How can social protection systems, interlinked with the access to public services and sustainable infrastructure, contribute to achieve gender equality and the empowerment of women and girls?
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EXECUTIVE SUMMARY

This study has sought to assess the interlinkages between the three main provisions to be discussed during CSW63, notably social protection, access to public services and sustainable infrastructure, and more in particular how dynamics at these interlinkages may contribute to gender equality and women’s empowerment. It has done so through a literature review of academic research, policy papers, and project reports and evaluations on each of these three provisions, and through the discussion of case studies that take into account, to varying degrees and with varied results, the interlinkages between the three provisions.

With respect to the integration of gender in social protection, the research has pointed to a number of points of attention, such as the importance of including gendered social and economic risks and vulnerabilities, and gendered constraints with respect to social protection systems as they stand. Major constraints relate to eligibility and discriminatory practices in this regard and to the predominance of contributory systems or systems that assume formal employment, while women are overrepresented in informal employment. Nonetheless, an increase in attention for the importance of the informal economy in many low and middle income countries has led to a number of positive initiatives or developments in this regard that should find their way to a more structural integration, such as the provision of social pensions, maternity benefits for women engaged in the informal economy, and universal free health care schemes. ‘Transformative social protection’, which seeks to address and redress social injustices, is the road to follow with respect to women’s empowerment and gender equality.

Despite progress in some regards, women’s access to and use of public services continues to be hampered by gendered inequalities and constraints, for instance with respect to reproductive health care. In the same way, whereas gender disparities have narrowed in the field of education, important inequalities remain, notably with respect to education outcomes. Early marriages and teenage pregnancies play an important role in this. With respect to public transport, violence is a major concern. Much in the same way, women face particular constraints with respect to infrastructure. Again, safety concerns affect women’s movements through and use of public space. Unreliable or no access to water or electricity, or a lack of rural roads negatively affects women as they still take on the vast proportion of unpaid care work, and these constraints increase their time poverty.

Programmes and policies with respect to these three provisions, then, need to take into account the linkages between them, from a gender perspective, so as to contribute to gender equality and women’s empowerment. In so doing, social protection can enable access to public services which can contribute to women’s empowerment, on the condition that public services are accessible (physically (link with a gender-sensitive spatial planning of infrastructure)), financially and with respect to social norms) and provide quality services. Likewise, social protection can contribute to the creation of sustainable infrastructure which can contribute to women’s empowerment, on the condition that a gender-sensitive approach is adopted in designing, implementing and developing the infrastructure. This, in turn, can reduce gendered inequalities in accessing public services.

The case studies that have been discussed have pointed to the importance of including a focus on women’s empowerment on the outset of the programmes in this regard, but the literature review has also suggested that few programmes on social protection in fact do so. Likewise, integrated
approaches that create linkages between social protection, public services and infrastructure contribute to women’s empowerment, but again, the literature review suggests that few programmes actually take into account the linkages between each of the three provisions. Conditional cash transfers for instance may seek to enable access to public services, but at times fail to take into account the spatial remoteness of these services as well as gendered constraints with respect to time or mobility.

A more important and structural emphasis on social protection in relation to public services and sustainable infrastructure is needed, not in the least to contribute to the reduction of the time women spend to unpaid care work, an approach that needs to go hand in hand with gender-transformative measures aimed at redistributing unpaid care work between men and women. The research suggests that while some positive steps are taken, these are largely fragmented, context-bound and partial.

Based on these findings, the following recommendations are formulated:

**At the level of policy:**

- The UN, its agencies and its Member States should ensure that their social protection, public services and infrastructure policies and programmes be designed from a rights-based approach that promotes the equality of women and men, integrating women and girls as actors and rights-holders. This approach requires all actors to take into account the specific needs and situations of both women and men during the design, implementation and evaluation of all policies and programmes. Where needed specific, additional programmes with a focus on the empowerment of women and the promotion of gender equality should be adopted.
- The UN, its agencies and its Member States should ensure that their policies and programmes take into account and develop gender-sensitive linkages between the three provisions so as to ensure an integrated approach and hence the gender-transformative potential of social protection in relation to public services and sustainable infrastructure.
- The UN, its agencies and its Member States should engage in and support advocacy efforts of civil society toward national governments with respect to the implementation of recognized rights and national policies that would allow to reduce unpaid care work, such as the provision of water or the development of early childhood development centers.
- The UN, its agencies and its Member States should invest in the implementation of and evaluation of outcomes of gender-sensitive approaches in policies and programmes to social protection in relation to public services and sustainable infrastructure with respect to women’s empowerment, which will allow to identify missing links that will need to addressed. Investments in evaluation should include processes of exchange and learning across the involved actors and institutions.
- The UN, its agencies and its Member States should work towards the removal of gendered inequalities from social protection, public services and infrastructure.
- The UN, its agencies and its Member States should promote policies on spatial planning of infrastructures and services that adopt a gender-sensitive approach and as such take into account time and mobility constraints, which would allow to overcome gendered inequalities in accessing services or making use of infrastructure, and reduce unpaid care work.
- Ensure secured budgets for each of the three focus areas, irrespective of political changes, and ensure a gender-sensitive use of these budgets.
- Ensure adequate coordination between relevant institutions and gender machineries necessary to design gender-sensitive policies based on the potential of the synergies between the three provisions. This calls for a political commitment and strategic coordination at national and local levels.
The UN and Member States should enforce the obligation of corporations to pay their fair share of taxes. This should enable States to ensure the quality of social protection, public services and sustainable infrastructure.

