadbuilding.¹⁷⁸

140. Similar concerns have been raised with regard to other public works programmes. An early evaluation of the Productive Safety Net Programme in Ethiopia drew attention to the difficulties women faced in combining breastfeeding and childcare with participation in public works programmes, often resulting in their having to leave their children unattended and unfed. The anticipated "woman-friendly" design measures, which included the provision of childcare services and reduced working time for women and the shift to direct support without work

¹⁷² India, Ministry of Rural Development, MGNREGA database. Available at http://mnregaweb4.nic.in/netnrega/all_lvl_details_dashboard_new.aspx (accessed on 18 April 2019).

¹⁷³ Naila Kabeer, *Gender, Livelihood Capabilities and Women's Economic Empowerment: Reviewing Evidence over the Life Course* (London, Gender Adolescence: Global Evidence, 2018).

¹⁷⁴ Sukti Dasgupta and Ratna N. Sudarshan, *Issues in Labour Market Inequality and Women's Participation in India's National Rural Employment Guarantee Programme*, Working Paper No. 98 (Geneva, ILO, 2018).

¹⁷⁵ Khara and Nayak, 2009, as cited in Kabeer, *Gender, Livelihood Capabilities and Women's Economic Empowerment*.

¹⁷⁶ Mubashira Zaidi, and others, "My Work Never Ends": *Women's Experiences of Balancing Unpaid Care Work and Paid Work through Women's Economic Empowerment Programming in India*, IDS Working Paper No. 494 (Brighton, United Kingdom, International Development Studies, 2017), p. 42.

¹⁷⁷ Ibid.

¹⁷⁸ Chopra, "Taking care into account" (forthcoming).

requirements before and after childbirth, have not been adequately implemented.¹⁷⁹ Women also reported difficulties with the time and distance needed to travel to collection points to receive their payments and that they were exposed to risks of violence while making the journey.¹⁸⁰

141. Concerns have also been raised about the use of informal authority structures in the “community targeting” used in the Productive Safety Net Programme in Ethiopia for identifying beneficiaries. The de facto participation of women in the informal decision-making with regard to who to target seems to be limited, in part due to the discriminatory social norms that marginalize women and thereby restrict their participation in the conduct of community affairs. However, women expressed the view that their unpaid care and domestic work, especially fetching water, which filled up their days, left them with very little time for community involvement.¹⁸¹

3. Supporting asset-building among women

142. Income flows convey little about how people fare over time and the extent to which they are cushioned from falling into poverty in cases of sudden shock, whether due to illness, damage to the home, loss of employment or relationship dissolution. There is a growing focus on assets therefore as a stock of resources that capture the longer-term build-up of economic inequalities between women and men and on strategies to build up women’s assets as an effective bulwark against the risk of poverty.¹⁸²

143. Having assets of their own is critical for women, in particular in the case of relationship dissolution, which can expose them to the risk of poverty. Lone-mother families face substantially higher risks of poverty, compared with two-parent families with children, across a range of countries (see sect. IV). In addition to its implications for poverty, in a smaller number of studies that have analysed the relationship between women’s ownership of productive assets and its impact on household decision-making, researchers have found that, in cases in which joint ownership of major assets among couples is common, a woman’s share of the couple’s wealth is positively and significantly associated with egalitarian decision-making on whether to work and how to spend income.¹⁸³ Beyond decision-making on financial matters, when women own assets such as land and housing, they tend to enjoy a greater degree of protection against intimate partner violence and have an escape route out of abusive situations.¹⁸⁴

144. Whether women are actually able to accumulate assets depends crucially upon the marital property regime, the specific rules governing the ownership and

¹⁷⁹ Guush Berhane and others, *Evaluation of Ethiopia’s Food Security Programme: Documenting Progress in the Implementation of the Productive Safety Nets Programme and the Household Asset Building Programme* (Addis Ababa and Washington, D.C., Ethiopian Strategy Support Program and International Food Policy Research Institute, 2013).

¹⁸⁰ Stephen Devereux and others, *Ethiopia’s Productive Safety Net Programme (PSNP): 2008 Assessment Report* (2008).

¹⁸¹ Rachel Sabates-Wheeler, Jeremy Lind and John Hoddinott, “Implementing social protection in agro-pastoralist and pastoralist areas: how local distribution structures moderate PSNP outcomes in Ethiopia”, *World Development*, vol. 50 (October 2013).

¹⁸² Caroline O.N. Moser, “Introduction: towards a nexus linking gender, assets, and transformational pathways to just cities”, in Caroline Moser, ed., *Gender, Asset Accumulation and Just Cities: Pathways to Transformation* (Abingdon, Oxon and New York, Routledge, 2016).

¹⁸³ Carmen Deere and Jennifer Twyman, “Asset ownership and egalitarian decision making in dual-headed households in Ecuador”, *Review of Radical Political Economics*, vol. 44, No. 3 (September 2012).

¹⁸⁴ Pradeep Panda and Bina Agarwal, “Marital violence, human development and women’s property status in India”, *World Development*, vol. 33, No. 5 (May 2005); and Abena D. Oduro and others, “Women’s wealth and intimate partner violence: insights from Ecuador and Ghana”, *Feminist Economics*, vol. 21, No. 2 (2015).

management of property during marriage or consensual union and upon its dissolution. The inheritance regime – the rules governing wills or testaments and the outcome in cases when there is no will – is also important.¹⁸⁵ Both marital property and inheritance regimes vary tremendously across countries. Daughters and sons, for example, are still treated unequally in more than one in five countries for which data are available, in particular in the regions of Northern Africa and Western Asia, sub-Saharan Africa and Central and Southern Asia.¹⁸⁶ Actual practice is even more divergent because, in many parts of the world, customary law overlaps with civil law. Furthermore, legal systems may also vary across religious and ethnic groups, and there can be considerable variation at the state level in federal systems.¹⁸⁷

145. Constraints on women's capacity to accumulate savings and assets constitute a significant source of gender inequality, which can expose women to a higher risk of poverty compared with men.¹⁸⁸ Although there are no recent, comparable, nationally representative global data on women's and men's ownership, control or management of land,¹⁸⁹ women's share is distinctly smaller than men's in most countries for which data is available.¹⁹⁰ Women's share of gross household physical wealth, including land and other assets, is as low as 19 per cent in Karnataka, India, and 30 per cent in Ghana.¹⁹¹ Supporting women's capacity to build up their savings and assets has gained increasing currency as a strategy for alleviating poverty among women.

4. Expanding women's incomes and livelihood opportunities, but constraining their time

146. In recent decades, a new generation of poverty reduction programmes has emerged that are aimed at reaching the poorest households through one-time asset transfers, combined with regular cash or in-kind transfers, income-generating training and visits by social workers. The "graduation approach" is built upon the idea that people can graduate out of poverty and into sustainable livelihoods.¹⁹²

147. The graduation approach owes its origin to the Targeting the Ultra-Poor programme in Bangladesh, which has been extensively evaluated and has inspired the

¹⁸⁵ Carmen Diana Deere and others, "Property rights and the gender distribution of wealth in Ecuador, Ghana and India", *Journal of Economic Inequality*, vol. 11, No. 2 (June 2013).

¹⁸⁶ Of 39 countries with unequal rights in the area, 18 are in Northern Africa and Western Asia, 10 in Sub-Saharan Africa and 6 in Central and Southern Asia. The remainder are in Eastern and South-Eastern Asia (3) and Oceania, excluding Australia and New Zealand (2). UN-Women calculations using data from World Bank, Women, business and the law database. Available at <https://wbl.worldbank.org/#> (accessed on 11 January 2019).

¹⁸⁷ Carmen Diana Deere and Cheryl R. Doss, "The gender asset gap: What do we know and why does it matter?", *Feminist Economics*, vol. 12, Nos. 1–2 (2006).

¹⁸⁸ Cheryl R. Doss and others, "Gendered paths to asset accumulation? Markets, savings, and credit in developing countries", *Feminist Economics*, vol. 25, No. 2 (2019).

¹⁸⁹ A global database on the distribution of agricultural landholders, disaggregated by sex, is maintained by the Food and Agriculture Organization of the United Nations (FAO) however, it comprises mostly agricultural censuses that are conducted neither regularly or frequently and therefore may not reflect the current situation on the ground. See FAO, Gender and land rights database. Available at www.fao.org/gender-landrights-database (accessed on 11 April 2019).

¹⁹⁰ With regard to sub-Saharan Africa, see Cheryl Doss and others, "Gender inequalities in ownership and control of land in Africa: myth and reality", *Agricultural Economics*, vol. 46, No. 3 (May 2015), p. 422. With regard to Latin America, see Carmen Diana Deere, Gina E. Alvarado and Jennifer Twyman, "Female owners or household heads? Analyzing gender inequality in assets ownership in Latin America", *Cuestiones Económicas*, vol. 28 (January 2018).

¹⁹¹ Women's share is much higher in Ecuador (52 per cent), largely due to the different marital property regime (community of property). See Deere and others, "Property rights and the gender distribution of wealth in Ecuador, Ghana and India".

¹⁹² See www.findevgateway.org/topics/graduation-sustainable-livelihoods.

design of similar programmes in other countries.¹⁹³ As described below, the impacts of the programme on women in very poor households have been largely positive, with evidence of sustained increases in asset ownership and income, at least in the initial years.

148. In 2002, BRAC established the Targeting the Ultra-Poor programme in response to the limitations of its microfinance programming in engaging the ultra-poor, defined as those who lack the material, human, financial and social assets to engage in market-related opportunities.¹⁹⁴ The programme targets ultra-poor women engaged in income-generating activities from households with no able-bodied or working men. The programme's aim is to increase productivity among women through skills enhancement and access to resources. Beneficiaries are provided with a range of benefits, including an asset transfer, a cash transfer to offset the inputs required to maintain the asset, health services and skills training.¹⁹⁵

149. In a 2013 study, researchers found that, between 2002 and 2008, among Targeting the Ultra-Poor programme, income increased 72 per cent on average, whereas among non-participants, the increase was only 29 per cent. In addition, the rate of savings among participants in the programme also increased, from 8 to 18 per cent, over the six-year period.¹⁹⁶ In addition to the income benefits of programme participation, women also reported feeling empowered by their ability to cease their engagement in poorly paid and stigmatizing work, such as agricultural day labour and domestic service.¹⁹⁷ The promotion by the programme of productivity and control of resources for women challenged both inequalities at the household level and discriminatory social norms and gender stereotypes at the community level.

150. A common limitation in the design of asset transfer programmes is that assets transferred to women may be taken over or controlled by men. Although the Targeting the Ultra-Poor programme does not place conditions on the use of the asset transfer, in the training sessions that it provides, it encourages women to maintain ownership and exercise control over the transferred assets. Despite the lack of strict conditionalities, in a 2015 study, researchers found that increases in sole and joint ownership of livestock were greater among women than among men.¹⁹⁸ The increased ownership of livestock by women was accompanied by greater control in particular over the rearing of cattle, which is widely regarded as a male activity in Bangladesh.¹⁹⁹ However, the outcome of the study also indicated that, when households purchase new assets not transferred by the programme but due to the programme, those assets tended to be owned solely by men. In addition, although the programme did not change the proportion of women who do income-generating work,

¹⁹³ Abhijit Banerjee and others, "A multifaceted program causes lasting progress for the very poor: evidence from six countries", *Science*, vol. 348, No. 6236 (May 2015).

¹⁹⁴ David Hulme and Karen Moore, "Assisting the poorest in Bangladesh: learning from BRAC's 'targeting the ultra-poor' programme" in Armando Barrientos and David Hulme, eds., *Social Protection for the Poor and Poorest: Concepts, Policies and Politics* (London, Palgrave Macmillan, 2008).

¹⁹⁵ Ibid.

¹⁹⁶ Anirudh Krishna, Meri Poghosyan and Narayan Das, "How much can asset transfers help the poorest? Evaluating the results of BRAC's ultra-poor programme (2002–2008)", *Journal of Development Studies*, vol. 48, No. 2 (2012).

¹⁹⁷ Narayan Das and others, "How do intrahousehold dynamics change when assets are transferred to women? Evidence from BRAC's challenging the frontiers of poverty reduction – targeting the ultra-poor programme in Bangladesh", IFPRI Discussion Paper No. 01317 (Washington, D.C., International Food Policy Research Institute, 2013).

¹⁹⁸ Shalini Roy and others, "'Flypaper effects' in transfers targeted to women: evidence from BRAC's 'targeting the ultra-poor' programme in Bangladesh", *Journal of Development Economics*, vol. 117 (November 2015).

¹⁹⁹ Ibid.

it shifted the work from outside to inside the homestead, possibly because the transferred asset (livestock) needed to be looked after within the homestead.²⁰⁰

151. The positive outcomes notwithstanding, growth in ownership and control of assets has also resulted in a significant increase in the time women allocate to tending to the livestock. In a 2017 study, researchers found that the time spent by beneficiaries rearing livestock increased by 217 per cent, equivalent to a rise of 415 hours per year, compared with the rise of four years after baseline among the women in the study's control group.²⁰¹ In total, participants increased their work days by 181 per cent, or 172 days, relative to the control group. The programme was designed on the assumption that participants had a lack of income-generating opportunities and a significant amount of idle time at their disposal.²⁰² Such a dramatic increase in hours and days worked has implications for women's health and well-being and the time that they are able to allocate to care for other family members, especially young children.

152. There is also concern that the programme may not be reaching the extreme poor. In several countries, including Bangladesh, close to half (45 per cent) of the beneficiaries were above the poverty line.²⁰³ Furthermore, the increase in both earnings and household consumption have been modest or non-existent in several countries; where the impact has been more sizeable, it is among those who were the least poor when they entered the programme.²⁰⁴ The cost-effectiveness of the programme is also a challenge, given the range of inputs required, in particular the intensive coaching and mentoring, compared with a regular and predictable cash transfer, which would offer beneficiaries income security.²⁰⁵

153. In addition, asset-building programmes alone are not sufficient for creating sustainable routes out of poverty. Evidence from programmes in Honduras, Pakistan and Peru suggests that, within a year of receiving the assets, many beneficiaries were obliged to sell their assets out of financial necessity,²⁰⁶ which can be understood as the assets having been used as a coping mechanism in the face of persistent risks, given that the cash transfer component of the programme only lasted for a few months and beneficiaries did not have a guaranteed minimum level of income on which they could draw, unless they had entered into a government social security scheme.²⁰⁷ In Bangladesh, nine years after entering the graduation programme, many of the beneficiaries who had taken on entrepreneurial activities had reverted back to their day-labouring jobs, including as paid domestic workers in the cases of many women beneficiaries.²⁰⁸ It is important therefore that such types of programmes are not seen as a substitute for systems of social protection that are designed to provide a modicum of income security, as the term "graduation" suggests, but rather as a complement to social protection systems.

²⁰⁰ Ibid.

²⁰¹ Oriana Bandiera and others, "Labour markets and poverty in village economies", *The Quarterly Journal of Economics*, vol. 132, No. 2 (May 2017).

²⁰² Ibid.

²⁰³ Stephen Kidd and Diloá Bailey-Athias, "The effectiveness of the graduation approach: what does the evidence tell us?", *Policy in Focus*, vol. 14, No. 2 (July 2017).

²⁰⁴ Banerjee and others, "A multifaceted programme causes lasting progress for the very poor".

²⁰⁵ Kidd and Bailey-Athias, "The effectiveness of the graduation approach".

²⁰⁶ Banerjee and others, "A multifaceted programme causes lasting progress for the very poor".

²⁰⁷ Kidd and Bailey-Athias, "The effectiveness of the graduation approach".

²⁰⁸ Farzana Misha and others, *How Far Does a Big Push Really Push? Mitigating Ultra-Poverty in Bangladesh*, ISS Working Paper, No. 594 (Rotterdam, International Institute of Social Studies, 2014), p. 24.

5. Potential of group farming

154. The assets that are transferred through typical graduation programmes tend to be modest in value, usually a few goats or chickens. They also tend to focus on individual women, thereby ignoring the potential of collective action. In a different approach, a number of other programmes in South Asia have attempted to transfer land for farming purposes to groups of landless women. The evidence from Telangana and Kerala states in India, as described in box XI, illustrates the viability of group farming and the ways in which the design of specific programme features can have an impact on their economic performance.²⁰⁹

Box XI

Group farming for empowering rural women: the results of initiatives in India

Initiatives to economically empower rural women rarely focus on farming, the occupation in which the majority of them are the most experienced. Some 75 per cent of rural female workers are dependent upon agricultural work in India, compared with 59 per cent of their male counterparts. Two state-level pilot initiatives in India, one undertaken in Telangana and the other in Kerala, launched in the early 2000s, were focused on enhancing women's livelihood opportunities through group farming, encouraging rural women to collectively lease land, pool their labour and capital and engage in joint cultivation on a voluntary basis. In those initiatives, women were recognized as farmers outside the domain of family farms, in which women are typically unpaid family workers with little autonomy. The two group farming initiatives applied two different approaches to helping beneficiaries to overcome resource constraints and their limited bargaining power with state institutions and in markets.

In Kerala, group farms did significantly better on average than individual farms in the same districts, in terms of annual productivity and profitability per farm; profitability was five times higher on group farms, making a significant difference in income among women. In Telangana, however, group farms performed much less well than individual farms, in terms of annual productivity, although they made up for it to a large extent in annual net returns per farm. In both states, group farms performed much better if they were cultivating commercial crops and not traditional food grains, such as paddy, because individual, typically male, farmers who owned good-quality land had an advantage.

Several factors underlie the differences between the two initiatives, including the level of government support received, the ecology of the land, whether the focus was on food grains or commercial crops and group composition. The groups in Telangana were typically very large in size, composed predominantly of older, often illiterate, economically disadvantaged Dalit women, which limited their social and economic reach, especially for leasing land, whereas in Kerala, groups were constituted of five or six relatively younger and literate women from a mix of caste backgrounds. Their socioeconomic heterogeneity enabled the groups to acquire access to wider community networks, which were especially useful when leasing land. The group farms in Telangana were established with the main focus of social empowerment and not livelihood generation, whereas in Kerala, the central point of the programme was livelihood enhancement with interlinked social and political empowerment.

