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> Statement submitted by International Planned Parenthood Federation, a non-governmental organization in consultative status with the Economic and Social Council*

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

^{*} The present statement is issued without formal editing.





Statement

A) About International Planned Parenthood Federation

As a leading advocate of sexual and reproductive health and rights and a global service provider, the International Planned Parenthood Federation works through 152 Member Associations and Collaborating Partners in 172 countries to empower the most vulnerable women, men and young people to access life-saving services and programmes, and to live with dignity. We have had general consultative status with the Economic and Social Council since 1973 (E/2010/INF/4).

B) Introduction

Women's economic rights, especially in relation to work and income, advance economies, sustainable development and improve livelihoods. However, women still remain more affected by poverty, unpaid care burdens and insecure work than men. The realization of sexual and reproductive health and rights plays a crucial role in empowering women economically.

C) Women's care burden

We cannot understand the relationship between sexual and reproductive health and rights and women's economic empowerment without first understanding the impact and contribution of women's care work to the economy. Care work describes the unpaid reproductive labour that is disproportionately undertaken by women and which includes, but is not limited to, child care, elder care, taking care of ill family members, cooking and cleaning. It is directly linked to sexual and reproductive health and rights on several levels. At the policy level, care work is one of the primary areas where the impacts of gender inequality can be observed in both the private sphere (family) and public sphere (work, education and other services).

The level of care work affects women's access to sexual and reproductive health services, both in terms of time burdens as well as practical barriers that directly limit their access to critical services. The reverse is true as well: without access to essential sexual and reproductive health services such as family planning, women cannot choose if and when and how many children to have. This can, in turn, increase their care burden and exacerbate already existing inequalities in women's share of care-giving, as well as the health and economic consequences that result from unplanned and/or frequent pregnancies, such as unsafe abortions, pregnancy complications, and increased rates of maternal and infant mortality.

The care economy is directly tied to both the formal and informal economies. Gender inequality in care-giving responsibilities impacts on women's ability to enter the formal economy and their conditions of work in the informal economy. For example, a woman may be unable to commit to a formal job at regular times every day because she is required to be at home to look after others and perform household tasks. This may lead her to take up work in the informal sector which offers more flexibility (for example, in working hours, location and so on), but more insecure and precarious working conditions.

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D) Women's participation in the formal economy

Much policy attention in recent years has been given to gender equality as 'smart economics'. The idea follows that by empowering women economically, societies and the economy benefit too. In line with this thinking, growing policy attention is being given to the extent to which fertility decline can be considered an influence on women's labour force participation or gainful employment.

However, understanding the causal pathways remains decidedly unclear. For example, while there has been a rising female labour force participation across many countries that has coincided with or followed fertility decline and uptake of contraceptive use, the causal relationships are unclear. Recent studies have begun to build a strong evidence base indicating the positive influence of lower fertility in women's labour supply and employment, and how this trend can contribute positively to women's lives. For example, studies have shown that, globally, female labour force participation decreases with each additional child by about 10 to 15 percentage points among women aged 25 to 39.

Despite this, however, the extent to which women's increased entry into the labour force may be empowering, or even, arguably, improve their well-being, depends on the context, the reasons for women's economic participation, the existence of regulatory frameworks to support women's economic participation, and the type and conditions of the work. Given the role of care work in women's lives, it is unsurprising that more recent studies find that women's empowerment in formal wage employment is tied to the presence (or lack) of regulatory frameworks: that is, the laws and policies that work to either encourage or discourage women from participating in the formal economy.

E) Addressing gender inequality in regulatory frameworks

The most frequently cited policies that influence women's participation in the work force are parental leave, child care and access to contraceptives, and other policies that are often described as 'family friendly' or 'equal opportunity' and that ease the care burden that many women face. Lack of these policies, together with a lack of policies which seek to distribute care work evenly (both between women and men and between the state and private households) are cited as reasons that women in many regions remain in the informal or agricultural sectors, and are therefore more vulnerable to poverty, ill health and precariousness.

Provisions for maternity leave and child care are primary elements of any policy attempt to draw women into the formal economy in a substantial and empowering way. For example, in Guatemala City, the introduction of community day care increased the income of mothers by 30 per cent and made them more likely to be employed in the formal sector. Importantly, the greatest beneficiaries of this programme were women and older women with lower levels of education. In rural Colombia, community day care had positive impacts on women's labour participation, as well as benefits for children's well-being, while a pre-school programme in Argentina increased women's employment by 7-14 per cent.