Extend the legal entitlement to social protection and invest in policies and programmes that ensure an adequate coverage of informal workers, such as social pensions, the provision of maternity benefits to women that do not have access to formal social security, and universal free health schemes.

Ensure gender-mainstreaming in the human infrastructure of institutions (e.g. via quota, capacity development with respect to gender)

With respect to unpaid care work:

- Measure the economic contribution of unpaid care work (e.g. including time use sections in national surveys) so as to recognize unpaid care work
- Promote a better distribution of household tasks and care work between women and men, boys and girls.
- Invest in sustainable infrastructure that reduces unpaid care work (e.g. access to water, to electricity)
- Invest in policies that recognize unpaid care work, such as the provision of social pensions, that allow to tackle gendered inequalities in this regard
- Invest in policies and interventions that redistribute care work between families and the state, such as by providing early childhood development centres and providing paid care for the sick and elderly

With respect to interventions:

- Prioritise interventions that envisage a multiplier effect, based on gender-sensitive synergies between the three provisions, notably integrated approaches that focus on women’s empowerment in design, implementation and evaluation.
- An essential prerequisite for any intervention with respect to social protection, public services and sustainable infrastructure is an ex-ante in-depth study of the social and economic context it will take place in, and in particular of a gender analysis of needs and interests of different stakeholders.
- Interventions need to include a reflection and approach on how they can work in a gender-transformative manner in different spheres (social level, economic level, political level) from the outset when working in the fields of social protection, public services and sustainable infrastructure.
- Building on the first four recommendations and the cases brought forward in this study a number of more specific recommendations can be made with respect to programmes that are built on the linkages between social protection in relation to public services and sustainable infrastructure:
  - Conditional cash transfers have the potential to contribute to women’s empowerment, for instance via enabling access to education and health services. The creation of linkages in this regard are therefore a valuable approach to develop. At the same time, it is essential to focus on women’s empowerment from the outset. This should avoid according an instrumental role to women in the programme by focusing on their role as carers or exacerbating time burdens for either women or their daughters. A focus on women’s empowerment necessarily includes gender-transformative measures that actively engage men, for instance via measures that seek to redistribute unpaid care work. At the same time, these interventions should take into account and address supply-side constraints.
Public work programmes should be designed from a gender-sensitive approach. This includes active consultation and participation of women on the outset, their active implication during the implementation while taking into account specific needs and interest, which requires taking into account unpaid care work and might require the provision of alternative provisions for pregnant or older women, participation of women in the governance of programmes, and prioritising public work programmes aimed at developing sustainable infrastructure that reduces gendered vulnerabilities, most notably the time burden.

Single window approaches facilitate access to and use of social protection programmes and services, and is particularly relevant when taking into account gendered vulnerabilities such as mobility constraints, lack of access to information, and opportunity costs, which is particularly relevant when taking into account the high representation of women in informal economy.

- Ensure participatory and inclusive consultation, planning and design processes to include the practical and strategic needs and interests of all stakeholders
- Monitoring and evaluation: include gender-sensitive indicators such as impacts on girls’ health and education, on women’s decision-making power at the level of the household, community and society, on women’s mobility, or on women’s income, and include time use data in qualitative and quantitative monitoring and evaluation so as to assess impacts on paid and unpaid care work.
1 INTRODUCTION

1.1 Background and rationale of the research

The 63th session of the Commission on the Status of Women will address “Social protection, access to public services and sustainable infrastructure for gender equality and the empowerment of women and girls”. In doing so, it touches on key aspects of the 2030 Agenda for Sustainable Development that seeks to ‘leave no one behind’, such as ending poverty, universal health coverage, the recognition of the value of unpaid care and domestic work, and wage inequalities between men and women.

The goal of this study is to assess the interlinkages between the three main provisions to be discussed during CSW63, notably social protection, access to public services and sustainable infrastructure, and more in particular how dynamics at these interlinkages may contribute to gender equality and women’s empowerment.

1.2 Methodology

The study builds on an elaborate literature review of academic research, policy papers, and project reports and evaluations in order to assess barriers, challenges and opportunities for women in each of these areas. Likewise, it presents different case studies that allow to shed a light on the potential, or conversely of the shortcomings, of (not) considering the interlinkages between the three provisions in policy, programme and project development, of (not) adopting a gender-sensitive perspective in this regard, and on the potential impact of these provisions and their interlinkages with respect to gender equality and women and girls’ empowerment.

1.3 Limitations

The main limitation of this research is the fact that it relies on secondary sources when assessing project and programme impacts on women’s empowerment. These sources rarely contain all the information that would be required to make an exhaustive assessment of interventions with respect to three sectors concerned and in relation to women’s empowerment and gender equality.