²⁰⁹ Bina Agarwal, "Can group farms outperform individual family farms? Empirical insights from India", *World Development*, vol. 108 (August 2018); and Bina Agarwal, *Does Group Farming Empower Rural Women? The Indian Experience*, Discussion Paper No. 20 (New York, UN-Women, 2017).

Although there were differences in economic performance of the two programmes, in both states, group farming has brought substantial benefits, broadening women's economic, social and political horizons. Women in both states emphasized their improved ability to gain access to a range of state institutions, from banks to governmental agricultural departments, as well as to private markets for land and agricultural inputs. They also reported improved knowledge of new cultivation practices, which they used for their family farms as well. Some groups in Kerala even used their profits to purchase land collectively. Moreover, women in both initiatives emphasized feeling socially empowered. They reported that group farming gave them an identity as economic actors and contributors to livelihoods, and thereby they earned the respect of spouses and fellow villagers. In addition, many were politically empowered to stand for election to village councils, and a fair proportion of them have won.^a

^a Agarwal, "Can group farms outperform individual family farms?"

155. One of the factors highlighted in box XI is the relatively younger age range of the group members in Kerala, compared with those in Telangana. A related characteristic that is noteworthy is the proportion of women members with young children (defined as 12 years or younger), which was 16.1 per cent in Telangana compared with 26.6 per cent in Kerala.²¹⁰ Although they are not insignificant proportions, it is difficult to know whether the presence of young children acted as a constraint on those women's ability to participate in group farming, since the sample of women included in the research was drawn from the women who were participating in group farming and not from the entire village population.

156. However, women participants in the research were asked how they managed their children when they went to work. The most frequent response from women group farmers in Telangana was that they availed themselves of the *anganwadi* centres (see box XIII), and the second most frequent response was that they left their children with older family members, members of their husband's family or neighbours. In Kerala, the most common responses were that children were in school or that they were taken care of by grandparents or members of their husband's family; in a few cases, the response was that children accompanied them to the fields.²¹¹

157. The responses, especially those from women in Telangana, again underscore the critical role of public services as a complement to asset-building initiatives, especially if those initiatives are to include women who are of reproductive age or who shoulder a disproportionate share of the childcare responsibilities in their households. The ability of women to engage in paid work is closely tied to the availability of childcare centres or public schools that transfer the care responsibilities from individual women to collectively funded public services (see sect. IV).

E. Lessons learned with regard to policies and programmes to enhance income security among women

158. Underlying the widening gender gap in extreme poverty among women of reproductive age, in the present section, policies were highlighted that are aimed at remedying the double bind experienced by women in low-income contexts so as to reverse the depletion of their capacities caused by undertaking long hours of often

²¹⁰ Agarwal, *Does Group Farming Empower Rural Women?*

²¹¹ Email dated 18 May 2019 from Bina Agarwal addressed to Shahrashoub Razavi, Chief of the Research and Data Section, UN-Women.

physically demanding paid and unpaid work. Family formation and child-rearing, along with the increased expenses associated with having children, often compel women to take on any type of informal work that they can find, in addition to the hours they spend provisioning their households with basic necessities, such as water, fuel and cooked meals, leaving the little time remaining for care work and self-care. Under such conditions, paid work is not empowering for women. Time constraints lead to depletion among women and may also entail trade-offs with investments in developing the capabilities of other family members, in particular young girls onto whose shoulders care tasks are often displaced.

159. Social protection systems that are gender-responsive and age-responsive can deliver the transfers and services needed to provide income security at specific junctures in the life course at which women are most vulnerable to poverty, especially before and after childbirth and when they have young children. To achieve long-term income security for women, labour market or livelihood intervention programmes must work in conjunction with social protection systems that protect beneficiaries against risks across the life course. A number of factors have been identified from the policies and programmes described above.

160. First, although protecting women's income security is essential to promoting the health, nutrition and well-being of both mothers and infants, longer-term strategies are also needed to transform the stereotypical gender roles that assign the bulk of childcare to women. In developed countries in which paid maternity leave is widely available, well-designed parental leave schemes have slowly increased the participation of fathers. Those and other strategies for changing social norms should accompany social protection policies and programming in developing countries in which parental leave remains widely unavailable. To achieve universal coverage and be responsive to the specific conditions of women who work in the informal sector, a combination of contributory and non-contributory schemes is required.

161. Second, well-designed social protection transfers, such as universal child and family benefits, are a complementary measure that can reduce poverty and enhance income security for families with children. Although cash transfers can make a positive difference for women with young children, their potential is not realized when the benefit levels are low, narrowly targeted or made conditional, especially given that the fulfilment of conditions depends upon the availability and quality of public services. Cash transfers must be backed by investments in health, education and childcare services, as well as accessible infrastructure, to achieve their desired outcomes. In low-income countries, it may indeed be more effective to reallocate the resources needed to administer the conditionalities and use them to invest in public services. Although programmatic interventions aimed at enhancing women's livelihood options through asset-building can address some of the constraints that poor women face, they are not a substitute for broad-based economic and social policies, including gender-responsive social protection systems that address the root causes of income and time poverty among women.

162. Third, labour market and livelihood interventions, such as public works programmes and asset-building interventions, can only work for working-age women with young children if they address women's caregiving responsibilities in their design and implementation, rather than assuming that poor women have a significant amount of idle time at their disposal. Even when gender-responsive provisions are included in programme design, ensuring their implementation requires the active participation of women in monitoring efforts and social audits. Moreover, although labour market interventions can increase women's incomes and help them to accumulate assets, without adequate investments in time-saving infrastructure and public services, such interventions will intensify women's workloads, leaving them worse off, despite the increase in market income.

163. For social protection programmes and labour market interventions to effectively reduce income and time poverty among women, they must be accompanied by large-scale investment in time-saving infrastructure, such as water, electricity and transport, as well as public services that reduce and redistribute unpaid care and domestic work (see sect. IV).

IV. Breaking the cycle of income and time poverty among women: the role of basic infrastructure and public services

A. Introduction

164. Across developing countries, women who are income-poor and live in rural or remote areas are disproportionately excluded from access to time-saving infrastructure and high-quality public services, such as health and education. As a result, income and time poverty among those women increases and their capacities are depleted. The challenge is particularly acute in least developed countries and countries affected by crises. The physical distance from and the lack of affordability and poor quality of infrastructure and public services are among the most significant barriers to access for women who are both income-constrained and time-constrained. In addition, service delivery models and investments in infrastructure often remain blind and unresponsive to the time-use and mobility patterns of women, including women with young children, limiting their potential to reduce poverty and mitigate depletion.

165. Greater investments in public services and basic infrastructure are key to breaking the vicious cycle of income and time poverty among women. In OECD member countries, the provision of public social services increases household disposable income by 29 per cent, almost halving poverty and reducing income inequality, as measured by the Gini coefficient, by an average of 20 per cent.²¹² Although comparable calculations are not available for developing countries, evidence from Latin American countries indicates that the redistributive effect of public health and education services significantly exceeds that which is achieved through major cash transfer programmes.²¹³ Accessible, affordable and sufficiently staffed childcare and health-care services, reliable access to safe water and sanitation, adequate means of transportation and access to electricity can help women to avoid having to make difficult choices between short-term household survival and long-term investments in human capabilities,²¹⁴ including those of their children. Provided that it is well designed and properly implemented, the expansion of basic infrastructure and high-quality public services can not only reduce time spent on unpaid care and domestic work, but also generate employment opportunities for women, thereby increasing their incomes.

166. Against that background, the present section includes an examination of the ways in which, in low-income settings, public services and basic infrastructure can be used to ease the multiple and competing demands on women's time, increase the productivity of women in their labour, both paid and unpaid, and reduce the drudgery thereof. It contains an assessment of the trends and challenges in acquiring access to

²¹² Gerlinde Verbist, Michael Förster and Maria Vaalavuo, *The Impact of Publicly Provided Services on the Distribution of Resources: Review of New Results and Methods*, OECD Social, Employment and Migration Working Paper, No. 130 (Paris, OECD, 2012), pp. 32–36.

²¹³ Nora Lustig, "Taxes, transfers, and income redistribution in Latin America", *Inequality in Focus*, vol. 1, No. 2 (Washington, D.C., World Bank, July 2012).

²¹⁴ C. Mark Blackden and Quentin Wodon, "Gender, time-use, and poverty: introduction", in Blackden and Wodon, eds., *Gender, Time-use, and Poverty in Sub-Saharan Africa*.

public services and basic infrastructure with regard to income and time poverty among women. It also includes an examination of four critical areas in which income and time poverty among women can be addressed, namely: improving access to time-saving infrastructure, such as water and electricity; investing in early childhood education and care services that are responsive to the needs of poor women; bringing health services closer to women; and enhancing women's mobility through safe and affordable transport. The section concludes with an analysis of lessons learned and best practices to provide guidance on the delivery of public services and infrastructure. The overall aim of the present section is to build upon the work undertaken by the Commission on the Status of Women at its sixty-third session and to enable progress to be made on its recommendations pertaining to social protection systems, access to public services and sustainable infrastructure for gender equality and the empowerment of all women and girls (see [E/CN.6/2019/3](#) and [E/2019/27-E/CN.6/2019/19](#)).

B. Access for women to basic infrastructure and public services

167. On a global scale, significant improvements have been made with regard to access for women and girls to basic infrastructure and public services. Today, more girls are in school and more countries have achieved gender parity in enrolment than ever before.²¹⁵ Access to essential health services, including sexual and reproductive health care, has improved, with global rates of childbirth attended by skilled health professionals rising from 61 per cent in 2000 to 79 per cent in 2016.²¹⁶ Between 1990 and 2015, the use of improved drinking water sources rose, from 76 to 91 per cent.²¹⁷ Progress in access to safe sanitation has been slower but significant, with 68 per cent of the global population enjoying access in 2015, compared with 54 per cent in 1990.²¹⁸ Over the same period, access to electricity went up, from 70 to 87 per cent.²¹⁹ In contrast, access to clean energy for cooking fuels has advanced more slowly and is actually falling in some countries,²²⁰ with devastating consequences for the health and well-being of women and girls, who account for 6 of every 10 premature deaths resulting from household air pollution caused by unclean fuels and inefficient technologies.²²¹

1. Stark inequalities in access remain within and among countries

168. Stark inequalities in access remain within and among countries and regions. Different groups of women often have radically different experiences in access to health, education, water, sanitation and clean energy, depending on their household income and where they live, and lack of access to services and infrastructure increases the likelihood that women will experience time poverty (see sect. II).

169. Although gaps in access persist globally, access to water, sanitation and clean energy is particularly dire for women and girls in least developed countries and countries affected by crises. In 2016, 55 per cent of people living in least developed countries had no access to electricity, compared with the global average of 13 per

²¹⁵ UNESCO, *Global Education Monitoring Report Gender Review 2018: Meeting our Commitments to Gender Equality in Education* (Paris, 2018).

²¹⁶ UN-Women, *Turning Promises into Action*.

²¹⁷ UNICEF and WHO, *Progress on Sanitation and Drinking Water: 2015 Update and MDG Assessment* (Geneva, 2015).

²¹⁸ Ibid., p. 12.

²¹⁹ World Bank and others, *Tracking SDG7: The Energy Progress Report 2018* (Washington, D.C., World Bank, May 2018), p. 17.

²²⁰ Ibid., p. 5.

²²¹ UN-Women, *Turning Promises into Action*.

cent.²²² Rates of access to electricity of below 10 per cent were registered in Burundi, Chad and South Sudan.²²³ Across regions, gaps in access to basic infrastructure are greatest in sub-Saharan Africa, the region in which 33 of the 47 least developed countries of the world are located. In 2016, safely managed drinking water and basic sanitation remained inaccessible for 76 per cent and 72 per cent of the population, respectively, in sub-Saharan Africa.²²⁴

170. Access to public services is also highly uneven. Although almost all births were attended by skilled health professionals in more developed countries in 2014, 43 per cent of women in least developed countries lacked access to such services.²²⁵ Across 35 least developed countries, rural women are 33 percentage points less likely to enjoy access to such services than are urban women.²²⁶ Inequalities also remain with regard to access to early childhood education and childcare services. In high-income countries, 83 per cent of children were enrolled in pre-primary education in 2017, compared with 52 per cent in middle-income countries and 22 per cent in low-income countries.²²⁷ Within developing countries, there are stark inequalities based on household income, with children 3 to 4 years of age in the richest households being almost six times more likely to attend an early childhood education programme than children of those ages from the poorest households.²²⁸

2. Physical distance, lack of affordability and poor quality constrain access for women

171. The physical distance from and the lack of affordability and poor quality of public services and basic infrastructure are among the most significant barriers to access for women who are constrained both in terms of income and time. Across 53 developing countries, close to one third of women report distance (30.4 per cent) and obtaining money for treatment (32.9 per cent) as barriers to acquiring access health care (see figure XI). The differences between rural and urban areas are staggering, with more than twice as many rural women (38.8 per cent) than urban women (17.4 per cent) reporting distance as a problem. Across a subset of 29 least developed countries, the figures are even higher, with 42 per cent and 53 per cent of women reporting distance and money, respectively, as barriers.²²⁹

²²² United Nations, Department of Economic and Social Affairs, Global SDG Indicators Database.

²²³ Ibid.

²²⁴ WHO and UNICEF, *Progress on Drinking Water, Sanitation and Hygiene*.

²²⁵ World Bank, "Births attended by skilled health staff", World Development Indicators database. Available at <https://data.worldbank.org/indicator/SH.STA.BRTC.ZS?end=2014&locations=XL-XM-XP-XD&start=2000&view=chart>.

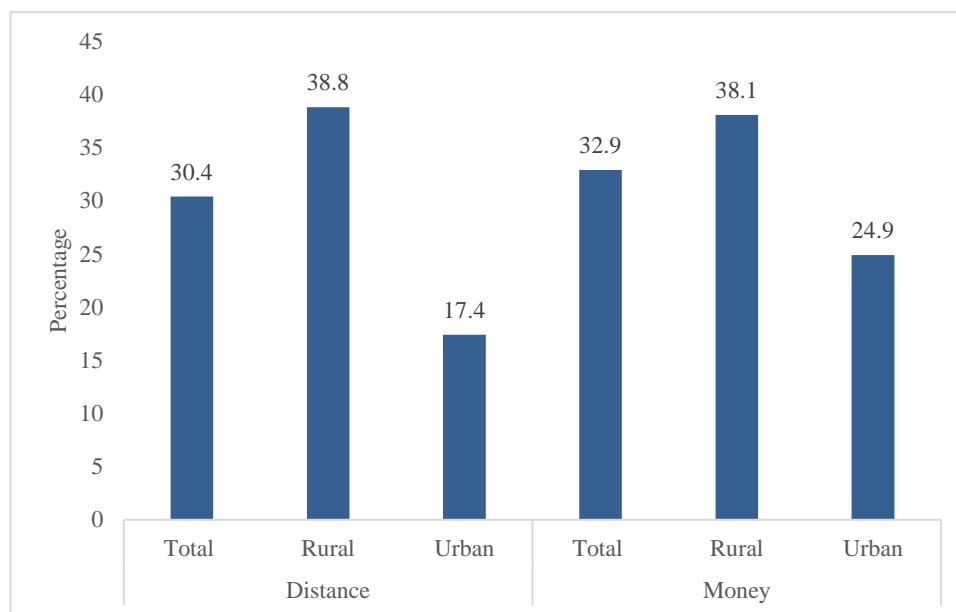
²²⁶ *State of the World's Population 2017: Worlds Apart – Reproductive Health and Rights in an Age of Inequality* (United Nations publication, Sales No. E.17.III.H.1).

²²⁷ UNESCO Institute for Statistics database. Available at <http://uis.unesco.org/> (accessed on 29 May 2019).

²²⁸ UNESCO, *Global Education Monitoring Report 2016: Education for People and Planet – Creating Sustainable Futures for All* (Paris, 2016).

²²⁹ UN-Women calculations are based on data from ICF International. See United States Agency for International Development, Demographic and Health Surveys Programme, STATcompiler (2010–2017) database. Available at www.statcompiler.com (accessed in June 2019). Data are from demographic and health surveys for women aged 15 to 49 in 29 of the 47 least developed countries for which data are available.

Figure XI
Proportion of women in developing countries who reported difficulty in acquiring access to health care



Source: UN-Women calculations based on data from ICF International. See United States Agency for International Development, Demographic and Health Surveys Programme, STATcompiler (2010–2017) database. Available at www.statcompiler.com (accessed in June 2019).

Note: The figure refers to the most recent data available from the Demographic and Health Surveys Programme for women 15 to 49 years of age in developing countries. For the analysis, difficulty in access to health care was defined on the basis of two indicators: the percentage of women who reported that they had significant problems in receiving treatment owing to the distance to a health facility and to obtaining money for treatment. Estimates for the pooled sample of 53 developing countries were weighted using the population of women 15 to 49 years of age from data obtained from *World Urbanization Prospects: The 2014 Revision*, prepared by the Department of Economic and Social Affairs, whereas the estimates for rural and urban women were weighted using the projections done on the basis of data from *The 2014 Revision*, for the population of women 15 to 49 years of age living in urban and rural areas, respectively.

172. In places where services are far away and transport is lacking, women and girls often walk long distances to health facilities, creating “spatial poverty traps”, in particular in rural areas.²³⁰ In the rural county of Nimba in Liberia, the average distance to the nearest health facility is 7.2 km, representing an approximate 136-minute walk.²³¹ As a result, a visit to a clinic, combined with the waiting time at the clinic, becomes a day-long and arduous undertaking. The poor are disproportionately affected by long waiting times, in particular in cases in which understaffed services struggle to meet demand.²³² Although both women and men may walk and wait to

²³⁰ Gina Porter, “Transport, (im)mobility and spatial poverty traps: issues for rural women and girl children in sub-Saharan Africa”, paper prepared for the international workshop “Understanding and addressing spatial poverty traps”, Overseas Development Institute and the Chronic Poverty Research Centre, Stellenbosch, South Africa, March 2007.