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F) Women's participation in the informal economy

Work in the informal economy tends to be more insecure and offers fewer benefits than work in the formal wage economy, with specific effects on sexual and reproductive health and rights. Women work in the informal economy for many reasons, including the growth in women's formal wage work, which has resulted in a need for paid care work; flexibility that allows for their own care work; immigration status; and sexual and gender discrimination in the formal economy. A large proportion of the research that has been conducted on women's work in the informal sector has been on domestic work and, in particular, focuses on trafficking and exploitation of children in domestic work. Girls outnumber boys whether performing domestic labour at home or as the victims of trafficking outside the home. More recently, a lot of work in relation to girls has explored domestic work and care work, primarily focused on the fact that girls are denied opportunities because of gender norms that require them to share care work burdens with women. This research emphasizes the fact that child labour law does not take (unpaid) domestic labour into consideration, to the detriment of girls' education and overall well-being.

Migrant and immigrant women are often forced into the informal sector as a result of their immigration status, where the lack of regulations makes them more vulnerable to lower wages and workplace discrimination, including sexual assault, as well as less likely to be able to access health care, let alone maternity leave or child care. These shortcomings have resulted in discrepancies between the health outcomes of immigrant and non-immigrant women.

In addition to the more severe examples of sexual and reproductive health and rights abuses of women working in the informal sector, sexuality affects women's political and economic empowerment in a number of important ways, including by being exposed to sexual harassment and sexual violence, and not being able to exercise choice in sexual relationships which can ultimately undermine political, social and economic empowerment. Where women are the most likely to be exposed to sexual harassment and sexual violence — the informal sector — they are then also most likely to have their political, social and economic empowerment undermined.

G) Recommendations

- 1. Support an enabling environment so that sexual and reproductive health and rights and gender equality become a reality.
- a. Governments must prioritize the inclusion of sexual and reproductive health and rights within global agendas such as the 2030 Agenda on Sustainable Development. Governments should include sexual and reproductive health and rights in national plans to ensure political prioritization and continued investment in sexual and reproductive health and rights.
- b. Governments must prioritize sexual and reproductive health and rights within the context of both health and gender equality. At the national level, this requires commitment and investment from the ministry of health and the ministry of

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gender/women, as sexual and reproductive health and rights span the range of women's human rights.

- c. Governments, United Nations agencies, multi-lateral institutions and civil society must prioritize sexual and reproductive health and rights in order to tackle harmful gender norms. They should establish policies and deliver programmes which support not only the health of women and girls, but also their socio economic development more broadly. There must be a strong focus on girls and the prevention of sexual and gender-based violence, including harmful traditional practices that compromise their health and limit development in other areas of their lives.
- d. Governments must include sexual and reproductive health and rights in regulatory frameworks that support women's access to decent work. Such frameworks should be expanded across the formal and informal economy.
- e. Governments should ensure that domestic laws support the sexual and reproductive health and rights of women and girls and meet international obligations under human rights treaties such as the Convention on the Elimination of All Forms of Discrimination against Women. At national level, governments must enforce legislation that eliminates discrimination against women and girls. This should include laws that protect women and girls from violence, including early and forced marriage and female genital mutilation, as well as laws that proactively promote the equal participation in political and public life of all women, regardless of their background.
- 2. Continue and increase financial and political commitment to sexual and reproductive health and rights in order to sustain the success of health interventions and to expand and increase possibilities for gender equality and the empowerment of girls and women.
- a. Donors, multi-lateral institutions and national governments should continue and increase investment in the full range of sexual and reproductive health and rights services, including rights-based family planning. Particular attention should be paid to investing in maternal health and HIV prevention, both of which are leading causes of death among women of reproductive age in low and middle-income countries.
- b. Governments and civil society must ensure that the 2030 Agenda financing mechanisms and strategies that detail what financing will cover such as the Global Financing Facility and the updated global strategy on women's and children's health prioritize the sexual and reproductive health of women and girls. Donors and multi-lateral institutions must engage civil society meaningfully in the creation of these financing structures as well as national financing plans.
- 3. Measure the things that matter.
- a. Governments must prioritize funding or supporting more rigorous research on the impact of sexual and reproductive health and rights interventions in education, and the links with women's economic participation (particularly in agriculture) and representation in political and public life. Establishing these links could have a significant impact on policy and programme interventions related to sexual and reproductive health and rights, gender equality, and the empowerment of women and girls.

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