1.4 Outline

After this introduction, a second chapter presents the conceptual framework that will guide this study. It discusses each of the three sectors concerned from a gender perspective, and closes with a discussion of the interlinkages between them. The third chapter presents a range of case studies, addressing the subject at hand from different perspectives. A fourth chapter sheds light on the state of affairs with respect to recognizing and valuing unpaid care work and promoting shared responsibilities in this regard. A fifth and final chapter outlines the conclusion and presents the recommendations.
2 CONCEPTUAL FRAMEWORK

2.1 Gender and social protection

Social protection are policies and programmes that are designed to reduce and prevent poverty and vulnerability across the life cycle (ILO, 2017). As such, social protection should not only seek to remediate the manifestations or immediate consequences of vulnerability, but intend to work in a more integral and structural manner by focusing on the causes of vulnerability as well. Sebates-Wheeler and Devereux (2007) have proposed a conceptualisation of social protection that takes into account its transformative potential, an approach particularly relevant when analysing the linkages with women’s empowerment. The ‘transformative measures’ that become part of social protection in this regard, then, would allow to address social injustices. The authors conclude that “strategies to deal with social vulnerability must address the social injustice that arises from structural inequalities and abuses of power, and transformative social protection must aim to achieve empowerment, equity and the realisation of economic, social, and cultural rights” (2007, p. 27).

Gender dynamics, then, come into play throughout; that is, in the risks that social protection needs to deal with, in the approaches that are developed and the ways in which these are implemented, and in their results and impacts. Holmes and Jones (2010) identify effects of gendered social and economic risks at a micro-level (i.e. at an individual and household level, such as limited bargaining and decision-making power, a lack of control over productive assets, and an unequal gender division of labour and resulting time poverty), at a meso-level (i.e. for communities and social groups, such as lack of mobility, economic vulnerability and limited market opportunities), and at a macro-level (such as unequal labour markets and negative terms of trade). The multiplicity of and interlinkages between risks increases the likelihood of chronic poverty or vulnerability, and hence calls for a comprehensive approach that addresses the risks and inequalities at different levels.

In order for social protection to tackle risks and social injustices, it needs to be gender-sensitive. The lack of a gender-sensitive perspective risks maintaining or exacerbating existing inequalities. A notable case in point are pension systems. The multiple economic and social inequalities women have faced throughout their life (irregular and lower-paid employment, unpaid care work, limited decision-making power, lack of assets such as a house or land, etc.) bring about a greater vulnerability as they age. Whereas pensions systems ideally redress this, in practice they often do not. In most countries, women are less likely than men to receive a pension, and when they do, they have lower benefits. This is in particular the case for contributory systems, as men and women’s different contributory capacities reflect the time spent on unpaid care work and the wage gaps. Social pensions, on the other hand, that are funded by the government/taxes, have an important positive impact on the gender gap in pension coverage (UN Women, 2015). In the same way, market-based social protection with respect to health care at times discriminates against women by either excluding them because of the costs and risks related to their reproductive roles. Such discriminations may also extend to government institutions.

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1 The ILO distinguishes nine main areas in social protection: child and family benefits, maternity protection, unemployment support, employment injury benefits, sickness benefits, health protection, old-age benefits, disability benefits, and survival benefits.
In Chile, maternity-related health costs are individualised, which results in higher premiums for women than men of the same age (Ulrichs, 2016).

Women’s roles and positions in the economy significantly affects barriers and constraints with respect to social protection. This is true, for instance, for domestic care workers, a highly invisible and one of the least protected groups (Ulrichs, 2016). Increased female migration and international domestic care work further intensifies these risks. Employment in informal economy constitutes another important barrier that affects more men than women. With about half of the global workforce active in the informal economy (more than 70% in Africa, 60% in South Asia and more than 50% in Latin America (WBG, 2018) and many of them women, a large part of women currently lacks coverage via contributory mechanisms. Gender pay gaps in the informal economy equal or even surpass those observed in the formal sector (Ulrichs, 2016). Women’s disadvantaged position in the labour market can be explained by gender-specific constraints (e.g. the fact that a majority of women (are expected to) carry out the majority of reproductive tasks), gender-intensified inequalities (e.g. women from marginalized ethnic groups face more challenges), and imposed forms of gender disadvantage (the institutionalization of gendered inequalities by powerholders). Vulnerabilities that are intensified at the intersections of these inequalities result in an important lack of social protection among women that follows them throughout their lives: they face important financial challenges when confronted with health issues, risk losing their job after a pregnancy or feel compelled to return prematurely (which in turns increases the risks their children face), and risk facing poverty in old age due to inadequate pension systems. Their unsteady income, on the other hand, reduces women’s capacity to pay into contributory social protection schemes, or limits the service package they can afford. Women’s lower literacy or education levels makes that they may not be aware of specific programmes, as well as of the need for social protection. Over the past years, debates on how to ensure social protection for those active in the informal economy have intensified. Some key actors, such as the ILO, have started to take on a more progressive approach in this regard, not in the least because of the weight and potential of the informal economy in many countries. Likewise, a number of international agreements commit governments to ensuring minimum standards of social protection. Indeed, the realisation that informality is here to stay calls for new and innovative approaches that move away from a conceptualisation of social protection that builds on the assumption of long-term formal employment. Notable examples to follow in this regard include the provision of maternity benefits of women who do not have access to formal security (e.g. in Bangladesh, Bolivia and India), the provision of social pensions (e.g. in South Africa, and more recently Myanmar, Kenya and Zanzibar), and universal free health care schemes (e.g. in Indonesia, Ghana and Rwanda).