²³¹ Margaret E. Kruk and others, “Availability of essential health services in post-conflict Liberia”, *Bulletin of the World Health Organization*, vol. 88, No. 7 (July 2010).

²³² Javier Auyero, *Patients of the State: The Politics of Waiting in Argentina* (Durham, North Carolina, Duke University Press, 2012); Cookson, *Unjust Conditions*; and Anna J. Secor, “Between longing and despair: State, space, and subjectivity in Turkey”, *Environment and Planning D: Society and Space*, vol. 25 (2007).

receive medical care, women are also usually responsible for the health of other family members, in particular children, persons with disabilities or frail older persons who need to be accompanied during visits.

173. When health services are underfunded and understaffed, facilities are unable to meet demand in a timely and adequate manner and the ability of health professionals to deliver quality care is compromised, thereby affecting women's health as well as their income and time. According to WHO, Africa and South-East Asia have the lowest density of health workers, with 2.2 and 3.3 health workers per 1,000 inhabitants, respectively, compared with 9.6 and 14.0 in the Americas and Europe, respectively.²³³ In cases in which health services fall short, women's and girl's time spent caring for sick family members invariably increases, a trend that was well-documented during the HIV/AIDS crisis (see [E/CN.6/2009/2](#)). Even in cases in which other barriers are overcome, the lack of care of adequate quality, including poor treatment and discrimination by health providers, can keep women from using health services for themselves or their dependents.²³⁴

174. Women and girls are also disproportionately affected by the distance to water and energy sources to meet household needs (see sect. II). Being responsible for water collection in 80 per cent of households without access to water on premises, women and girls spend considerable time walking to haul water and waiting at shared access points as a result of congestion or limited or irregular supply. In rural Benin, the installation of village standpipes significantly reduced time burdens, but fetching the water still required an average of 17 minutes of walking and 18 minutes of waiting per trip and resulted in more trips per day as households increased consumption.²³⁵ Water collection can be similarly cumbersome in overcrowded urban settlements. In the slum area of Gulele, Addis Ababa, where women and girls are responsible for water collection in 75 per cent of households, water services were available five days a month for just over five hours; most households therefore relied on water from alternative sources that required almost three hours for an average round trip, including waiting in line.²³⁶

175. As a result of the responsibilities for managing household water and energy needs and ensuring the health and well-being of other family members being disproportionately placed on women and girls, the responsibility for covering the cost of often unaffordable water and electricity prices, transport fares and co-payments for public services, such as health care, also falls disproportionately on them.²³⁷ In particular among low-income households, fee-for-service payments often consume a significant proportion of household income and can encroach on savings and assets. Every year, about 100 million people are pushed below the poverty line as a result of shattering health costs, reflecting a situation in which even relatively small payments can cause financial catastrophe.²³⁸ Because of the lack of affordability, women and girls may forgo access to education, health, water, electricity and other basic services

²³³ WHO, *Health Workforce Requirements for Universal Health Coverage and the Sustainable Development Goals*, Human Resources for Health Observer Series, No. 17 (Geneva, 2016), p. 14.

²³⁴ Arachu Castro, Virginia Savage and Hannah Kaufman, "Assessing equitable care for indigenous and afrodescendant women in Latin America", *Revista Panamericana de Salud Pública*, vol. 38, No. 2 (2015).

²³⁵ Elena Gross, Isabel Günther and Youdi Schipper, "Women walking and waiting for water: the time value of public water supply", Courant Research Centre: Poverty Equity and Growth Discussion Paper, No. 134 (Göttingen, University of Göttingen, 2013), p. 12.

²³⁶ Konjit Aynalem Kidanie, "Access to water supply in urban poor households: the case of slums in Addis Ababa, Ethiopia", MSc thesis, UNESCO Institute for Water Education (IHE-Delft), 2015, pp. 39–42.

²³⁷ UN-Women, *Progress of the World's Women 2015–2016*.

²³⁸ WHO, *The World Health Report: Health System Financing – The Path to Universal Coverage* (Geneva, 2010), p. x.

or restrict their consumption, reducing the positive effect that those services could have on their time, health and well-being. In Ghana, low-income families rationed their children's attendance at public preschools, after staff costs were transferred to parents following a 2015 government freeze on public sector employment.²³⁹

3. Women's time-use and mobility patterns are not sufficiently taken into account

176. As in the provision of social protection (see sect. III), women's time-use and mobility patterns are rarely taken into account in the provision of public services and basic infrastructure; nor is the effect thereof on such patterns systematically monitored or evaluated. Low-income women in developing countries rely disproportionately on walking and public transport as their principal means of mobility.²⁴⁰ Furthermore, women spend more time on care and household-related travel than men,²⁴¹ including taking children to and from school and household provisioning,²⁴² and in some contexts spend an excessive amount of time walking and head-loading water and firewood for domestic use or transporting products to local markets.²⁴³ Women are also more likely than men to travel during off-peak hours and in peripheral neighbourhoods; they make more frequent and shorter trips on public transport and more trips with multiple destinations, a pattern commonly referred to as "trip chaining". Trip chaining is most common among low-income women, given that they tend to live on the outskirts of urban centres and regularly make multiple connections to reach public services or workplaces.

177. Instead of supporting public and intermediate forms of transport that would benefit poor women, investments in transport infrastructure often prioritize roads, highways and bridges, thereby supporting private motorized transport, which tends to be more accessible to the affluent and more commonly used by men, as well as being less sustainable.²⁴⁴ Public transport systems also cater to predominantly male commuting patterns, connecting peripheries to centres at peak hours. Furthermore, isolated or poorly-lit transport stops, inaccessible platforms and overcrowded carriages, alongside safety concerns, may make women reluctant to use such systems.²⁴⁵

178. Opening hours of public services such as childcare, education or health-care facilities that are incompatible with paid work schedules often exacerbate obstacles for women in acquiring access to services and limit their ability to engage in paid work or confine them to less formal, less well-paid employment. Pre-primary education services, in which early learning objectives are pursued in a school-type

²³⁹ D. Atobrah and B. Kwansa, "Pathways to accessible, affordable and gender-responsive childcare provision: the case of Ghana", background paper for the Research and Data Section, UN-Women, New York, 2017.

²⁴⁰ Tanu Priya Uteng, "Addressing the interlinkages between gender and transport in developing economies", paper prepared for the UN-Women expert group meeting on "Social protection systems, public services and sustainable infrastructure for gender equality", New York, 2018.

²⁴¹ Asian Development Bank (ADB), *Balancing the Burden? Desk Review of Women's Time Poverty and Infrastructure in Asia and the Pacific* (Manila, 2015).

²⁴² Deike Peters, "Gender and transport in less developed countries: a background paper in preparation for CSD-9", paper prepared for the Gender Perspectives for Earth Summit 2002 workshop, Berlin, January 2001; and Deike Peters, "Breadwinners, homemakers and beasts of burden: a gender perspective on transport and mobility", *Sustainable Development International* (1998).

²⁴³ Gina Porter and others, "Health impacts of pedestrian head-loading: a review of the evidence with particular reference to women and children in sub-Saharan Africa", *Social Science and Medicine*, vol. 88 (July 2013).

²⁴⁴ See E/CN.6/2019/3; and Uteng, "Addressing the interlinkages between gender and transport in developing economies".

²⁴⁵ Deike Peters, *Gender and Sustainable Urban Mobility* (United Nations Human Settlements Programme (UN-Habitat), 2013).

environment for children from 3 years of age until their entry into primary school, usually operate on a part-time basis, leaving few options for aftercare.²⁴⁶ Those challenges are amplified for women in the informal economy, whose work is characterized by long and irregular working hours (see sect. C. 3 below).

C. Policy priorities for reducing depletion and income and time poverty

179. Time-saving infrastructure, accessible and affordable health and childcare services and safe and affordable transport are among the most transformative policy interventions for addressing the high rates of income and time poverty among women, reducing drudgery and reversing the depleting effects of heavy and intense unpaid care and domestic work. Women and men in poor communities often identify issues such as fuel and water collection as the most important priorities for addressing unpaid care and domestic work.²⁴⁷ In Honduras and the Philippines, communities prioritized advocacy of the expansion of basic infrastructure in participatory assessments of care services.²⁴⁸ Although access is critical, policy design and implementation also matter. Public services, such as health care, childcare and public transport, must be safe, affordable and of adequate quality to be acceptable to women, and operating schedules and locations must be aligned to their work, care and mobility needs to reduce travel and waiting times. Investments in those areas can also be used to generate employment and entrepreneurship opportunities for women, whether in the maintenance of decentralized energy systems, water management or the provision of community-based health and childcare services, and including in non-traditional occupations, thereby increasing their income. Accompanied by adequate compensation, methodologies, training and support, such policy interventions can be a stepping stone to economic empowerment and contribute to broader changes in social norms and gender relations.

1. Improving access for women to affordable, time-saving infrastructure²⁴⁹

180. Access at the household level to water, sanitation, electricity and clean cooking fuels can have a direct impact on women's time and the drudgery of their labour by reducing the need for water and fuel collection and by enabling the use of time-saving electrical appliances. Access to safe water and clean energy also decreases the prevalence of water-borne and respiratory diseases, improving overall household health and reducing the burden of unpaid care for sick family members and household spending on health. In India, following the introduction of private taps, in-house toilets and piped sewerage systems across five urban slums, the incidence of disease

²⁴⁶ Daly, *Child-related Financial Transfers and Early Childhood Education and Care*; Silke Staab and Roberto Gerhard, "Putting two and two together? Early childhood education, mothers' employment and care service expansion in Chile and Mexico", *Development and Change*, vol. 42, No. 4 (July 2011); and Margarita Velasco, "Cuidado infantil en Ecuador: ¿derechos en conflicto?", background paper for the Research and Data Section, UN-Women, New York, 2017.

²⁴⁷ Leyla Karimli and others, *Factors and Norms Influencing Unpaid Care Work: Household Survey Evidence from Five Rural Communities in Colombia, Ethiopia, the Philippines, Uganda and Zimbabwe* (Oxfam, 2016); and Thalia Kidder, Zahria Mapandi and Hector Ortega, "Not 'women's burden': how washing clothes and grinding corn became issues of social justice and development", *Gender and Development*, vol. 22, No. 3 (2014).

²⁴⁸ Kidder, Mapandi and Ortega, "Not 'women's burden'".

²⁴⁹ Section C.1 is focused primarily on access to water and electricity. Safe sanitation and clean cooking, which are equally critical to improving women's health and well-being, were covered extensively in the 2014 *World Survey* (see A/69/156, sect. VI).

and monthly spending on health decreased, while disposable income, school attendance and literacy increased.²⁵⁰

181. How the freed-up time is reallocated depends on the context and type of infrastructure.²⁵¹ Better access to water and electricity improves school attendance for girls and boys.²⁵² Evidence is mixed on the extent to which time-saving infrastructure enables women to participate in paid work. Electricity seems to have a significant impact on income-earning activities among women, most likely owing to lighting that allows for the extension of working hours into the evening.²⁵³ Although such use of electricity may contribute to alleviating income poverty among women, it risks increasing time poverty among women by impinging on hours previously used for rest.²⁵⁴

182. In contrast, in a study on improved access to water in nine countries across sub-Saharan Africa, South Asia and the Middle East and North Africa, no discernible impact on the participation of women in off-farm paid work was found.²⁵⁵ When access to water improves, women may reallocate time to childcare and domestic chores that were previously constrained by the essential need to obtain clean water.²⁵⁶ That example demonstrates how less time spent on unpaid work can be an enabling but insufficient condition for the economic empowerment of women. The availability of decent jobs and livelihoods, women's control over their time and competing domestic responsibilities all play a role (see sect. III).

183. Affordability remains a significant barrier for women. "Last mile" access, referring to the portion of infrastructure that connects dwellings to water, sewerage and electricity networks, often requires the waiving or subsidization of connection costs, including household wiring and piping. Despite a significant expansion of the national grid to rural areas in Kenya, household electrification rates remained low in some areas, even among households closer to the low voltage power line. The US\$ 412 connection fee was suggested as the reason for the low rates.²⁵⁷ Socially inclusive tariff structures and targeted measures that ease the financial burden on poor households are also needed to make regular supply universally affordable. In Cambodia, the Phnom Penh Water Supply Authority has used such measures to extend networked

²⁵⁰ Priti Parikh and others, "Infrastructure provision, gender, and poverty in Indian slums", *World Development*, vol. 66 (February 2015).

²⁵¹ ADB, *Balancing the Burden?*

²⁵² Gayatri Koolwal and Dominique van de Walle, "Access to water, women's work, and child outcomes", *Economic Development and Cultural Change*, vol. 61, No. 2 (January 2013); Céline Nauges and Jon Strand, "Water hauling and girls' school attendance: some new evidence from Ghana", Policy Research Working Paper, No. 6443 (Washington, D.C., World Bank, 2013); Louise Grogan, "Time use impacts of rural electrification: longitudinal evidence from Guatemala", *Journal of Development Economics*, vol. 135 (November 2018); Taryn Dinkelman, "The effects of rural electrification on employment: new evidence from South Africa", *The American Economic Review*, vol. 101, No. 7 (December 2011); and Shahidur R. Khandker, Douglas F. Barnes and Hussain A. Samad, "Welfare impacts of rural electrification: a panel data analysis from Vietnam", *Economic Development and Cultural Change*, vol. 61, No. 3 (April 2013).

²⁵³ Dinkelman, "The effects of rural electrification on employment"; Louise Grogan and Asha Sadanand, "Rural electrification and employment in poor countries: evidence from Nicaragua", *World Development*, vol. 43 (2013); and Joana Costa and others, "The implications of water and electricity supply for the time allocation of women in rural Ghana", Working Paper No. 59 (Brasilia, International Policy Centre for Inclusive Growth, 2009).

²⁵⁴ ADB, *Balancing the Burden?*; and Rost and Koissy-Kpein, *Infrastructure and Equipment for Unpaid Care Work*.

²⁵⁵ Koolwal and van de Walle, "Access to water, women's work, and child outcomes".

²⁵⁶ ADB, *Balancing the Burden?*

²⁵⁷ Kenneth Lee and others, "Barriers to electrification for 'under grid' households in rural Kenya", Working Paper, No. 20327 (Cambridge, Massachusetts, National Bureau of Economic Research, 2014).

access to water to the urban poor. As a result, water became 25 times cheaper and the proportion of households with water connections increased significantly.²⁵⁸

Pathways to universal access: the potential and limitations of smaller scale approaches

184. A continuous supply of piped water and electricity at the household level has the highest potential for generating time savings and reducing drudgery. However, expanding power grids and water and sewerage networks is capital-intensive and fiscally and logistically challenging in dispersed, remote and rural settlements. In the energy sector, decentralized or distributed energy systems, such as mini-grids or micro-grids and solar home systems, play an increasingly important role in extending access to underserved areas.²⁵⁹ Off-grid solar electrification has allowed for remote rural areas, small island developing States and fragile and conflict-affected contexts across Asia and the Pacific and, to a lesser extent, sub-Saharan Africa to have access to electricity in ways that had not previously been possible through grid extension.²⁶⁰

185. Afghanistan, Bhutan and Nepal have rapidly expanded access to electricity and reduced gaps between rural and urban areas by combining grid and off-grid solutions. In Afghanistan, overall access to electricity went up from 28 to 84 per cent between 2006 and 2016, with much of the expansion being accounted for by micro- and mini-grids and solar home systems.²⁶¹ Women in villages powered by off-grid solar energy in Bamyan, one of the poorest provinces in Afghanistan, reported that they were able to perform their unpaid care and domestic work more effectively and more safely. Lighting reduced the contamination and undercooking of food and extended the time spent on carpet weaving, resulting in significant increases in household income – albeit not necessarily in women’s control over spending. The effect on the time spent collecting firewood was limited, however, because solar electricity did not allow for cooking and heating.²⁶²

186. The level and reliability of electricity supply also matter. Most of those who currently benefit from off-grid solar electricity use only basic energy services provided by solar lanterns with a capacity of 11 W.²⁶³ That amount of power is far less than the annual supply capacity of 365 kWh required for running water pumps and other appliances that could significantly reduce the unpaid work carried out by women or allow women to establish home-based enterprises.²⁶⁴

187. Smaller-scale, community-based approaches to expanding access have also been proposed in the water sector as an effective and more sustainable alternative to large-scale, centralized water infrastructure projects, such as dams.²⁶⁵ One approach, spearheaded by community-based organizations and taken to scale with government support in countries such as Brazil and India, is rainwater harvesting. As demonstrated through the “One million cisterns” initiative in Brazil, when such

²⁵⁸ Catarina de Albuquerque and others, *On the Right Track: Good Practices in Realizing the Rights to Water and Sanitation* (2012), p. 130.

²⁵⁹ World Bank, “Integrating gender considerations into energy operations”, Energy Sector Management Assistance Program Knowledge Series 014/13 (Washington, D.C., 2013).

²⁶⁰ World Bank and others, *Tracking SDG7*.

²⁶¹ Eric Mackres, Dimitrios Mentis and Anila Qehaja, “Bhutan has achieved 100% electricity access. Here’s how”, World Economic Forum, 15 February 2019.

²⁶² Karina Standal and Tanja Winther, “Empowerment through energy? Impact of electricity on care work practices and gender relations”, *Forum for Development Studies*, vol. 43, No. 1 (2016).

²⁶³ World Bank and others, *Tracking SDG7*.

²⁶⁴ Reihana Mohideen, “Gender responsive energy infrastructure”, background paper prepared for the World Survey, 2019.

²⁶⁵ Nicholas L. Cain, “A different path: the global water crisis and rainwater harvesting”, *Consilience: The Journal of Sustainable Development*, vol. 12, No. 1 (2014).

approaches are imbued with a feminist perspective, they can go beyond practical improvements for women and create opportunities for empowerment (see box XII).