2.2 Gender and public services

Gendered norms at the level of households, communities and institutions affect access to, and experiences and outcomes of, public services. With respect to health care, this has important consequences. Inequalities at the level of the household and society, such as the value being attached to female health, intra-household decision-making processes, or the lack of men’s involvement in antenatal healthcare, are key explanatory factors in the high rates of preventable maternal mortality (Yamin et al., 2015; Morgan et al., 2018). In the same way, gendered norms and unequal decision-
making power hinders access to sexual and reproductive health services and women’s use of contraceptives (e.g. Mboane et al., 2015; Kofuor Maafo Darteh, 2014). Research in various low-income countries has demonstrated that female autonomy with respect to health care decision-making is associated with better outcomes, and that factors such as age, education and income have a positive impact on women’s autonomy (Osamor and Grady, 2016).

Access to and use of reproductive health care services is also an important issue among young people. Denno et al. (2014) point out that up to 68% of young people have an unmet need for contraception. They may be hindered by fear or embarrassment (cf. Morris et al., 2015.), but many countries have also legal barriers to care in place which mean that young people need parental consent to obtain medical care or that health-care providers cannot maintain patient confidentiality. Government policies, in turn, may restrict adolescents’ access to sexual and reproductive health care and information. Likewise, gendered norms may affect the attitude of healthcare workers who may refuse to assist adolescents or unmarried women (Starrs et al., 2018).

Intersectional inequalities appear to aggravate access to adequate health care. In South Africa, for instance, where lesbian and bisexual women face a greater vulnerability to sexual ill-health (this risk being greater for black women, with a HIV prevalence of 9% over the past decade), lesbian and bisexual women are still largely excluded from South Africa’s HIV policy (Daly et al., 2016).

An important lever for women’s empowerment and gender equality is education. Overall, gender disparities have narrowed, but some challenges remain. Globally, 5 million more primary school age girls than boys are out of school. For every 100 boys in sub-Saharan Africa only 86 girls completed lower secondary education. In low income countries, 66 girls completed the upper secondary education level for every 100 boys, while in upper middle and high income countries this ratio stands at 100 to 94. In contrast to other regions, in sub-Saharan Africa women haven’t closed the gap yet with respect to enrolment in tertiary education. In almost all regions, women lag behind in STEM degrees (Global Education Monitoring Report, 2018).

A key explanatory factor in unequal education opportunities and outcomes are early marriages and pregnancies. Findings from West and Central Africa point to the interplay between education and child marriage. While early marriages are an important factor in girls dropping out of school, for every additional year of secondary schooling the possibility of an early marriage reduces significantly (Wodon et al., 2017). With respect to schoolgirl pregnancies, girls’ education is not only hindered by practical obstacles related to childcare. Various countries (e.g. Equatorial Guinea, Togo, Sierra Leone and Tanzania)5 have policies that expel pregnant schoolgirls and do not allow them to return to school after the pregnancy, often based on moral arguments that denounce adolescent sexual relations. These policies contrast sharply with those of other countries, such as Gabon, where the government establishes nurseries or early childhood centres close to secondary schools so as to facilitate young mothers’ return to school, or Senegal and Cape Verde, where girls can take time off for breastfeeding or for taking care of a sick child (Human Rights Watch, 2018).

A potential positive evolution in the field of public services with respect to gender is the establishment of ‘gender desks’ at police stations. In Tanzania, for instance, the Gender and Children’s Desks are to lower the threshold for women to denounce physical or sexual violence (UNICEF). Nonetheless, the

5 In addition, a number of north-African countries have laws or practices that criminalize girls who become pregnant outside marriage (HRW, 2018).
number and quality of services of available to survivors of gender-based violence is very limited, which points to an important missing link (MCDGC).

When it comes to transport, and public transportation in particular, violence is a major constraint. Studies in India and Pakistan have revealed very high levels of harassment in public transport (66% and 85% respectively, cf. KIT and PIDG, 2018). Moreover, women are disproportionately affected by the lack of or inadequate investment in public transport as more women rely on public transport, on intermediate means of transportation such as animal-drawn carts, bicycles, or motorbikes, and on secondary or short-distance roads (Jacobson et al., 2016; KIT and PIDG, 2018). As a result, girls and women’s access to education and employment opportunities are hampered. At the same time, women are often also excluded from job opportunities in the transport sector itself. Some actors, including IFIs such as the ADB and WB, have started to mainstream gender in their programmes. Such gender-sensitive programmes should identify and address the differences between men and women’s travel patterns and mobility restrictions, but also include women as workers (KIT and PIDG, 2018).

2.3 Gender and sustainable infrastructure

Gendered norms and dynamics interrelate with infrastructure in a broad range of ways. With respect to public spaces, lack of safe infrastructure and secure environments can exacerbate feelings of insecurity as well as the violence women experience, in particular in urban settings (Chant and McIlwaine, 2016 in Jacobson et al., 2016). This risk is aggravated by other factors. Chant and McIlwaine (2013) have pointed out that up to 90% of lesbian women have experienced violence in public areas, and the study of Taylor et al. (2014b) has demonstrated that girls and women working as street vendors face high levels of sexual harassment (Jacobson et al., 2016). Lack of gender-sensitive spatial planning may negatively impact women’s mobility, for instance through a lack of investments in rural roads.

As the energy sector has traditionally been male-dominated, infrastructure projects have often ignored women’s particular needs (O’Dell et al., 2014, in Jacobson et al., 2016). Equal participation and gender sensitivity in consultation and planning processes are therefore key steps in ensuring a gender-sensitive approach to the development of energy infrastructure. Energy access holds great potential for women, as it is demonstrated that access to electricity substantially reduces the time women spend on collecting fuel, time they can dedicate to income-generating activities instead (ADB, 2015). Off-grid energy access, for instance via solar panels, is an important market to develop when taking into account factors as accessibility and sustainability.

Rising rates of urbanisation have exacerbated the gaps between supply and demand of affordable housing. Women are particularly affected by inadequate housing, as many women in the informal economy work from home, and the location and conditions thus directly impact their income opportunities (Jacobson et al., 2016). In many countries gendered norms determine women’s rights to land, as manifested for example in inheritance systems or usufruct rights on family plots. Unequal rights with respect to possession engenders insecurity and dependence, and limits women’s potential or desire to invest in the land they can use. Socio-economic and environmental dynamics like urbanization, speculation, land grabbing and climate change increasingly negatively influence women’s access to land, as they come to stand in the way of customary practices that regulated access. In
countries in the Sahel, for instance, this increasingly excludes women from agriculture, which in turn is an important explanatory factor in the feminisation of poverty (Diarra and Monimart, 2006).

Limited access to water and sanitation affects women and girls by adding to their time poverty as they need to look for water elsewhere. Once more, the link with women’s prevalence in the informal economy and resulting increased vulnerability is clear, as limited access to water risks affecting the profitability of women’s informal enterprises. For school-age girls, lack of water or adequate sanitation facilities are explanatory factors with respect to lower school attendance rates, in particular during their menstruation (Sommer, 2010; Jewitt and Ryley, 2014).

Access to ICT has great potential for women, as it allows them to circumvent other constraints, (e.g. transport) to find access to market opportunities or financial services.

Gender-sensitive infrastructure design and development thus has an important role to play in women’s empowerment, and has the potential to do so in a number of ways. It can contribute to direct and indirect job creation, reduce the risk of violence, promote women’s mobility, facilitate access to markets, reduce women’s care work, enhance productivity, provide increased and more stable incomes, protect communities from disasters, and yield new opportunities by opening up new labour markets for women (Jacobson et al., 2016). Still, this perspective focuses largely on women’s economic empowerment; it is worth exploring how efforts in these areas can lead to more gender-transformative changes. In the same way, these reflections should include a focus on sustainable infrastructure, that is, infrastructure that safeguards natural ecosystems, lowers carbon and environmental footprints, increases the employment in and growth of green jobs, triggers green technological and industrial innovation, is financially viable, and moves beyond compliance on core labour standards and human rights (cf. IISD).

1. The interlinkages of social protection, public services and sustainable infrastructure with respect to gender equality and women’s empowerment

Women’s empowerment can be understood as the process of acquiring power, both individually and collectively. It refers to their ability to act independently, as well as to the means and processes that allow people to make their own decisions regarding their own life and the society in which they live (Commission on Women and Development, 2007). The remainder of this study will focus on how and under what conditions the intersections of social protection, public services and sustainable infrastructure, can be powerful as well as necessary levers for gender equality and the empowerment of women and girls. As the previous sections have highlighted, and as demonstrated in a number of studies, a gender-sensitive approach within each of these domains is a precondition in order to address gender inequalities (Holmes and Jones, 2010).

An elementary but essential building block for this analysis is that there need to be linkages, and that these too need to be gender-sensitive. In other words, the absence of gender-sensitive interlinkages will often allow to explain the limited or non-existent impact on women’s empowerment and gender equality, and has long been the missing link in policies and programmes. This can be illustrated by reflecting on the empowerment of women engaged in the informal economy (cf. UN Women, 2016).

It can be argued that the provision of social protection through non-contributory schemes (e.g. universal health care, social pensions), the provision of public services such as occupational health and safety or childcare services, and investments in infrastructure such as safe market spaces and reliable electricity, water and public transport are all necessary factors that contribute to women’s
empowerment. In addition, and moving beyond economic empowerment, the organization of informal workers in associations allows women to stand up for these rights and provisions, and enhances their social and political empowerment.