Box XII

Transforming women's lives through rainwater harvesting: the "One million cisterns" programme in north-eastern Brazil

The "One million cisterns" programme, which has grown to a significant degree since its inception in 1999, involves working with poor, rural smallholder farming communities to improve the quality of and access to water in the vast, drought-prone semi-arid region in north-eastern Brazil through the installation of cisterns to collect rainwater for domestic use. In 2003, the programme, initiated by a network of 3,000 organizations of rural unions, farmers associations, cooperatives and civil society organizations, was incorporated into federal policy and started to receive support as part of the "Zero hunger" strategy of the Government, while remaining genuinely community driven.^a

The programme resulted in a reduction in the need for water collection, which previously took several hours per day, freeing up time for children to prioritize school and for women to engage in community activities, skills development and food production. Households headed by women and those including children between 0 and 6 years of age were prioritized for receiving cisterns, followed by those with school-age children and adolescents, older persons and persons with disabilities. Although the programme was aimed at increasing access for women to water, it was the advocacy of feminist organizations that helped to extend the participation of women beyond the role of beneficiaries to that of actors and decision makers.^b

Questioning the narrative that women were not interested in cistern building and maintenance jobs, feminist organizations began to offer training courses and to push for parity in local water management committees. By 2010, of the over 5,500 cistern builders that had been trained, an estimated 5 to 10 per cent were women.^c Among the challenges women builders have faced is competing work and household responsibilities. Despite those challenges, the participation of women in the building of an important community asset has increased their status as productive members of their communities and provided them with access to earnings that are significantly higher than those that they could obtain from informal work in mining, agriculture or paid domestic services.

Since the goal to build 1 million cisterns for domestic use was surpassed in 2014, the focus of the programme has shifted to the building of 5,000 cisterns for schools and over 250,000 for productive use. Unlike those of major water projects, the activities of this programme stimulate the local economy. According to Grassroots International, the construction of 10,000 cisterns generates over US\$11 million through job creation, the purchase of materials, food production and the provision of clean, fresh water.^d The simple approach to decentralizing and democratizing water provision and food production applied through the programme has transformed an estimated 4.5 million lives, mitigating the impacts of drought, such as child mortality, starvation and mass migration, and empowering women, diversifying income sources and increasing food security and climate resilience.

^a See www.futurepolicy.org/healthy-ecosystems/biodiversity-and-soil/brazil-cisterns-programme/.

^b Andrea Ferreira Jacques de Moraes and Cecilia Rocha, "Gendered waters: the participation of women in the 'One million cisterns' rainwater harvesting programme in the Brazilian semi-arid region", *Journal of Cleaner Production*, vol. 60 (December 2013).

^c Ibid.

^d Saulo Araujo, "Brazilian Government pulls plug on the million cistern project", Grassroots International, 22 December 2011.

188. While small-scale approaches can be sources of innovation and fulfil an important stop-gap function, significant challenges remain with regard to quality and long-term sustainability. In a study in Kenya, it was found that households in urban and peri-urban areas disproportionately relied on small-scale water providers, such as water kiosks and delivery agents.²⁶⁶ Although the provision of water through such means filled an important gap in water supply and reduced the time spent collecting water, providers charged high prices for water that was often contaminated. The example highlights the need for greater regulation, including of private providers, until universal access to safely managed drinking water services that are located on premises, available when needed and free of contamination is achieved, in line with the 2030 Agenda, in particular target 6.1 of the Sustainable Development Goals.

189. Governments bear responsibility for ensuring universal access and reaching those who are furthest behind. Reaching such objectives requires the mobilization of maximum resources and the regulation of all providers. Although investments in water and sanitation are among the most transformative investments for women and girls, they are the least likely to be financed through the private sector or public-private partnerships, and the private sector is less likely to service remote villages and informal settlements where set-up costs are high and full cost recovery through user charges is unlikely.²⁶⁷ Spaces for the participation and leadership of women are also needed to ensure that infrastructure investments are in line with the priorities of women and responsive to their needs. The results of projects in Ethiopia, India, Kenya, Nepal, Pakistan, South Africa and the United Republic of Tanzania indicate that placing women at the centre of water management decisions leads to improved access, more cost-effective delivery and less corruption in water financing.²⁶⁸ The example of the “One million cisterns” programme (see box XII) is evidence that feminist organizations can play an important role in opening up spaces and providing support for the participation and leadership of women.

2. Investing in early childhood education and childcare services

190. The presence of young children in the household significantly increases both the risk that women will experience poverty and their time spent on unpaid care and domestic work (see sect. II), making affordable childcare services an important policy priority. In cases in which such services are lacking, the ability to engage in paid work and increase returns on labour is constrained. Women in informal employment often choose a less remunerative type of work because of its compatibility with childcare responsibilities. Nevertheless, women are often forced to leave their children unattended or to take them to worksites, leading to multitasking and lower productivity, and potentially compromising their children’s safety.²⁶⁹

191. Early childhood education and childcare services are critical to relieving the double bind in which many low-income women find themselves, freeing up time for women to engage in education and paid work and mitigating the depleting effects of overwork and multitasking on both women and children.²⁷⁰ In low-income and middle-income countries, an estimated 30 per cent increase in childcare utilization

²⁶⁶ UNDP, “Small-scale water providers in Kenya: pioneers or predators?”, August 2011.

²⁶⁷ *Trade and Development Report, 2015: Making the International Financial Architecture Work for Development* (United Nations publication, Sales No. E.15.II.D.4).

²⁶⁸ *World Survey on the Role of Women in Development 2014: Gender Equality and Sustainable Development* (United Nations publication, Sales No. E.14.IV.6).

²⁶⁹ Laura Alfes, “Our Children Do Not Get the Attention They Deserve”: *A Synthesis of Research Findings on Women Informal Workers and Child Care from Six Membership-based Organizations* (Cambridge, Massachusetts, and Manchester, United Kingdom, Women in Informal Employment: Globalizing and Organizing, 2016).

²⁷⁰ UN-Women, *Progress of the World’s Women 2015–2016*; and Marzia Fontana and Diane Elson, “Public policies on water provision and early childhood education and care: do they reduce and redistribute unpaid work?”, *Gender and Development*, vol. 22, No. 3 (2014).

could raise maternal employment by around 6 per cent.²⁷¹ High-quality early childhood education and childcare services not only ensure children's safety while parents work, but also enhance physical and cognitive development, with positive effects for children from poorer households in particular.²⁷² Investments in such services can also stimulate job creation, especially for women. In South Africa, making those services universally available for all children under 5 years of age could generate approximately 2.3 million new jobs and raise employment rates among women by 10 percentage points. The new tax and social security revenue from those jobs would, in turn, help to recover more than a third of the initial fiscal outlay.²⁷³

192. Adequate public investment is paramount to ensuring that low-income families have access to high-quality early childhood education and childcare services and that the high cost of childcare does not reinforce income and time poverty traps. Although the private sector has been increasingly active in offering childcare services to the more wealthy sectors of the population, those services remain out of reach for those most in need. In countries where the provision of early childhood education and childcare is left entirely to the private sector, coverage tends to be low and skewed towards affluent urban families.²⁷⁴ In contrast, public investment in early childhood education and childcare services can raise enrolment rates and reduce inequalities in access. Since 2006, Chile has expanded public childcare services and provided free access to children from households in the bottom 60 per cent tranche of income distribution. Coverage among children under 5 years of age rose from 37 per cent in 2006 to 50 per cent in 2015, while the gap between children from the bottom and top income quintiles decreased from 15 to 9 percentage points.²⁷⁵

193. Other countries have opted to support and strengthen community-based childcare services. In some cases, community-based solutions can be more attuned to the needs of poor and marginalized populations in terms of location and opening hours. For example, the Self-Employed Women's Association runs 33 childcare cooperatives in Gujarat, India, providing a full-day childcare service to its members. The Ghana Association of Traders operates a childcare centre in Makola Market in Accra, allowing women traders to have their children nearby and accommodating their working hours.²⁷⁶ As part of some initiatives, on-site meals and health checks for children are also provided.²⁷⁷ Without public support, however, providers of such community-based services often struggle with financial sustainability and scale. In many instances, services can only be maintained by requesting fees or co-payments from parents. Although the charges may be nominal, they may still be unaffordable for poorer households. The working conditions and wages of childcare providers are also often poor.

194. To address the incompatibility of the duration of many early childhood education and childcare programmes with those of paid work obligations, countries can build upon existing services by integrating programmes for children of pre-primary age into primary schooling, extending the school day or adding childcare

²⁷¹ Sam Harper, Nichole Austin and Arijit Nandi, "Daycare and women's health, social and economic outcomes in low- and middle-income countries: systematic review and evidence synthesis", Grow Working Paper Series, GWP-2017-07 (Institute for the Study of International Development, 2017).

²⁷² Christopher Ruhm and Jane Waldfogel, "Long-term effects of early childhood care and education", *Nordic Economic Policy Review*, vol. 1 (2012); and Hirokazu Yoshikawa and Sarah Kabay, "The evidence base on early childhood care and education in global contexts", paper commissioned for the Education for All Global Monitoring Report 2015, 2015.

²⁷³ UN-Women, *Turning Promises into Action*.

²⁷⁴ UNESCO, *Education for All 2000–2015: Achievements and Challenges* (Paris, 2015).

²⁷⁵ Ana Maria Farias, "Servicios de cuidado infantil y educación inicial, Chile", background paper for the Research and Data Section, UN-Women, 2017.

²⁷⁶ Rachel Moussié, "Women informal workers mobilizing for child care", February 2017.

²⁷⁷ Alfes, "Our Children Do Not Get the Attention They Deserve".

elements to health and nutritional programmes. In India, for example, states such as Tamil Nadu have used the federal Integrated Child Development Services scheme to provide universal preschool and childcare services to children under 6 years of age, in addition to other services (see box XIII). In Latin America, several countries have extended the school day at the primary and secondary levels.²⁷⁸ Whereas impact evaluations have been focused mainly on educational outcomes for children, in studies conducted in Chile and the Dominican Republic, it was found that the extension had a positive and significant effect on the participation of women in the labour force.²⁷⁹ In Chile, the programme was also associated with a reduction in adolescent motherhood, in particular in schools that catered to poorer sectors.²⁸⁰

Box XIII

Extending existing programmes to deliver early childhood education and childcare: the Integrated Child Development Services scheme in Tamil Nadu, India

The federal Integrated Child Development Services scheme reaches half of the children under 6 years of age in India (almost 83 million) through the provision of services that include food, health checks and immunizations and, in some cases, childcare and preschool services.^a In most states, the *anganwadi* centres that deliver those services are focused more on nutritional and health needs than on childcare. They rely on an exclusively female staff who are poorly paid and unprotected.^b Some states, such as Tamil Nadu, have addressed those issues, building upon and strengthening the federal programme to improve the coverage and quality of services and working conditions for *anganwadi* workers. In Tamil Nadu, the programme performs better than in other states in a number of areas, including infrastructure, the regular availability of nutritious food, preschool education for children 3 to 6 years of age, opening hours and locations that cater to women's needs, more decentralized training and relatively better wages for *anganwadi* staff. It also does well in reaching marginalized groups, such as Dalit communities, within a broader structure aimed at universal provision of such services, although more could be done to increase access for poorer Dalit communities. The state government also expanded its fiscal resource allocation to the scheme, and other programmes, to provide better working conditions and wages for *anganwadi* workers. Women reported feeling more enabled to perform both their paid work, in particular in cases in which it involved tasks that were hazardous to carry out around small children, and unpaid care work, knowing that their children were in a clean, safe and healthy environment.^c

^a Shradda Chigateri, "Pathways to accessible, affordable and gender-responsive childcare provision for children under six: India case studies", background paper for the Research and Data Section, UN-Women, 2017.

^b Rajni Palriwala and N. Neeta, "Care arrangements and bargains: *anganwadi* and paid domestic workers in India", *International Labour Review*, vol. 149, No. 4 (December 2010).

^c Chigateri, "Pathways to accessible, affordable and gender-responsive childcare provision for children under six".

²⁷⁸ Pablo Alfaro, David K. Evans and Peter Holland, "Extending the school day in Latin America and the Caribbean", Policy Research Working Paper, No. 7309 (Washington, D.C., World Bank, 2015).

²⁷⁹ Matias Berthelon, Diana Kruger and Melanie Oyarzún, "The effects of longer school days on mothers' labour force participation", Discussion Paper, No. 9212 (Bonn, Germany, Institute of Labour Economics, 2015).

²⁸⁰ Carlos Concha Albornoz, "Jornada escolar extendida. Oportunidades y desafíos para avanzar hacia una educación de mayor calidad y equidad", in Organization of Ibero-American States for Education, Science and Culture and Ministry of Education of the Dominican Republic, *Jornada Escolar Extendida: Aportes para la Reflexión y la Acción* (Santo Domingo, 2016); and Diana I. Kruger and Matias Berthelon, "Delaying the bell: the effects of longer school days on adolescent motherhood in Chile", Discussion Paper, No. 4553 (Bonn, Germany, Institute of Labour Economics, 2009).

3. Bringing health services closer to women

195. Public investments in the physical and human infrastructure of health services are a precondition for reducing income and time poverty among women who not only face difficulties in seeking health care for themselves (see figure XI), but also are usually responsible for ensuring that the health needs of other family members, in particular children, are met. The establishment of community health worker programmes and the introduction of information and communications technologies have emerged as two key trends in the context of broader attempts to strengthen health systems. Given that such measures are aimed at bridging physical distance and extending access to rural and remote communities, they could potentially reduce care needs through better preventive services, as well as reduce travel and waiting times for women who seek access to health-care services for themselves or their dependents, including for the fulfilment of their sexual and reproductive health and rights. Nevertheless, the effects of information and communications technologies and community health worker programmes on women's caregiving responsibilities and health outcomes are still poorly understood. Given that both types of interventions currently enjoy significant policy endorsement and financial support at the global level and are being adopted by an increasing number of countries, a systematic assessment of their impact on gender roles and relations is urgently needed.

(a) Community health worker programmes: the need for fair wages and professional development

196. Efforts to achieve universal health coverage have coalesced in recent years around the renewed interest and investment in community health worker programmes extending access to underserved and excluded populations, delivering preventive, informational and basic curative services and organizing referrals to health facilities as needed, thereby helping users to save on travel costs and save time.²⁸¹ Sub-Saharan Africa and Asia, the regions with the largest deficits in health-care professionals, have spearheaded those efforts, and community health workers now comprise a sizeable proportion of the total health workforce across a range of countries, including India (46 per cent) and Pakistan (43 per cent). In Nepal, the number of community health workers is triple that of physicians, nurses and midwives combined.²⁸² Ethiopia, Kenya and Rwanda have deployed an estimated 42,000, 45,000 and 64,000 community health workers, respectively, to strengthen health service delivery.²⁸³

197. When they are adequately trained, equipped and supported, community health workers can help to improve health outcomes, including child health outcomes, thereby reducing the demand for unpaid family care.²⁸⁴ Home visits have the dual benefit of improving health outcomes and reducing the time spent acquiring access to health care. Home visits can lead to a raise in immunization rates and adherence to prescribed treatments, improve access to family planning and foster preventive health

²⁸¹ Kate Tulenko and others, "Community health workers for universal health-care coverage: from fragmentation to synergy", *Bulletin of the World Health Organization*, vol. 91, No. 11 (November 2013).

²⁸² Baba Aye and others, "Decent work for community health workers in South Asia: a path to gender equality and sustainable development", 29 January 2018.

²⁸³ Joint United Nations Programme on HIV/AIDS, "2 million African community health workers: harnessing the demographic dividend, ending AIDS and ensuring sustainable health for all in Africa", 5 July 2017, p. 3.

²⁸⁴ Uta Lehmann and David Sanders, "Community health workers: what do we know about them? The state of the evidence on programmes, activities, costs and impact on health outcomes of using community health workers", January 2007.

practices, such as proper hygiene and mosquito net usage.²⁸⁵ In Uganda, home visits helped to reduce the prevalence of diarrhoeal diseases and fever and improved the uptake of health services for children under 5 years of age.²⁸⁶ In complex emergency settings, community health workers have the potential to mitigate negative health impacts.²⁸⁷

198. The implementation of community health worker programmes, however, is often problematic. Lack of adequate training, continued support and proper integration into the broader health system can undermine the potential of community health workers,²⁸⁸ and unmanageable caseloads and lack of supplies compromise the provision of quality care.²⁸⁹ To ensure that community health worker programmes are a truly cost-effective pathway to universal health coverage, the opportunity costs incurred by workers, who are often women and poor, must also be considered. In sub-Saharan Africa, nearly 70 per cent of community health workers are women, mostly young adults with only primary education.²⁹⁰ Most receive little or no compensation²⁹¹ and often spend personal income to perform duties.²⁹²

199. Some programmes combine wages with performance-based incentives. In cases in which community health workers are not sufficiently remunerated, however, performance-based incentives may have unintended consequences, including the disregard of unremunerated tasks.²⁹³ In India, those incentives skewed the programme by narrowing the activities of workers to those that were incentivized, such as institutional delivery and immunization, which led to the neglect of non-incentivized activities, such as home visits, post-partum care and community mobilization.²⁹⁴

200. Fair wages, safe and decent working conditions and opportunities for professional advancement are critical to ensuring the long-term sustainability and quality of care provided and preventing the depletion of the mostly female workforce owing to the voluntary or poorly paid care labour undertaken by community health workers in addition to the existing demands on their time.²⁹⁵ In combination with their recognition as workers, providing decent pay and non-monetary incentives, including

²⁸⁵ Maryse C. Kok and others, "Which intervention design factors influence performance of community health workers in low- and middle-income countries? A systematic review", *Health Policy and Planning*, vol. 30, No. 9 (November 2015).

²⁸⁶ Richard Mangwi Ayiasi and others, "Use of mobile phone consultations during home visits by community health workers for maternal and newborn care: community experiences from Masindi and Kiryandongo districts, Uganda" *BMC Public Health*, vol. 15, No. 560 (June 2015).