An analysis of the literature on each of these domains has allowed to identify the following main scenarios, within which the linkages between different domains reveal a potential to contribute to gender equality and women’s empowerment:

- Social protection can enable access to public services which can contribute to women’s empowerment, on the condition that public services are accessible (physically (link with a gender-sensitive spatial planning of infrastructure)), financially and with respect to social norms) and provide quality services
- Social protection can contribute to the creation of sustainable infrastructure which can contribute to women’s empowerment, on the condition that a gender-sensitive approach is adopted in designing, implementing and developing the infrastructure. This, in turn, can reduce gendered inequalities in accessing public services.

Important actors and factors to take into account in this regard are political, social and economic elites, as they play a key role in setting the agenda; administrative bureaucratic agencies, as they carry a responsibility in delivering social protection objectives; international and national civil society actors, as they work with or act on behalf of the poor; and bilateral donors and multilateral agencies (Holmes and Jones, 2010).
3 THE INTERLINKAGES OF SOCIAL PROTECTION, PUBLIC SERVICES AND SUSTAINABLE INFRASTRUCTURE WITH RESPECT TO GENDER EQUALITY AND EMPOWERMENT

3.1 Linking social protection and public services

3.1.1 Conditional Cash Transfers

Social protection programmes intend to provide immediate relief from vulnerability or poverty, but often move beyond this concern by aiming to break the cycles affecting the most vulnerable, such as intergenerational transmission of poverty. Services such as childcare and education are important catalysts for the empowerment of women and girls, but their access to these services is often hampered by practical, financial and cultural constraints. At the nexus of social protection and public services, then, conditional cash transfers (CCT) seek to counter these constraints. With regard to education, a wide range of studies have demonstrated their impact on the enrolment and attendance of pupils in general, and with respect to dropout for girls in particular. Interestingly, CCT appear to be more effective on girls’ attendance than unconditional cash transfers (UCT), while no such difference can be observed for boys. Evidence with respect to learning is limited, but research has pointed out a positive effect on the transition of girls from primary to secondary education (Roelen et al., 2017, Plan International, 2018).

Despite these successes, the contribution to gender equality and girls and women’s empowerment are not a given.

Tanzania Social Action Fund (Sources: Myamba and Ulriksen, 2014; Evans et al., 2014)

A CCT program implemented by the Government of Tanzania consisted of the bi-monthly payment of $12 to $36, depending on the size of the household, to the poorest households, targeted by a community-driven approach, on the condition of children attending primary school and both the elderly and children visiting health facilities. One of the observations made by the researchers was that accessibility proved to be a major hindrance for beneficiaries in meeting the conditions, with parents being worried about the roads children had to take to get to school or struggling to pay for public transport for school or for accessing health centres. At the same time, the program did show important positive results, for instance on the primary school completion of girls.

Box 1: Tanzania Social Action Fund

Ensuring young people’s safety when accessing services is thus an important missing link that may hinder the realization of the full potential of any program seeking to increase the use of public services. Sections 2.2 and 2.3 have highlighted some of the gendered risks women and girls face in public spaces, on quiet roads or when walking through bushes, and in public transport. Indeed, parents and girls in countries ranging from Cambodia to Brazil attribute poor school attendance to such safety fears (Plan International, 2017).

Similar concerns with respect to the potential benefits of interventions that are being limited due to the inaccessibility of services are raised in many contexts, as the following case study, which focuses on an elaborate and well-known Mexican social protection programme, indicates.
The programme now known as Prospera (formerly Progresa and Oportunidades) started in 1997 as a social protection mechanism targeting those who are not covered by social security, and is the largest cash transfer programme in Mexico. Supported by the Ministries of Social Development, Education and Health, it seeks to promote the development of human capital in the form of health and education, and in doing so tackle intergenerational poverty cycles. On the outset, the programme recognized women’s disadvantaged position by taking into account the time spent on unpaid care and domestic work, lack of education, difficulties in securing well-paid employment, negative health impacts of a high fertility rate and food insecurity for women, and an impeded early childhood development for their children. The interventions are therefore tackling three domains: education (through the provision of school supplies, scholarships and a school savings fund), health (the provision of a basic health package, and the organization of workshops, talks and health sessions), and nutrition (cash support, nutritional supplements, and subsidized milk). In addition, the programme provides cash support for the elderly within participating households, and for vulnerable families that cannot meet the requirements due to a lack of accessible schools and health services. These requirements include school enrolment and attendance, and health promotion and preventive measures via scheduled appointments. Within each of these components, girls and women are targeted with gender-sensitive measures, such as more generous scholarships for girls and specific health care. Moreover, the cash transfers are delivered to women.

A meta-evaluation building on 50 evaluations carried out on the programme aiming to assess the impact of the programme with respect to women’s empowerment points to a number of important observations. The programme did not explicitly set out to contribute to women’s empowerment, which may be an important explanatory factor as to why there are stronger intergenerational impacts, notably with respect to girls. Significant effects on the empowerment of women are therefore more likely to appear on medium and long term. Still, several studies pointed to gains with respect to certain aspects of empowerment, such as increased contraceptive use and knowledge, an increase in intra-household decision-making power, and engagement of women in collective action. Crowd-in with other programmes, most notably with public water provision, has reduced women’s time burden and freed up cash for other goods and services, as private water provision is 25% more costly. The programme also generated indirect effects on the level of infrastructure, such as structural improvements to homes and obtaining or regularizing access to services such as public water supply. The programme has increased women’s income leading to increased investment in productive and household assets (which also reduces women’s time burden), greater diversification of household economic activities, increased savings and creditworthiness, and reduced income volatility. Still, with respect to income there is limited or no gendered poverty reduction; the programme does not seem to tackle gender-based inequalities in this regard⁶.

With respect to girls, the programme has engendered upward occupational mobility and reduced the time girls spend on reproductive tasks. Moreover, women in the programme increasingly value girls’ education.

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⁶ Roelen et al. (2017) point to the potential of including behaviour change components to cash transfers or ‘cash plus’ programmes. Sensitization of men with respect to the redistribution of unpaid care might be a potential road to follow in this regard.
An important enabling factor with respect to the positive outcomes is the affirmative action (e.g. higher scholarships for girls) that is part of the programme. This has led to an increased enrolment of girls in school, despite a voiced preference of both fathers and mothers for educating their sons. Secondly, the linkages that have been made with other public programmes have likewise contributed to the programme’s outcomes. The Seguro Popular programme provides free access to health services, health insurance for those not covered by social security. Via this programme, Prospera beneficiaries gain access to additional services beyond those included in the health package. Children of beneficiaries in the programme enjoy a better health. The estancias infantiles (EI) programme, subsidized care services to mothers of children between 0 and 3 living in poverty (community childcare centres, and centres for child development) has had a positive impact on women’s employment. The Progresa programme also put in place linkages with interventions designed to improve employment opportunities. Interestingly, the temporary employment programme (PET) involves three Ministries (of Social Development, of Environment and Natural Resources, and of Communications and Transportation), but women are more represented in activities promoted by the former than by the latter two ministries, revealing a gendered segregation in the promotion of specific activities for women.

Important constraints include the quality of services, related to infrastructural constraints: 30% of health units do not have a water connection, and most have regular electricity blackouts. The spatial distribution of infrastructure has meant that women faced difficulties in meeting the requirements (and accessing basic services more generally) because of the remoteness of rural populations to health centres. Much in the same way, women face security challenges in trying to obtain the cash, as they often have to travel long distances.

Another key constraint with respect to the programme’s potential to contribute to women’s empowerment is the fact that the programme considers women largely in an instrumental role to the programme’s goals instead of making women’s empowerment an explicit objective and hence a part of programme design and implementation. While recognizing women’s burden of unpaid care and domestic work, it does not explicitly challenge prevailing gender norms that determine the division of tasks and responsibilities within the household. Indeed, conditional cash transfers in general have been negatively criticized for reinforcing gendered care responsibilities, a reflection that could be made here as well, as requirements related to children’s education or health are largely expected to be met by the mothers. Other unchallenged norms that may affect the outcome of the programme on women’s empowerment include the fact that male workers do not have access to subsidized childcare services, which does not promote recognition of shared care responsibilities, or the fact that male partners object to the use of some contraceptive methods. In the context of their assessment of the integration of gender in a social protection programmes in various countries, Holmes and Jones (2010, p. 13) have pointed out the risks of not integrating the transformation of gender relations in social protection programmes: “Such sideling of gender equality goals has resulted in a narrow conceptualisation of gendered vulnerabilities and a focus on supporting women’s care and domestic roles and responsibilities in the household (e.g. as household managers in receipt of cash or in-kind transfers).”

7 The authors further point out that “It has also limited women’s economic skills and participation to sectors with low growth and remuneration potential than supporting gains to promote women’s strategic interests.” (ibid.).
Lastly, there is a need for coordination to tackle structural exclusions. Improved coordination with employment and childcare programmes, with a greater attention to promoting gender equality and challenge traditional gender roles, would benefit women in Prospera.

It is important to point out that the evaluations that have focused on this programme have had limited or no attention for women’s time use, an important lacuna in this context. The limited available evidence points to some possible negative effects. Programme requirements, greater school enrolment and reduced child labour might mean that women have to carry out more reproductive tasks, and some studies suggest that programme participation has had a negative effect on women’s leisure time, whereas no such difference was noted for men. Indeed, research in other contexts suggests that unconditional cash transfers may lead to the same improvements in educational attendance and health as compared to conditional programmes (e.g. South Africa’s child support grant, cf. ActionAid, 2013).

Concerns related to obtaining the cash transfer are not unique to Mexico. Women in Somalia raised similar safety concerns, whereas in Pakistan and Kenya the long distance to the collection points forced women to leave their children at home for a long time (Berg et al., 2013; Wasilkowska, 2012; in Ulrichs, 2016). Some programmes have therefore opted for personal delivery, for instance via the Post Office. This has been the case in Pakistan, where women’s mobility is heavily restricted (Holmes and Jones, 2010). Mobile money provides a promising avenue to explore in this regard. The Malawian government, for instance, has started to use e-payments, including via mobile phones, for the payments of its Social Cash Transfer Programme (‘Mtukula Pakhomo’). This approach, however, requires infrastructure such as network coverage and access to electricity, which proves challenging in some rural areas in sub-Saharan Africa (cf. infra).