²⁸⁷ Giorgio Cometto and others, "Health policy and system support to optimize community health worker programmes: an abridged WHO guideline", *The Lancet: Global Health*, vol. 6, No. 12 (December 2018).

²⁸⁸ Ibid.; and Ayiasi, "Use of mobile phone consultations".

²⁸⁹ Kok and others, "Which intervention design factors influence performance of community health workers?"; and Cometto and others, "Health policy and system support".

²⁹⁰ ILO, *Care Work and Care Jobs for the Future of Decent Work*.

²⁹¹ Ibid.; and Lehmann and Sanders, "Community health workers".

²⁹² Kok and others, "Which intervention design factors influence performance of community health workers?".

²⁹³ WHO, *WHO Guideline on Health Policy and System Support to Optimize Community Health Worker Programmes* (Geneva, 2018); and Kok and others, "Which intervention design factors influence performance of community health workers?".

²⁹⁴ Lipekho Saprii and others, "Community health workers in rural India: analyzing the opportunities and challenges Accredited Social Health Activists (ASHAs) face in realizing their multiple roles", *Human Resources for Health*, vol. 13, No. 95 (December 2015).

²⁹⁵ WHO, *WHO Guideline on Health Policy and System Support to Optimize Community Health Worker Programmes*.

training and professional development, can improve performance and motivation and reduce attrition.²⁹⁶

201. Well-designed community health worker programmes build bridges between remote communities and health facilities, but must be properly funded and adequately integrated into national strategies aimed at recruiting, developing, training and retaining a diverse health workforce.²⁹⁷ Successful experiences with large-scale national community health worker programmes in Brazil²⁹⁸ and Rwanda (see box XIV) indicate that public sector leadership, effective institutionalization and parallel investments in the physical and human health infrastructure are prerequisites to harnessing the potential of community health workers to deliver health care effectively.

Box XIV

Health as a key development objective: combining long-term investments with the implementation of a community health worker programme and the development of information and communications technologies in Rwanda

After the 1994 genocide, Rwanda took important steps to rebuild its shattered health system as a central component of national development.^a The strategy combined the roll-out of a community-based health insurance scheme with investments in health infrastructure and service delivery and included efforts to tackle geographical barriers to health care, such as through the implementation of a community health worker programme and the development of mobile health tools.^b Those reforms combined made services simultaneously more affordable and accessible.^c

The community health worker programme was part of a long-term strategy to address health worker shortages, including through the recruitment, development and retention of trained nurses, midwives and doctors.^d The referral system from the village level to the district and national levels was also strengthened.^e At the village level, the workforce of community health workers grew, from 12,000 in 1995 to 45,000 in 2015, with each village assigned three community health workers, one of whom was dedicated to maternal and newborn health.^f Community health workers are locally elected and well-respected volunteers who link rural villages to the primary health-care system while filling gaps in the provision of basic care, such as prenatal and postnatal care and family planning services. Maternal health workers identify pregnant women, provide health information, encourage the utilization of antenatal care services and institutional delivery and provide referrals, where needed.^g A performance-based incentive system is currently in place, but it is mainly linked to preventive care.^h

Mobile phones are used to facilitate the communication of community health workers with patients and health centres.ⁱ A mobile phone-based alert and audit service that allows community health workers to track pregnancies and quickly respond to complications and emergency obstetric care needs was scaled up nationwide in 2013.^j The system was extensively used, but led to improved health-care uptake only in districts in which additional support was provided, including training and supervision, and equipment and health system capacity to support community health workers.^k

²⁹⁶ Kok and others, "Which intervention design factors influence performance of community health workers?"

²⁹⁷ Cometto and others, "Health policy and system support".

²⁹⁸ Lehmann and Sanders, "Community health workers".

Together with the implementation of systemic measures, community health workers have contributed to the rapid progress made on key maternal health indicators. The rate of births attended by skilled health professionals steeply increased, from a low rate of 39 per cent in 2005 to 91 per cent in 2015, with gaps between rural and urban areas declining from 28 to 8 percentage points^l and maternal mortality rates dropping from 567 to 290 per 100,000 live births.^m Nevertheless, more efforts are needed to recognize those volunteers as workers and to put the achievements in maternal health on a sustainable financial footing that also includes better working conditions and remuneration for the health workers.ⁿ

^a Hilary M. Schwandt and others, “‘Family planning in Rwanda is not seen as population control, but rather as a way to empower the people’: examining Rwanda’s success in family planning from the perspective of public and private stakeholders”, *Contraception and Reproductive Medicine*, vol. 3, No. 18 (2018).

^b UN-Women, *Progress of the World’s Women 2015–2016*.

^c Pamela Abbot, Roger Sapsford and Agnes Binagwaho, “Learning from success: how Rwanda achieved the Millennium Development Goals for health”, *World Development*, vol. 92 (April 2017).

^d Maurice Bucagu and others, “Impact of health systems strengthening on coverage of maternal health services in Rwanda, 2000–2010: a systematic review”, *Reproductive Health Matters*, vol. 20, No. 39 (2012).

^e Abbot, Sapsford and Binagwaho, “Learning from success”.

^f Luigi D’Aquino and Audrey Mahieu, *Comprehensive Evaluation of the Community Health Programme in Rwanda* (Liverpool School of Tropical Medicine Centre for Maternal and Newborn Health, 2016), p. 14.

^g Rwanda Governance Board, “Rwanda community health workers programme: 1995–2015 – 20 years of building healthier communities”, 2017.

^h Jamie Haver and others, “Experiences engaging community health workers to provide maternal and newborn health services: implementation of four programmes”, *International Journal of Gynecology and Obstetrics*, vol. 130, supp. 2 (June 2015).

ⁱ Abbot, Sapsford and Binagwaho, “Learning from success”.

^j Angele Musabyimana and others, “Assessing the perspectives of users and beneficiaries of a community health worker mHealth tracking system for mothers and children in Rwanda”, *PLOS One*, vol. 13, No. 6 (June 2018).

^k Hinda Ruton and others, “The impact of an mHealth monitoring system on health care utilization by mothers and children: an evaluation using routine health information in Rwanda”, *Health Policy and Planning*, vol. 33, No. 8 (October 2018).

^l UNICEF, “Delivery care”, database on maternal and newborn health coverage. Available at <https://data.unicef.org/topic/maternal-health/delivery-care/>.

^m WHO and others, *Trends in Maternal Mortality: 1990 to 2015* (Geneva, WHO, 2015), p. 75.

ⁿ Abbot, Sapsford and Binagwaho, “Learning from success”; and WHO, *WHO Guideline on Health Policy and System Support to Optimize Community Health Worker Programmes*.

(b) Potential and limitations of mobile health interventions

202. Community health worker programmes are frequently combined with mobile health interventions, defined as the practice of medicine and public health care with the assistance of mobile technologies, such as mobile phones, VHF radios and other wireless technologies, to enable better communication between patients and providers and among health professionals.²⁹⁹ Thanks to the rapid spread of information and communications technologies, in particular mobile phones, mobile health interventions may help to overcome physical barriers to access, reduce travel and wait times and strengthen the efficiency and effectiveness of health systems. Such interventions may also reduce the time that women spend on unpaid care for family members, including children, and on acquiring access to health-care services. Meaningful access to digital devices, technologies and skills is critical if mobile

²⁹⁹ WHO, *mHealth: New Horizons for Health through Mobile Technologies*, Global Observatory for eHealth Series, vol. 3 (Geneva, 2011).

health interventions are to reduce, rather than exacerbate, inequalities on the basis of gender, income, geographical location and other markers of disadvantage.

203. Mobile health technologies have been broadly implemented in the areas of reproductive, maternal, newborn and child health over the past decade. They allow for remote consultations and monitoring, faster emergency response and referrals, closer conformity with quality of care guidelines, including through the use by community health workers of step-by-step instructions and checklists, and efficient connectivity between rural clinics and the broader health system.³⁰⁰ In Malawi, the use of radiotelephones in health centres reportedly resulted in a reduction in the average transport delay in maternity referral from 6 to 3 hours.³⁰¹ In Zanzibar, United Republic of Tanzania, the sending of text messages and provision of vouchers via mobile phone to pregnant women increased antenatal care attendance, and in Colombia, the use of mobile phones improved adherence to treatment guidelines.³⁰² The lack of electricity and solar battery chargers and poor connectivity caused problems in Uganda, where community health workers and health professionals were unable to respond to mobile enquiries because they were away from their place of work, without mobile phone network coverage, or overloaded with work.³⁰³

204. Overall, data on the impact of mobile health interventions remain limited and are based mainly on the results of single applications or pilot projects. To successfully scale up such interventions, they must offer tangible benefits to users and include input from users from the outset. In addition, adequate training and motivation must be provided to all stakeholders involved.³⁰⁴ Alignment with broader strategies to enhance access, quality and timeliness of public health services is critical; as shown in the example from Rwanda (see box XIV), mobile health interventions require additional support to be effective.³⁰⁵ The expansion of mobile health interventions also raises regulatory challenges related to the emergence of new policy actors and partnerships in the field of public health, including transnational mobile phone operators, platform providers and private foundations, with the power to reshape the health financing landscape.³⁰⁶ Mobile health interventions may enable commercial health companies to reach people directly via mobile phones, potentially bypassing regulatory authorities vital to ensuring that medical interventions are safe and appropriate.

205. The expansion of community health worker programmes and the increasing use of information and communications technologies in health service delivery are occurring in tandem with the growing involvement of a diverse set of private sector actors, both for-profit and not-for-profit, in various parts of the health system. In low-income and middle-income countries, 37 per cent of family planning services, 44 per cent of antenatal care and 40 per cent of delivery care are currently covered by private providers with varying levels of formal care provided to different segments of the

³⁰⁰ Alain B. Labrique and others, "mHealth innovations as health system strengthening tools: 12 common applications and a visual framework", *Global Health: Science Practice*, vol. 1, No. 2 (August 2013).

³⁰¹ Porter, "Transport, (im)mobility and spatial poverty traps", p. 13.

³⁰² Ayiasi, "Use of mobile phone consultations".

³⁰³ Ibid.

³⁰⁴ Alain B. Labrique and others, "Best practices in scaling digital health in low- and middle-income countries", *Globalization and Health*, vol. 14, No. 103 (October 2018).

³⁰⁵ Ruton and others, "The impact of an mHealth monitoring system".

³⁰⁶ Marine Al Dahdah, Annabel Desgrées du Loû and Cécile Méadel, "Mobile health and maternal care: a winning combination for health care in the developing world?", *Health Policy and Technology*, vol. 4, No. 3 (April 2015); and Gerald Bloom and others, "ICTs and the challenge of health system transition in low- and middle-income countries", *Globalization and Health*, vol. 13, No. 56 (July 2017).

population.³⁰⁷ Whereas richer segments of the population have access to established private hospitals, pharmacies and doctors, the poor are more likely to rely on informal, often unregulated, care providers. Instead of voluntary codes of conduct, which are inadequate in that context, public investments, regulation and robust accountability mechanisms are necessary to ensure universal access to quality care for all.

206. The recognition that the strengthening of health systems is more effective when informed by regular input from citizens, communities and civil society, including women's groups,³⁰⁸ has led to an increased interest in and experimentation with social accountability strategies. The strategies involve participatory tools and processes, such as social and gender audits, scorecards, community monitoring and mobilization, public hearings, expenditure tracking and participatory and gender-responsive budgeting, to bolster the capacity of citizens and communities to demand more and better public services. In Malawi, community scorecards have been used to foster engagement between community members, health-care workers and district officials, resulting in positive effects on the accessibility, equity and quality, including improved timeliness and safety, of reproductive health-care services.³⁰⁹

4. Enhancing women's mobility through the provision of safe and affordable transport

207. Investments in transport infrastructure that prioritize specific mobility needs can be transformative for time-constrained and income-constrained women and girls, reducing travel time, enabling access to public services and improving connectivity to markets, thereby expanding earning opportunities.³¹⁰ Across developing countries, limited access to safe transport is estimated to reduce the probability that women will participate in the labour force by 16.5 percentage points.³¹¹ A wheelbarrow that carries up to 50 kg can reduce the time rural women spend fetching water by around 60 per cent, and a bicycle offers an even higher load-carrying capacity and increased travel speed.³¹² In rural Morocco, proximity to a paved road has tripled the probability of school attendance by girls and doubled that of boys.³¹³ Improvements to rural roads in Bangladesh led to a 49 per cent and 51 per cent increase in the supply of men and women in the labour force, respectively.³¹⁴

³⁰⁷ Every Women Every Child's Independent Accountability Panel, *Private Sector: Who is Accountable for Women's, Children's and Adolescents' Health?* (Geneva, World Health Organization, 2018).

³⁰⁸ Gita Sen and Veloshnee Govender, "From principle to practice: universal and gender-responsive health care", background paper prepared for the UN-Women expert group meeting on the theme "Social protection systems, public services and sustainable infrastructure for gender equality", New York, 2018.

³⁰⁹ Sara Gullo and others, "Effects of a social accountability approach, CARE's community score card, on reproductive health-related outcomes in Malawi: a cluster-randomized controlled evaluation", *PLOS One*, vol. 12, No. 2 (February 2017); and Sara Gullo, Christine Galavotti and Lara Altman, "A review of CARE's community score card experience and evidence", *Health Policy and Planning*, vol. 31, No. 10 (May 2016).

³¹⁰ Peters, "Gender and transport in less developed countries"; Porter, "Transport, (im)mobility and spatial poverty traps"; and Heather Allen, "Approaches for gender-responsive urban mobility: sustainable transport – a sourcebook for policymakers in developing cities", Deutsche Gesellschaft für Internationale Zusammenarbeit, Sustainable Urban Transport Project, May 2018.

³¹¹ ILO, *World Employment Social Outlook: Trends for Women 2017* (Geneva, 2017).

³¹² Peters, "Gender and transport in less developed countries", p. 10.

³¹³ H. Levy and C. Voyadzis, "Morocco impact evaluation report: socioeconomic influence of rural roads", World Bank, Washington, D.C., 1996.

³¹⁴ Shahidur R. Khandker, Zaid Bakht and Gayatri B. Koolwal, "The poverty impact of rural roads: evidence from Bangladesh", *Economic Development and Cultural Change*, vol. 57, No. 4 (July 2009).

(a) Increasing the use by women of intermediate forms of transport

208. Intermediate forms of transport, such as handcarts, bicycles and motorcycles, and improving roads for their use, can reduce time poverty and improve access to markets.³¹⁵ Programmes that provide women and girls with free or credit-enabled access to bicycles have been shown to reduce commuting times among low-income women in South Africa³¹⁶ and to increase secondary school enrolment among girls in rural India.³¹⁷ In places where roads are considered safe for girls, bicycles can be a popular and cost-effective complement to conditional cash transfers to stimulate the enrolment of girls in secondary school.³¹⁸

209. Despite their potential for reducing time poverty among women and girls, intermediate forms of transport remain more likely to be owned and used by men.³¹⁹ Furthermore, most interventions to introduce intermediate forms of transport have been small scale and piecemeal, often failing to appropriately consider contextual factors that constrain women's mobility or discourage the use by women of particular forms of transport.³²⁰ For example, female beneficiaries might pass on their respective intermediate forms of transport to male household members or not use them. In some cases, the introduction of intermediate forms of transport may inadvertently shift the loading burden from women to children. In Ghana, households participating in such interventions as a means of improving post-harvest activities, which generally entailed the carrying of heavy loads such as farm produce or fuelwood, were mostly those with children available to operate the intermediate forms of transport.³²¹ Because it is often cheaper to have family members carry loads rather than to rent carts or motor vehicles, children were recruited to push carts with heavy loads, in addition to their usual domestic load-carrying work, resulting in negative impacts on their education and health.³²² Women's use of intermediate forms of transport can be supported through local promotion schemes aimed at increasing the social acceptance of women using different means of transport.³²³

(b) Making public transport systems work for low-income women

210. Cities in developing countries are increasingly investing in bus rapid transit and metro systems to solve urban mobility challenges, providing an opportunity to respond more directly to women's mobility needs.³²⁴ The connection of low-income neighbourhoods and the removal of financial and non-financial barriers, including safety and accessibility, should be prioritized in transit planning in order to effectively

³¹⁵ Peters, *Gender and Sustainable Urban Mobility*.

³¹⁶ Ibid.

³¹⁷ Karthik Muralidharan and Nishith Prakash, "Cycling to school: increasing secondary school enrollment for girls in India", working paper, International Growth Centre, 2013.

³¹⁸ Ibid.

³¹⁹ Peters, "Gender and transport in less developed countries"; and Porter, "Transport, (im)mobility and spatial poverty traps".

³²⁰ Gina Porter, "Transport services and their impact on poverty and growth in rural sub-Saharan Africa: a review of recent research and future research needs", *Transport Reviews*, vol. 34, No. 1 (January 2014).

³²¹ Gina Porter, F. Owusu Acheampong and K. Blaufuss, "Socio-economic findings of the five village study: actions research to evaluate the impact on livelihoods of a set of post-harvest interventions in Ghana's off-road settlements", report submitted to the Department for International Development of the United Kingdom, June 2003.

³²² Ibid.; Gina Porter and others, "Child portering and Africa's transport gap: evidence from Ghana, Malawi and South Africa", *World Development*, vol. 40, No. 10 (October 2012); and Porter and others, "Health impacts of pedestrian head-loading".

³²³ Paul Starkey and John Hine, "Poverty and sustainable transport: how transport affects poor people with policy implications for poverty reduction – a literature review", October 2014.

³²⁴ Allen, "Approaches for gender-responsive urban mobility".

reach low-income women. To make trip chaining affordable, a system that allows for the consecutive use of multiple public transport options on a single fare, for example, is more likely to respond to the mobility patterns of poor urban women than one in which charges are incurred for each trip.³²⁵ In addition, social tariffs, subsidies and concessionary fares for children, students, older persons and persons with disabilities are frequently used to make public transport affordable.³²⁶ In Bogotá, the *TransMilenio* bus rapid transit system has combined feeder buses, pro-poor fare structures and investments in public spaces in urban slums to strengthen inclusive mobility (see box XV).³²⁷

Box XV

Inclusive mobility: improving public transport and public spaces in Bogotá

The development of the *TransMilenio* urban transport system in Bogotá, aimed at reducing reliance on private motorized transport and the traditional network of uncoordinated and competing private bus companies, has resulted in a shift towards large-capacity buses, dedicated lanes and stations that enable fast boarding and preboarding ticketing. An integrated ticketing system was introduced that enables free transfers and connects peripheral, low-income neighbourhoods through free feeder buses.^a The system operates as a public-private partnership. Private companies run the bus fleet and ticketing system, and the public sector maintains and develops the accompanying infrastructure. Investments in public spaces in slum areas, including paved greenways for cyclists and pedestrians that lead to *TransMilenio* bus stations, have accompanied those developments.^b As a result, *TransMilenio* is the most widely used mode of transport among women (31.6 per cent) and men (26.6 per cent).^c Men are still more likely than women to use private transport options such as cars or motorcycles (see figure XII). Concerns have been raised over the increase in *TransMilenio* ticket prices in relation to wages, which could compromise access to public transport among the poor.^d

^a Guy Crawford, “Sustainable transport in Colombia: Bogotá and the Transmilenio”, Institute of Development Studies Case Study 05, 2012.

^b Ibid.

^c Marisol Dalmazzo Peillard, “¿Quién cuida en Bogotá?, Colombia”, in *¿Quién Cuida en la Ciudad? Aportes para Políticas Urbanas de Igualdad* (United Nations publication, Sales No. S.17.II.G.21).

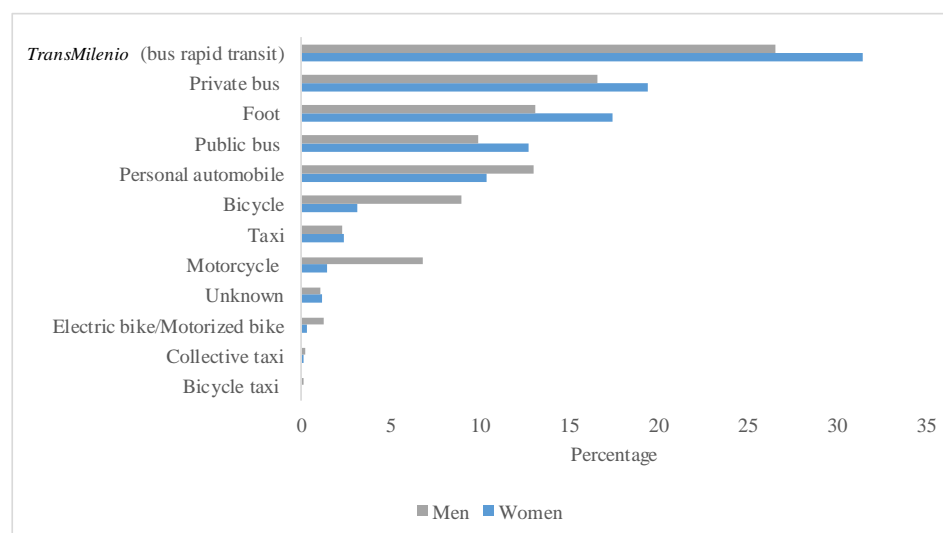
^d Crawford, “Sustainable transport in Colombia”.

³²⁵ Ibid.

³²⁶ Ibid.; and Starkey and Hine “Poverty and sustainable transport”.

³²⁷ Allen, “Approaches for gender-responsive urban mobility”.

Figure XII
Distribution of the population by principal mode of transport, Bogotá, 2015



Source: Marisol Dalmazzo Peillard, “¿Quién cuida en Bogotá?, Colombia”, in *¿Quién Cuida en la Ciudad? Aportes para Políticas Urbanas de Igualdad* (United Nations publication, Sales No. S.17.II.G.21), graphic IX.6.

211. Sexual harassment and other forms of violence against women and girls³²⁸ constrain their mobility choices and access to public spaces, including public transport, with an impact on their time use and income. In places where safe public transportation is not available, women often opt for private, more costly, alternatives such as taxis, take more time-consuming but safer public routes or simply reduce their mobility. Under certain circumstances, considering transport connections as unsafe might lead women to forgo jobs or educational opportunities.³²⁹ A range of measures can be taken to enhance women’s personal safety and security, including the use of awareness-raising campaigns aimed at promoting women’s and girls’ right to benefit from public transportation free from sexual harassment and other forms of violence, the application of participatory methodologies in urban and transport planning to ensure that women’s needs and input from women are taken into account and the development of response mechanisms and the provision of services for survivors of violence in the public transport system. Certain cities have opted to put into place women-only transportation as a temporary special measure to enhance women’s safety and increase their mobility in the process of creating safe public transportation for everyone. UN-Women has helped cities to adopt a number of such measures as part of its Safe Cities and Safe Public Spaces initiative.³³⁰ In Cairo, the development of the new bus rapid transit system includes plans for hiring a significant proportion of female bus crews, both drivers and conductors, buses with priority and segregated seating for women and infrastructure improvements, such as better street lighting and improved footpaths, to enhance women’s safety and accessibility in “last mile” connectivity.

³²⁸ It is recognized that men also experience fear in public spaces, but that it is more often a fear of other men, rather than a fear of women.

³²⁹ Allen, “Approaches for gender-responsive urban mobility”.

³³⁰ UN-Women, “Safe cities and safe public spaces for women and girls: global results report”, October 2017.

D. Lessons learned with regard to the design of public services and basic infrastructure to reduce income and time poverty among women

212. As outlined in the 2030 Agenda, Governments are responsible for ensuring that public services and basic infrastructure are of adequate quality, accessible and affordable to all and that providers are accountable to the communities they serve. However, public services and infrastructure policies often fail to take account of the specific barriers to access for women and fail to address the disproportionate time that women spend on unpaid care and domestic work. To ensure that access is truly universal and that the multidimensional nature of poverty among women is addressed, the design and delivery of public services and infrastructure must be informed by a thorough assessment of gender-specific time-use and mobility patterns, and the impact of policies and programmes on those patterns must be systematically integrated into monitoring and evaluation frameworks. In addition, three cross-cutting lessons emerge from the preceding consideration of policy priorities.

213. The first lesson learned is that, although infrastructure and public services can be financed and delivered with varying degrees of State, private sector and community participation, without proper regulation and incentives, there is no guarantee that investments will be directed to areas in which their impact on economic, social and environmental sustainability will be greatest. In particular in areas where initial capital investments are significant and the potential for cost recovery is low, such as rural and remote areas, private financing is likely to remain limited. Similarly, although community-based organizations are often at the forefront of innovations in infrastructure and service provision that respond to the rights and needs of the poor,³³¹ such innovations are difficult to maintain and scale up without public investment. The many positive externalities of improvements to basic infrastructure and public services – on gender equality, human capabilities, economic productivity and environmental sustainability – make them ideal candidates for public sector investment (see sect. V).

214. The second lesson learned is that the participation of women in the design, delivery, monitoring and evaluation of public services and basic infrastructure is critical to enhancing the effectiveness and efficiency of infrastructure and public services and the responsiveness thereof to the rights and needs of women. Participatory assessments and gender audits can give women a voice and can be a means to make their priorities heard.

215. The third lesson learned is that new technologies can offer opportunities for “leapfrogging”, allowing poor countries to accelerate progress towards universal access and enhance the efficiency and improve the quality of basic infrastructure and public services. However, the extent to which the use of new technologies in infrastructure and public service delivery may be done in a way that is responsive to the needs of poor women and enables them to realize their rights is still poorly understood. For example, despite the potential of off-grid solar energy to increase access to electricity, in particular in remote and rural areas, basic solar technology remains insufficient for running high-wattage appliances that reduce domestic work burdens among women. Furthermore, although mobile technology can increase access for women to information on health care, there is a limited understanding of the consequences of use of such technologies. To be effective, technological innovation must be accompanied by commensurate investments in the physical and human infrastructure needed to run public services. That requirement is particularly relevant

³³¹ *World Survey on the Role of Women in Development 2014.*

for low-income settings in which the population has yet to take full advantage of the technological revolutions of the past two centuries.³³²

V. Financing investments to build income security and reduce time poverty among women

A. Introduction

216. Implementing the integrated package of policies to reduce income poverty and time poverty among women described in sections III and IV, covering social protection, labour market interventions, public services and infrastructure, requires economic resources. However, where policies work synergistically to achieve sustainable development objectives, including gender equality and the empowerment of women and girls, the capacity of Governments to mobilize sufficient resources is contingent on the coherence between, in particular, economic, environmental and social policies.

217. The adequate and effective resourcing of such policies depends on a country's ability to mobilize, prioritize and allocate funds to social investments that foster gender equality and the empowerment of women and girls. In the 2030 Agenda, Member States pledged that they would work for a significant increase in investments to close the gender gap and strengthen support for institutions in relation to gender equality and the empowerment of women at the global, regional and national levels. Furthermore, in the Addis Ababa Action Agenda of the Third International Conference on Financing for Development, Member States reiterated that there was a need for gender mainstreaming, including targeted actions and investments in the formulation and implementation of all financial, economic, environmental and social policies.

218. There are a broad range of policies, including basic infrastructure and labour market policies, that can reduce income poverty and time poverty among women. Social policy spending in fields such as social protection and public services is a particularly important way to enhance income security among women, especially those who have caring responsibilities, for whom child and family transfers are beneficial (see sect. III), and to reduce the time spent on unpaid care and domestic work, such as by providing childcare services (see sect. IV).

219. There is significant scope for increasing fiscal space to fund policy priorities aimed at reducing income poverty and time poverty among women. Increasing social policy spending, such as on the provision of childcare services, should be considered to be an investment in the productive capacity of the economy rather than as consumption. Furthermore, there are several measures through which Governments can mobilize resources, such as through institutional reform, tax system reform and strategies to enlarge the country's fiscal space. Monitoring the allocation of resources for gender equality through gender-responsive budgeting is of critical importance. For developing countries, resource mobilization from official development assistance, South-South cooperation and other external sources is also critical.

220. The present section contains an outline of the rationale for recognizing social policy spending in macroeconomic policy as an investment rather than as consumption and factors that limit a country's fiscal space and strategies that support

³³² *World Economic and Social Survey 2018: Frontier Technologies for Sustainable Development* (United Nations publication, Sales No. E.18.II.C.1).

domestic resource mobilization to finance social investments that reduce income poverty and time poverty among women.

B. Recognizing social policy spending as an investment

221. Public resources allocated to implement social policies continue to fall short of the required level to meet globally agreed development goals, including those that are most important for reducing income poverty and time poverty among women.³³³ A key challenge is that, under macroeconomic policies, such spending is often treated as a form of current consumption with no consequences for the productive capacity of the economy. Investments, on the other hand, are expected to maintain and expand the productive capacity of an economy by creating adequate opportunities for paid employment and supporting sustained increases in living standards over time from both market and non-market activities. Maintaining adequate levels of investment is a core objective of macroeconomic policy and has a direct impact on an economy's growth trajectory. Although investments are commonly associated with private businesses, investments made by the public sector and households are also critical to maintaining the economy's productive capacity in the long term.

1. Investing in the development, care and well-being of human beings to enhance productivity

222. Public investments are a crucial component of the overall investments made in an economy. However, public investments are often defined in a narrow sense as being directed at building physical infrastructure, because that is what increases the productivity and productive capacity of the economy. An investment made today yields returns in the form of greater productivity in the future. Public investments in infrastructure can also enhance the productivity of businesses and households. There is a role to be played by policymakers in ensuring that adequate public spending is directed towards infrastructure assets, such as roads, transport systems, water and sanitation and electricity, paying particular attention to achieving universal reach among the most marginalized. Relying on private financing alone for the provision of such infrastructure would create the risk of undersupply, especially in rural and remote areas (see sect. IV).

223. However, public investments in infrastructure are not the only category of spending that raises productivity within the economy. Public investments made in human development, care and well-being, formally categorized as social spending, in such areas as education and health care, also have a long-term impact on productivity. With regard to public investment, the major difference between investments in physical infrastructure and investments in human development, care and well-being is that, for the latter category, the returns are less tangible and often involve services rather than goods. Certain non-market services provided within the household, such as unpaid care work, also raise the productivity of the economy, as they allow infants and children to develop and flourish into well-functioning and productive adults. Under existing macroeconomic policies, however, such services are rarely treated as investments.

224. There is a strong case for expenditure that is focused on the care and development of human beings, in particular social spending on public services, to be classified not as consumption but as an investment. In fact, under macroeconomic policies, education has long been recognized as an investment. The accumulation of knowledge and skills, or human capital, enhances the productive contribution of

³³³ *Financing for Sustainable Development Report 2019* (United Nations publication, Sales No. E.19.I.7).

people and is complementary to investments in physical capital.³³⁴ At the individual level, greater productivity justifies paying more highly educated people more money for their labour. At the macroeconomic level, investments in raising the level of formal educational attainment or in skills development support economic growth.

225. Investments in education generate returns similar to those in physical capital in the form of more production and additional earnings. The authors of a review of over 1,100 studies across 139 countries found that having one more year of schooling raised future lifetime earnings by 9 per cent, indicating that there is an economic return from investing in more education³³⁵ and that mobilizing and increasing public resources to invest in education will pay off in the future.

226. Although Governments have generally considered education in terms of its contribution to human capital, other types of public spending with similar long-term consequences for productivity must be given greater consideration in discussions about fiscal space and budget priorities. Investments in health services have the potential to raise productivity in the long run, enabling people to live longer, healthier and therefore more productive lives.³³⁶

227. However, spending on the provision of social services does not capture the full array of investments in human development, care and well-being that increase productivity. Only market activities included in the traditional definition and measurement of GDP are generally considered to contribute to human-capital formation, but many contributions made to health and education take place outside of the market economy and involve unpaid care and domestic work, primarily performed by women.

228. The focus on formal health and educational services often renders invisible all of the investments made by households in the care, development and well-being of their members. Those investments are largely unpaid, and they are largely made by women. For example, the unpaid care and domestic work that contributes to early childhood development, primarily shouldered by women, affects cognitive development, health outcomes and educational achievement later in life, with important consequences for the long-term productivity and long-term health of the economy.³³⁷ Unpaid care and domestic work play a critical role in building human capabilities, which is rarely recognized in macroeconomic policies.

2. Importance of public investment in social policies

229. The positive externalities generated by social policies focused on the care, development and well-being of people make those policies ideal candidates for public rather than private investment. Most estimates of the returns generated by education are focused on the private returns, the value of higher individual earnings associated with additional education. However, education also generates social returns, which

³³⁴ Gary S. Becker, *Human Capital: A Theoretical and Empirical Analysis with Special Reference to Education*, 3rd ed. (Chicago, University of Chicago Press, 1994).

³³⁵ George Psacharopoulos and Harry Anthony Patrinos, "Returns to investment in education: a decennial review of the global literature", Policy Research Working Paper, No. 8402 (Washington, D.C., World Bank, 2018).

³³⁶ Pierre-Richard Agénor, Otaviano Canuto and Luiz Pereira da Silva, "On gender and growth: the role of intergenerational health externalities and women's occupational constraints", Policy Research Working Paper, No. 5492 (Washington, D.C., World Bank, 2010).

³³⁷ James J. Heckman, "Policies to foster human capital", Working Paper 7288, (Cambridge, United States, National Bureau of Economic Research, 1999); James Heckman, "The economics of inequality and human development", keynote presentation at the first National Congress meeting on building a legal framework for public policies for early childhood, Brasilia, 16 April 2013; and Harold Alderman, ed., *No Small Matter: The Impact of Poverty, Shocks, and Human Capital Investment in Early Childhood Development* (Washington, D.C., World Bank, 2011).

are not adequately captured by standard methods of estimating returns. Everyone benefits by being part of a more educated community. Innovations developed by a well-educated population generate broad-based benefits. In fact, efforts to measure some aspects of the social returns of education indicate that they exceed private returns.³³⁸

230. Relying on private investments alone puts at risk the broad social returns of services such as education, because there is no guarantee that private investments will flow to the areas necessary for generating the greatest impact. In fact, Governments allocate resources to public education to remedy the shortfalls. Although there are a small number of socially conscious investors, most private investment remains driven by the profit motive. Given those circumstances, the private sector will underinvest in social policy areas when other investment opportunities are expected to generate higher returns, even when the social returns are significant. Public financing is therefore critical for realizing the broad benefits of implementing social policies.

231. Policymakers are often concerned that increases in public spending will crowd out private investment. Their concern is based on the idea that increased public expenditure is to the detriment of expenditure elsewhere in the economy, potentially through changes in prices such as interest rates. The argument is that greater public spending drives up interest rates and discourages private investment.

232. However, the contrary is the case. Rather than bidding resources away from the private sector, government spending may raise the overall level of employment and utilization of productive capacity, in particular when there are underutilized resources.³³⁹ The fiscal stimulus that raises demand and capacity utilization has knock-on effects on private investment. Lower levels of unemployment are associated with higher levels of demand in the economy, which, in turn, make private investment more profitable. Therefore, public spending “crowds in”, rather than crowds out, private expenditure.

233. Unpaid care and domestic work are fundamental to human development and well-being, and they are required to maintain the productive capacity of the economy. However, the current distribution of that work between women and men is highly unequal and contributes to income poverty and time poverty among women. Treating social policy spending as an investment in macroeconomic policies, rather than as consumption, and recognizing the broad economic and social returns of public investment is critical for increasing public resources for policies that can reduce time poverty and income poverty among women.

³³⁸ Daron Acemoglu and Joshua Angrist, “How large are the social returns to education? Evidence from compulsory schooling laws”, Working Paper 7444 (Cambridge, United States, National Bureau of Economic Research, 1999).

³³⁹ James Heintz, “The impact of public capital on the US private economy: new evidence and analysis”, *International Review of Applied Economics*, vol. 24, No. 5, p. 619 (21 September 2010); Nihal Bayraktar and Blanca Moreno-Dodson, “How can public spending help you grow? An empirical analysis for developing countries”, Policy Research Working Paper No. 5367 (Washington, D.C., World Bank, 2010); Ward Romp and Jakob de Haan, “Public capital and economic growth: a critical survey”, *Perspektiven der Wirtschaftspolitik*, vol. 8, No. S1, p. 6 (April 2007); David Alan Aschauer, “Is public expenditure productive?”, *Journal of Monetary Economics*, vol. 23, No. 2, p. 177 (March 1989); David Alan Aschauer, “Does public capital crowd out private capital?”, *Journal of Monetary Economics*, vol. 24, No. 2, p. 171 (September 1989); Alicia H. Munnell, “Why has productivity growth declined? Productivity and public investment”, *New England Economic Review* (January/February 1990), p. 3; and Alicia H. Munnell, “How does public infrastructure affect regional economic performance?”, *New England Economic Review* (September/October 1990), p. 11.

C. Fiscal constraints on increasing social investments

234. Several factors, including competing claims on government resources, policy choices, the structural features of national economies and international economic relationships, constrain the ability of Governments to invest in the implementation of social policies to reduce income poverty and time poverty among women.

1. Competing claims on government resources

235. In recent years, there has been a trend towards greater social spending per capita in low-income and middle-income countries. For such countries, estimated public health spending rose on average from US\$ 228 per capita in 2000 to US\$ 520 in 2016 and educational expenditure increased from US\$ 161 per capita in 2000 to US\$ 396 in 2015 (measured in 2011 United States dollars adjusted for purchasing power parity).³⁴⁰

236. The availability of public funding for social investment can often be constrained by competing claims on government resources. In a context of fixed budget revenue, an increase in one area of spending comes at the expense of another. In many cases, the allocation of expenditure is shaped by political priorities and the influence of interest groups. Under such circumstances, gender-responsive budgeting (see sect. D) is an important part of monitoring whether public expenditure is allocated in such a way as to support gender equality. However, even if a Government prioritizes social investment, its budget allocations may be inadequate due to the low levels of public resources it has available overall.

237. Claims on government resources may also reflect obligations tied to prior fiscal decisions. One of the most significant claims on public resources that limits fiscal space comes from the national debt. For many countries, the level of indebtedness and the cost of debt servicing represent critical barriers to mobilizing resources for social investment.³⁴¹ As a country's debt servicing costs increase, it may be less able to direct resources to areas that yield dividends in the form of sustainable development. The amount spent to service the national debt depends on the size of that debt, but also on other factors, such as national economic conditions, ratings of the quality of the debt and fluctuations in the interest rate and exchange rate.

2. Declining tax progressivity and the inefficiency of tax systems

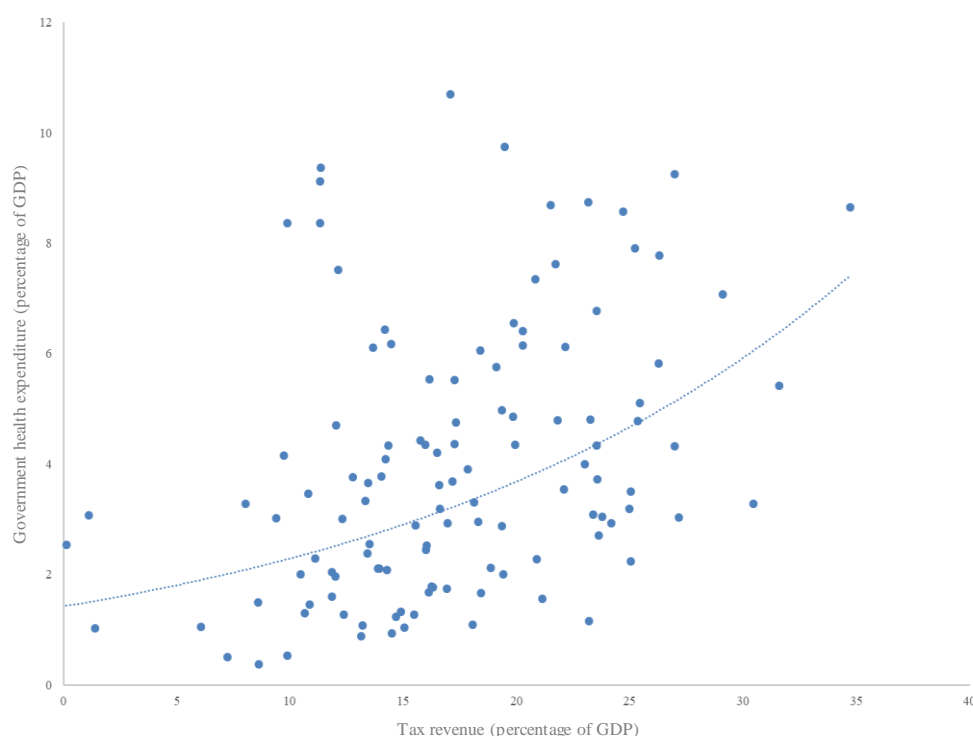
238. For most countries, tax revenues represent the single most important source of finance for social and public investment. When countries are able to mobilize public finances, they are able to achieve higher levels of spending to support implementation of social policies and public investments. In cross-country comparisons, larger tax-to-GDP ratios are associated with a bigger share of a country's resources going to social spending.³⁴² Figure XIII illustrates the relationship between tax revenue and government health expenditure as shares of GDP. Greater tax mobilization is associated with a larger share of national income being dedicated to public health spending.

³⁴⁰ Calculations made by UN-Women based on data from the World Bank, World Development Indicators database, available at <http://datatopics.worldbank.org/world-development-indicators/>.

³⁴¹ *Financing for Sustainable Development Report 2019*; and Sanjaya Panth and others, "Assessing fiscal space: an initial consistent set of considerations", Staff Paper (Washington, D.C., International Monetary Fund (IMF), December 2016).

³⁴² Gregory De Paepe, Tom Hart and Cathal Long, *Domestic Resource Mobilisation and the Transition to Sustainable Development: Synthesis of Asia Case Studies* (London, Overseas Development Institute, 2017).

Figure XIII
Tax revenue and government health expenditure as percentages of gross domestic product



Source: World Bank, World Development Indicators database. Available at <http://datatopics.worldbank.org/world-development-indicators/> (accessed in June 2019).

Note: The data presented are averages for the latest available data, for the latest available year for the countries considered, dating from between 2014 and 2017.

239. The design of tax policies can also reduce many countries' capacity to mobilize the resources needed to fund social policies. The reduction of income and corporate tax rates and the lowering of trade taxes as part of wider liberalization measures have been particularly detrimental to the capacity of developing countries to mobilize resources. As a result of such policies, the tax base in many low-income countries has declined, causing a significant fall in revenues not compensated for by increases in revenues from other taxes. In low-income countries, it is estimated that only 30 cents of every dollar lost to trade tax reductions was recovered through other revenue sources.

240. More recently, developing countries have been improving their ability to generate tax revenues. On average, tax revenues as a percentage of GDP have risen in many low-income countries in recent years, but despite such gains, those countries still lag behind higher-income countries. Sixty per cent of the least developed countries had year-on-year improvements in their tax-to-GDP ratios in 2017, with an average gain of nearly 1 percentage point in the 27 countries making progress. However, many of those gains have relied on less progressive forms of taxation that contribute to income inequality. In developing countries, the share of tax revenues mobilized through indirect taxes, which are frequently more regressive, has increased over time.

241. Because of the structural features of their economies, low-income countries have a significantly smaller tax base than higher-income countries, which limits the public resources at their disposal for social spending. Their tax-to-GDP ratio tends to

rise with per capita income. The efficiency of tax collection in a country depends to a large extent on the quality of its institutions and its ability to minimize tax avoidance and tax evasion.

3. Unequal impacts of global economic integration

242. Global economic integration constrains the ability of Governments, to varying degrees, to use macroeconomic policy to fund social investments. Illicit financial flows also affect the capacity of Governments to mobilize domestic resources, because they facilitate tax avoidance and tax evasion.³⁴³ Transfers of funds to offshore tax havens through illicit financial flows diminish the resources available to Governments to realize their policy objectives. Estimates show that, from 2006 to 2015, illicit financial flows amounted to 20 per cent of the total value of trade in developing countries, which is a sizeable loss of resources.³⁴⁴ Illicit flows may also be linked to public debt. The financial inflows that a country receives from external borrowing may leave a country in the form of illicit outflows.³⁴⁵ In such cases, a country's debt burden intensifies without increasing the public resources available to implement needed policies.

243. International financial flows have an impact on a Government's fiscal space, even when those flows are not illicit or do not represent a form of tax avoidance. As evidenced by the impacts of the 2008 global financial crisis, the free flow of finance has the potential to destabilize national economies. Efforts to accommodate global financial markets can have an impact on government decisions regarding deficit financing, public expenditure and tax policy, which can lead to cuts in government expenditure in the face of an economic downturn or crisis that adversely affects government revenues, in particular in smaller, open economies. In such cases, instead of countercyclical fiscal policies, in which countries attempt to use public expenditure to buoy their economy and provide a safety net in bad times, countries may adopt procyclical macroeconomic policies to reassure financial markets, thereby potentially making the effects of the downturn worse.³⁴⁶ The austerity policies adopted by some countries in the wake of the 2008 global financial crisis are clear examples of procyclical policies that have led to cuts in social policies and public services.

D. Strategies for mobilizing and allocating resources to reduce income poverty and time poverty among women

244. Adequately resourcing policies to reduce income poverty and time poverty among women requires combining a strategy to increase and monitor the allocation of public expenditure to ensure alignment with those objectives and strategies to increase public resources overall. In most developing countries, there is significant scope for mobilizing public resources to increase social spending (see box XVI).³⁴⁷ Such gains can be achieved through a range of strategies, including improving the administration of tax collection, reforming the structure of the tax system, introducing

³⁴³ Dev Kar and others, *Financial Flows and Tax Havens: Combining to Limit the Lives of Billions of People* (Washington, D.C., Global Financial Integrity, 2015).

³⁴⁴ Matthew Salomon, *Illicit Financial Flows to and from 148 Developing Countries: 2006–2015* (Washington, D.C., Global Financial Integrity, 2019).

³⁴⁵ Léonce Ndikumana and James Boyce, *Africa's Odious Debts: How Foreign Loans and Capital Flight Bled a Continent* (London, Zed Books, 2011).

³⁴⁶ Jose Antonio Ocampo, "Rethinking global economic and social governance", *Journal of Globalization and Development*, vol. 1, No. 1 (1 January 2010).

³⁴⁷ Sanjeev Gupta and Shansuddin Tareq, "Mobilizing revenue", *Finance and Development*, vol. 45, No. 3 (Washington, D.C., IMF, 2008); and IMF, *Fiscal Monitor: Taxing Times* (Washington, D.C., 2013).

new taxes to diversify the tax base, improving revenue mobilization from natural resources and changing the way debt is managed.

Box XVI

Mobilizing resources to increase social spending in Latin America and the Caribbean

Many countries in Latin America and the Caribbean have shown that it is possible to mobilize resources to expand social spending. An analysis of data from 17 Latin American countries indicates that social spending by central Governments rose from an average of 8.5 per cent of GDP in 2000 to 11.2 per cent of GDP in 2016, a substantial increase over a period that included the global financial crisis.^a Since those figures do not include subnational levels of government, it is reasonable to assume that total social spending is higher on average. The amount of additional spending, 2.7 per cent of GDP, is nearly double the social spending per person on average for those countries, adjusted for inflation.^b Those higher levels of financing for social policies include greater expenditure on investment in education, health and social protection.

^a *Social Panorama of Latin America* (United Nations publication, Sales No. E.18.II.G.7).

^b *Ibid.*

1. Gender-responsive budgeting

245. To close the gap in funding, it is critical to reallocate resources to gender-responsive policies in areas such as social protection, public services and infrastructure. In some cases, such as with debt servicing costs, there may be limited or no discretion for reallocating expenditure. However, gender-responsive budgeting is widely used to guide the formulation of fiscal and budgetary policies aimed at enhancing gender equality. Gender-responsive budgeting involves an analysis of the gender-specific impacts of the allocation of public spending, taxation and the delivery of public services using data, disaggregated by sex, on the beneficiaries of various categories of spending or service provision and on the incidence of taxation. Although analysing the gender-specific impacts of social spending is important for reducing income poverty and time poverty, consideration of public investments in economic sectors such as infrastructure is equally important.

246. Preliminary data for 2018 from the Global Partnership for Effective Development Cooperation, based on data from a monitoring exercise covering 69 countries, indicate that 78 per cent of countries have fully met or are approaching the fulfilment of the requirement to have a system for gender-responsive budgeting in place.³⁴⁸ However, gaps remain to be filled in the comprehensiveness and transparency of those systems. Among the countries monitored, 90 per cent had policies and programmes in place to address gender gaps, but only 43 per cent reported allocating adequate resources to implement them. In particular, many countries, even those that had tracking systems in place, lacked measures to assess the outcome and impact, including ex ante and ex post assessments and gender budget audits.³⁴⁹ To monitor how macroeconomic policies are advancing gender equality, it is critical to analyse the gender impacts of fiscal policy not only at the level of sector allocations, but also at the aggregate level, including total spending, total revenues and deficit financing.

³⁴⁸ *Financing for Sustainable Development Report 2019*, p. 39.

³⁴⁹ *Ibid.*

247. The Government of Nepal has made significant strides in introducing gender-responsive budgeting, in part by introducing a gender perspective into its national development policy framework for the 2007/08 fiscal year.³⁵⁰ As a result of that process, it established a gender-responsive budget committee and has conducted gender assessments and gender audits of line ministries, which have resulted in a significant rise in gender-responsive budget allocations: from 11 per cent in 2007 to nearly 22 per cent in 2014. The Government has also committed itself to conducting a comprehensive evaluation to assess the impact of the allocations on the lived realities of women.³⁵¹

2. Improving the efficiency of tax systems to boost revenue

248. Applying the principles of good governance to tax systems has been shown to increase the resources that Governments have at their disposal.³⁵² Governments can increase their tax revenue by collecting taxes more efficiently, which they may do by addressing institutional constraints even without changing tax rates or introducing new taxes. Such efficiency gains are particularly important in low-income countries where problems with tax administration can be severe. A more efficient tax system reduces the time and effort it takes to apply tax laws and allows countries to adopt more diverse forms of taxation.³⁵³ Many countries in sub-Saharan Africa have generated additional public revenue by improving the way in which they collect taxes.³⁵⁴ They have reformed their systems in various ways, including by organizing tax collection on a functional rather than geographical basis, through such measures as business taxes, income taxes, and value added tax, by creating independent collection agencies, by issuing certificates of good tax compliance to businesses that pay their fair share and by introducing services to assist taxpayers.³⁵⁵ Information technology has enormous potential to improve the efficiency of tax systems and boost revenue collection further.

3. Mobilizing tax revenues to fund policy implementation

249. In addition to improving the efficiency of tax collection, management and administration, countries can take a number of steps to mobilize tax revenue and allocate them to the implementation of policies that reduce income poverty and time poverty among women. In a study on increases in public resource mobilization in low-income and middle-income countries over the period 2000–2015, researchers found that a number of other factors contributed to significant and sustainable

³⁵⁰ UN-Women, *Progress of the World's Women 2015–2016*.

³⁵¹ Ibid.

³⁵² Amadou N. R. Sy and Mariama Sow, “Domestic resource mobilization and external financing: when does governance matter? – Evidence from sub-Saharan Africa”, Africa Growth Initiative Working Paper, No. 19 (Washington, D.C., Brookings Institution, December 2016); and Tuan Minh Le, Blanca Moreno-Dodson and Jeep Rojchaichaninthorn, “Expanding taxable capacity and reaching revenue potential: cross-country analysis”, in *101st Annual Conference Proceedings* (Philadelphia, Pennsylvania, National Tax Association, 2008), p. 384.

³⁵³ James Heintz, “How macroeconomic policy can support economic development in sub-Saharan African countries”, in *The Industrial Policy Revolution II: Africa in the Twenty-First Century*, Joseph E. Stiglitz, Justin Lin Yifu and Ebrahim Patel, eds. (London, Palgrave Macmillan, 2013).

³⁵⁴ Jonathan Di John, “Taxation, governance, and resource mobilisation in sub-Saharan Africa: a survey of key issues”, Working Paper No. 49/2009 (Madrid, Elcano Royal Institute, September 2009).

³⁵⁵ African Development Bank Group, Organization for Economic Cooperation and Development, Economic Commission for Africa, *African Economic Outlook 2010* (Tunis, Paris, Addis Ababa), p. 12.

increases in tax revenues as a share of GDP,³⁵⁶ including the following: adjusting the rates of existing taxes; reducing or rationalizing tax exemptions; broadening the tax base by introducing new excise taxes on targeted goods such as certain fuels, tobacco, cars and alcohol; and taxing certain domestic rents, such as those generated by tourism or telecommunications. Countries that succeeded in mobilizing additional revenue had typically used a variety of tax instruments. In some cases, simplifying the tax system by reducing the number of taxes while broadening the tax base had helped to improve collection.

250. Bangladesh was able to double its revenue mobilization as a share of GDP by implementing reforms. From 1990 to 2014, the country's tax-to-GDP ratio rose from less than 5 per cent to over 10 per cent, with much of the improvement having occurred since 2007.³⁵⁷ The reforms that supported greater tax mobilization included the implementation of a tax modernization plan, the introduction of administrative units that targeted larger taxpayers with the help of information technology to increase corporate tax collection, better revenue mobilization through income tax and the implementation of a revenue authority modernization plan, under which the digital National Board of Revenue was created, allowing for the processing of electronic payments.³⁵⁸

251. Rwanda is another developing country that has improved its domestic resource mobilization and raised its tax-to-GDP ratio in recent years, increasing it from less than 12 per cent of GDP in 2007 to 14.5 per cent in 2013.³⁵⁹ The reforms implemented in Rwanda included the following: an overhaul of the income tax to simplify its structure and eliminate many exemptions; the introduction of a turnover tax, rather than a profit tax, for micro-, small and medium-sized enterprises to reduce their bookkeeping burden and improve collection; the introduction of new targeted excise taxes on certain goods, such as soft drinks, vehicles and telecommunications; the introduction of electronic billing machines to improve the collection of value added tax; and investments in the administrative capacity of the Rwanda Revenue Authority.³⁶⁰

252. Countries endowed with marketable natural resources can mobilize revenue by collecting royalties on their extraction and use. Countries have used such revenues to finance their social protection systems, for example health-care programmes, income support for vulnerable populations and old-age pensions.³⁶¹ However, the availability of revenues tied to natural resource rents can limit the efforts countries make to mobilize resources from other sources, such as traditional taxes.³⁶² It is important that the revenues mobilized through natural resources rents do not replace the development of progressive and efficient tax systems.

253. Botswana has used public revenue from natural resources to support the public and social investments detailed in the present report. Botswana allocates a portion of

³⁵⁶ Bernardin Akitoby and others, "Tax revenue mobilization episodes in emerging markets and low-income countries: lessons from a new dataset", Working Paper, No. WP/18/234 (Washington, D.C., IMF, 2018).

³⁵⁷ De Paepe, Hart and Long.

³⁵⁸ Ibid.; and Mark Gallagher, *Examples of Successful DRM Reforms and the Role of International Cooperation* (Bonn, Germany, Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH, 2015).

³⁵⁹ Gallagher, *Examples of Successful DRM Reforms and the Role of International Cooperation*.

³⁶⁰ Ibid.

³⁶¹ Fabio Durán-Valverde and José Francisco Pacheco, *Fiscal Space and the Extension of Social Protection: Lesson Learnt from Developing Countries – Bolivia, Botswana, Brazil, Costa Rica, Lesotho, Namibia, Thailand and South Africa, Extension of Social Security Paper*, No. 33 (Geneva, ILO, 2012).

³⁶² Akitoby and others, "Tax revenue mobilization episodes".

those revenues, which it obtains mostly from the extraction of diamonds and other minerals, to investments in public infrastructure, education and health, areas of spending that will generate future returns in the form of greater productivity.³⁶³ While channelling funds to areas of spending that support higher productivity, Botswana is also mobilizing domestic resources to fund investments with high social returns, thereby helping to secure well-being in the years to come, including in reductions in the rates of income poverty and time poverty among women.

4. Borrowing to fund social spending and debt restructuring

254. Borrowing is another way to finance social spending, raise productivity and encourage greater private investment, leading to higher rates of growth. Faster growth generates additional economic resources that can support higher tax revenues and allow Governments to pay back debt. For example, debt-financed fiscal expansion is more likely to be sustainable when the additional spending is concentrated in productivity-enhancing areas such as education.³⁶⁴ However, when debt burdens are heavy, the costs of servicing them constrain other areas of spending and thereby limit the resources available to finance social investments. In such cases, reducing debt burdens or restructuring the national debt can free up financial resources. Thailand reduced its debt servicing costs in part by reducing its reliance on external debt. Of the resources freed, one third was used to fund social programmes.³⁶⁵

255. Another step that countries can take is to protect their fiscal space and avoid procyclical spending cuts to social investments during economic downturns. The global crisis of financial markets in 2008 triggered a sovereign debt crisis in several European countries. Government revenues plummeted and debt servicing costs rose. In 2010, the European Union and the International Monetary Fund organized financial assistance programmes for Greece, Ireland and Portugal, accompanied by austerity programmes involving sizeable cuts in government expenditure. However, in 2015, Portugal began to reverse several of the austerity measures, including pension and salary cuts, and halted the privatization of public water and transport companies.³⁶⁶ Those measures to reclaim fiscal space did not derail the country's recovery and did not contribute further to an unsustainable debt. Instead, there was an economic upturn. The case of Portugal shows that protecting a country's fiscal space can be a viable alternative to austerity measures as a way of confronting an economic crisis.

5. International cooperation

256. International cooperation in the form of official development assistance also has a role to play in financing policies to reduce income poverty and time poverty among women. Low-income countries have far fewer public resources at their disposal than high-income countries. In 2016, per capita tax revenues in Mozambique amounted to US\$ 270 (adjusted for purchasing power parity), compared with US\$ 10,920 for the United Kingdom. The low levels of public resources in Mozambique were not due to a lack of tax effort but to very low incomes. In 2016, Mozambique was mobilizing

³⁶³ Michael Lewin, "Botswana's success: good governance, good policies, and good luck" in *Yes Africa Can, Success Stories from a Dynamic Continent*, Punam Chuhan-Pole and Manka Angwafo (Washington, D.C., World Bank, 2011).

³⁶⁴ Rathin Roy, Antoine Heuty and Emmanuel Letouzé, "Fiscal space for what? Analytical issues from a human development perspective", paper prepared for the G-20 workshop on fiscal policy held in Istanbul, Turkey, June 2007.

³⁶⁵ Durán-Valverde and Pacheco, *Fiscal Space and the Extension of Social Protection*.

³⁶⁶ Paul Hockenno, "Portugal has emerged as Europe's booming anti-Germany", *Foreign Policy*, 18 December 2017.

22 per cent of its GDP as tax revenue.³⁶⁷ Even with heroic efforts to further increase the tax-to-GDP ratio, a huge resource gap will remain between Mozambique and the United Kingdom. In the face of such global inequalities, official development assistance is necessary to mitigate the resource gap.

257. Despite recent increases in official development assistance to the least developed countries, many high-income countries have not met their commitments in that regard, and much of the increase resulted from a rise in humanitarian assistance to a limited number of countries.³⁶⁸ Recently, the overall share of official development assistance used for social spending has declined, while spending on economic services has expanded.³⁶⁹ Although there have been increases in recent years, in 2016 and 2017, official development assistance for dedicated programmes that principally or mainly targeted gender equality and the empowerment of women remained low, at 4 per cent, whereas 62 per cent of aid did not target gender equality at all. Aid targeted at gender equality is generally concentrated in the social sectors of education and health, with very low levels of aid targeted at the infrastructure and economic sectors; in 2016 and 2017, it accounted for only 1 per cent of total aid.³⁷⁰

258. Although North-South cooperation continues to be a primary source of official development assistance, in particular for the least developed countries and for landlocked countries, South-South development cooperation is on the rise. As financing for development continues to evolve, increasing official development assistance and financing from other sources for policies that reduce income poverty and time poverty among women is critical. Donors may directly support investments that countries make to build institutional capacity to help to ensure long-term fiscal sustainability by, among other things, assisting with improving the efficiency of their revenue collection; diversifying their tax base and enhancing their revenue mobilization from untapped areas and building the information infrastructure necessary to improve tax collection and verification.

259. International cooperation has a critical role to play. Illicit financial flows, international corporate tax avoidance and offshore tax havens drain the limited resources that countries have at their disposal to invest in their economies. Coordination between international actors can facilitate those illicit flows and strategies to evade taxation. Therefore, international cooperation is needed to stop illicit flows, shut down tax havens and support the efforts countries undertake to enlarge their fiscal space.

VI. Conclusions and recommendations

260. **The present *World Survey on the Role of Women in Development* has contained an examination of the important links between gender equality, income poverty and time poverty. The responsibility for unpaid care and domestic work, which falls disproportionately on the shoulders of women and girls, sustains people and households on a day-to-day basis and across generations. Unpaid care work is the foundation upon which all other economic activities rest. Rooted in discriminatory social norms and gender stereotypes, women's bearing the disproportionate responsibility for unpaid care and domestic work has significant consequences for both women and their families**

³⁶⁷ Calculations by UN-Women based on data from the World Bank, World Development Indicators database, available at <http://datatopics.worldbank.org/world-development-indicators/>.

³⁶⁸ *Financing for Sustainable Development Report 2019*.

³⁶⁹ Ibid.

³⁷⁰ OECD, "Aid in support of gender equality and women's empowerment" (accessed on 29 May 2019).

and is deeply connected to the high rate of poverty among women. The intersection of income poverty and time poverty among women is starkly evident in the fact that women are at greatest risk of poverty when they are at the stage in their life course during which they form a family and raise children. At that stage, families face the increased expenses associated with having children, and the women in the family also have less time available for paid work. Women face a stark choice between forgoing income-generating opportunities or accepting insecure forms of employment, while struggling to manage their heavy and intense burdens of unpaid care and domestic work responsibilities.

261. Poor women in particular face significant hurdles in reconciling the need to engage in income-generating work to lift their families out of poverty with their expansive responsibilities for the provision of unpaid care and domestic work, often undertaken in harsh physical and environmental conditions and with limited access to public services and basic infrastructure. In such circumstances, women find themselves trapped in a vicious cycle of poverty, despite their long and arduous hours of paid and unpaid work, with little time for leisure, rest or self-care. The result is women's overwork and depletion, rather than their empowerment. The double bind of carrying out income-generating work in addition to long hours provisioning their households with water and fuel, cooking meals, cleaning house and caring for young children and other dependants may also result in some of the unpaid work being delegated to others, especially daughters, thus increasing the poverty risk for future generations.

262. An integrated public policy approach is needed to reverse the depletion experienced by women owing to income and time poverty. As reflected in the 2030 Agenda, doing so involves putting unpaid care and domestic work at the heart of action to achieve the targets of the Sustainable Development Goals on poverty, social protection, public services, infrastructure and decent work within an enabling macroeconomic policy framework. Universal social protection systems, including paid maternity leave and child and family transfers, can effectively reduce poverty among women by providing income security throughout the life course. Women who live in poverty also need labour market interventions that help them to build sustainable livelihoods and assets to support themselves and their families in the longer term. However, to effectively address income and time poverty among women, social protection systems and labour market interventions must take into account women's disproportionate burden of unpaid care and domestic responsibilities. Social protection systems and labour market interventions must be supported by accessible, affordable and high-quality public services and basic infrastructure in order to ensure that maximum benefits are provided in terms of income security and a reduction in the amount of time spent on unpaid care and domestic work.

263. Public services and basic infrastructure play a critical role in breaking the cycle of income and time poverty by reducing drudgery and increasing the productivity of women's paid and unpaid work. Investments in sustainable infrastructure, such as clean energy, on-site water and sanitation and public transport, also contribute to environmental sustainability. Across developing countries, women and girls who are income-poor and live in rural areas are disproportionately excluded from access to time-saving infrastructure and high-quality public services such as health care and education. Furthermore, under public service and infrastructure policies, the specific barriers to access that women face are often neglected and the disproportionate time they spend in unpaid care and domestic work is not addressed. As outlined in the 2030 Agenda, all Governments are responsible for ensuring that public services and basic

infrastructure are of adequate quality, accessible and affordable to all and that providers are accountable to the communities that they serve.

264. An integrated policy approach to addressing income and time poverty among women is contingent on the mobilization of adequate resources. That, in turn, requires that spending on social protection and public services be recognized as an investment, rather than as consumption, and analogous to investment in physical infrastructure, because, by strengthening human capabilities across generations, such spending generates significant productivity gains in the medium to long term. Investments in social infrastructure and care services not only reduce the drudgery and increase the productivity of the unpaid work done by women and thereby increase the “supply” of women in the labour force, they can also stimulate demand for their labour by creating new jobs in the care sector and in infrastructure services such as energy and transport. In addition to reducing time poverty among women, investments in sustainable infrastructure such as clean energy and transport are also critical for environmental sustainability.

265. The many positive externalities of social protection systems, public services and infrastructure – on human capabilities, economic productivity and environmental sustainability – make them ideal candidates for public sector investment rather than private sector profitability. There are many options for increasing the mobilization of domestic resources, including through improving the efficiency of tax collection and borrowing to finance social investments.

266. To that end, Member States, international organizations including the United Nations, and human rights mechanisms, the private sector, non-governmental organizations, trade unions and other stakeholders may wish to take the following actions:

A. Prioritizing gender equality and unpaid care and domestic work in the design of poverty eradication and sustainable development strategies

(a) Ensure that gender equality and the recognition, reduction and redistribution of unpaid care and domestic work are embedded in national sustainable development plans and in social protection and poverty eradication strategies, with attention paid to time poverty as a dimension of deprivation;

(b) Systematically prioritize and integrate a gender perspective, including with regard to the recognition, reduction and redistribution of unpaid care and domestic work, into social, economic and environmental policies aimed at achieving the Sustainable Development Goals;

(c) Strengthen coordination across sectors, levels of government, civil society and the private sector to ensure an integrated approach in which social protection systems, public services and basic infrastructure work synergistically to reduce income poverty and time poverty among women;

(d) Prioritize the production and use of high-quality gender statistics, including through the multidimensional disaggregation of existing data on income poverty by sex and age and by other characteristics such as race, ethnicity, migratory status, disability and geographical location, and making those statistics widely available;

(e) Ensure the regular and timely collection of time-use data by fully integrating time-use surveys into national statistical systems and support the use

of such data in evidence-based policymaking and decision-making by ensuring the harmonization of data collection and survey methods and the comparability of data across countries;

(f) Invest in the development of scalable methodologies to adequately capture the complexity of multidimensional poverty among women, with attention paid to inequalities within the household and factors such as control over household resources, decision-making power and time use;

B. Enhancing the income security of women throughout the life course, in particular in the phase around childbirth and child-rearing

(g) Invest in social protection systems, public services and sustainable infrastructure that support the productivity and economic viability of the work done by women and that protect women, especially those working in the informal economy, in rural and urban areas, while supporting their access to decent work;

(h) Ensure universal and gender-responsive social protection systems in order to provide income security throughout the life course, in line with the Social Protection Floors Recommendation, 2012 (No. 202) of ILO;

(i) Guarantee access to maternity protection in accordance with the Maternity Protection Convention, 2000 (No. 183) of ILO for all workers, in particular women in informal employment, through universal maternity benefits and promote the equal sharing of responsibilities by expanding parental leave that incentivizes the participation of fathers in child-rearing;

(j) Ensure universal access to adequate child and family transfers, avoid narrow means-tested targeting and opt for the broad coverage of benefits to prevent exclusion errors and the stigmatization of marginalized groups of women and ensure the accessibility of benefits, especially in terms of the time needed to comply with administrative procedures;

(k) Assess and review the conditionalities attached to child and family benefits to avoid reinforcing gender stereotypes and exacerbating the burden of unpaid work done by women and consider reallocating the resources that are needed to administer the conditionalities to instead improve existing public services;

(l) Enable the participation of women in public works programmes, including by providing high-quality childcare services, reviewing the start and finish times of the working hours, providing accessible transport and reviewing any work conditionalities imposed on women who are pregnant or nursing;

(m) Ensure that strategies to build access to, control over and ownership of assets and productive resources among women take into account their existing unpaid responsibilities and are integrated with social protection systems, including the provision of public services that reduce and redistribute their unpaid care and domestic work;

(n) Remove financial barriers that constrain access for women and girls to public services such as education, health care and childcare, waive or subsidize connection fees to water, sewerage and electricity grids and introduce socially inclusive tariff structures;

C. Reducing time poverty among women and the drudgery of unpaid care and domestic work

(o) Progressively guarantee universal access to time-saving infrastructure and public health-care and childcare services and ensure their affordability, adequacy, acceptability and quality for all women and girls;

(p) Ensure that small-scale approaches, such as rainwater harvesting and off-grid energy systems, aimed at extending the reach of basic infrastructure to rural, remote and dispersed areas take account of the multiple roles that women perform and are aimed at reducing the burden of their unpaid work and creating opportunities for their empowerment and participation in the implementation and maintenance of such systems;

(q) Systematically conduct assessments of gender-specific time-use and mobility patterns and use the findings to inform the design and implementation of social protection systems, public services and basic infrastructure;

(r) Review and adjust the schedules and locations of public services, including health-care and childcare centres and public transport routes, to accommodate women's multiple roles, including as workers and caregivers;

(s) Introduce measures to bring public services closer to women, especially those in rural and remote areas or marginalized urban communities, through community outreach, mobile services and technology, with attention paid to quality and accessibility;

(t) Address staff shortages to reduce waiting times for public services, improve the employment standards of childcare and health-care workers and strengthen the recognition and protection community health and childcare workers receive, in order to ensure quality and sustainability;

(u) Systematically monitor the impact of social protection systems, public services and basic infrastructure with regard to gender patterns in time use;

D. Strengthening financing, participation, monitoring and accountability

(v) Ensure the participation of women in the design, delivery, monitoring and evaluation of social protection systems, public services and basic infrastructure, with a view to enhancing effectiveness, efficiency and responsiveness to their rights and needs, including through participatory assessments and gender audit tools that incorporate feedback from women and ensure that their priorities are taken into account;

(w) Strengthen mechanisms for the regulation and accountability of private providers of public services and infrastructure to ensure quality, accessibility and affordability;

(x) Review the costs and benefits of private sector participation in social protection systems, public service delivery and infrastructure development;

(y) Assess the risks and benefits of using new technologies to provide social protection services, public services and infrastructure to ensure that, in their introduction, no one is left behind, the needs of women are addressed and standards of quality, accessibility and privacy are maintained;

(z) **Implement gender-responsive budgeting and strengthen monitoring and accountability mechanisms to ensure that budgets support gender equality priorities and do not further exacerbate inequality or vulnerability;**

(aa) **Increase investment in universal and gender-responsive social protection systems and in high-quality public services and infrastructure through the mobilization of domestic resources, including by increasing the efficiency of tax systems, employing gender-responsive budgeting, curbing tax evasion and illicit financial flows, equitably expanding the tax base and channelling revenues from natural resources to social spending;**

(bb) **Strengthen international cooperation, meet official development assistance commitments and ensure that investments in social protection, public services and sustainable infrastructure made with official development assistance is directed towards the achievement of gender equality and the empowerment of all women and girls.**