In addition to challenges related to accessibility, it serves to point out that a lack of quality of services related to health and education also prove to be a major hindrance for these services to contribute to women’s empowerment. The abovementioned studies mention an absence of teachers and a lack of medicine which may hinder women and girls in trying to overcome inequalities, even when social protection schemes would allow them to access services. While there is a clear potential for conditional cash transfers to contribute to women and girls’ empowerment and to the reduction of gender inequality, a lack of public service provision and (sustainable) infrastructure, as well as a lack of a gender-sensitive reflection on the necessary linkages when designing interventions, are important pitfalls.

3.1.2 The single window approach

The single window approach, or integrated public service delivery, seeks to reduce barriers and improve access to social protection programmes and services for vulnerable groups, most notably groups that are socially excluded and/or live in physically remote areas. The approach fits within a logic that seeks to move away from stand-alone approaches and intends to reorganize, harmonise, and coordinate social protection policies and programmes so as to increase its efficiency, a perspective that is particularly relevant as social protection is gaining ground in efforts to address the multidimensional aspects of poverty (GIZ, 2017). A single window approach entails that a potential beneficiary of a programme only needs to address one contact point (physical or otherwise) in order to gain access to information about programmes, and where they may be assisted in registration. A distinction can be made between a single referral point, a single entry point, and one-stop shops, with the latter offering the most integrated approach. The Integrated Community Registration Outreach
Programme (ICROP); developed by the South African Social Security Agency, is an example of a ‘one stop shop’. Mobile units that are dispatched to remote and vulnerable communities that were previously excluded from social protection benefits enable access to information and facilitate enrolment (ILO, 2015). Single window approaches are particularly relevant with respect to gender equality and women’s empowerment when taking into account gendered vulnerabilities and risks with respect to mobility, access to information and knowledge, opportunity costs (important when taking into account women’s higher representation in the informal economy), the time burden, or that compel women to engage in transactional sex.

3.1.3 Integrated programmes

Social protection programmes or interventions targeting one particular aspect (e.g. childcare and healthcare in the examples that follow) can often be the cause that leads to the identification of needs and the provision of new services put in place to address those needs.

**Mobile Crèches - India (Source: Cities Alliance, 2017)**

About 35% of people active in India’s booming construction sector, the vast majority of them migrant day labourers, are women. They often work under informal arrangements and live with their children at work sites. Whereas public policy requires the presence of a crèche from a threshold of 49 women workers, companies often do not provide the service. Mobile Crèches has been in place for over 45 years and has provided day care to over 750,000 children, trained more than 6,500 childcare workers, established 650 day-care centres, and trained and supported 250 government crèches. The fact that day care is provided liberates women from the care of their children during work hours, but the provision and its effects go beyond meeting this most practical need.

The initiative contributed in particular to women’s economic empowerment as it allowed them to engage in employment. Older siblings (often girls), are relieved of childcare duties. But the programme also enhance rights and access to services. The programme only works in partnership with the contractor. This partnership obliges the latter to meet official requirements (e.g. paying minimum wages to childcare workers, providing adequate physical infrastructure (incl. access to water and sanitation). Likewise, construction workers are encouraged to register with a Welfare Board, which allows them to utilize insurance services, scholarship for their children, maternity benefits, and other provisions. Contractors are required to invest 1% of the total project cost per year in the fund. The organization engages in a wide range of advocacy efforts, and workers are encouraged to mobilize to demand adequate government services such as integrated child development services (ICDS), which resulted in the operationalization of 80 state-run ICDS. In these ICDS, the government also provides nutrition support and immunization for children. Importantly, the project works with community leaders and seeks to work gender-transformative. Men are encouraged to take on tasks more commonly carried out by women, such as monitoring malnourished children and sensitizing in positive parenting.

The main challenge the project is confronted with is that its targeted audience is frequently on the move, which may negatively impact any long-term gains both women and children may get from the intervention. The programme has sought to work with this observation by expanding its collaboration with other organizations, in which it aims to share best practices.
Gonoshasthaya Kendra (GK) – Bangladesh *(Source: WSM, 2012)*

While GK started as a programme that sought to provide health care, it would come to develop into an integrated and transformative approach to community development. From the outset, the programme emphasized women empowerment, for instance by training them to become nurses, which in turn has enhanced their physical and social mobility. The programme provides a day care centre, allowing young mothers to continue to work and study, provides maternity leave, and pays them through a bank, which again enhances their autonomy. A decentralized and community-based approach ensures accordance with local realities and local ownership, and the fact that women hold the chairmanship of the health committees enhances women’s social and political empowerment.

The programme enables access to reproductive health care, and has put in place a health insurance scheme. Premiums depend on a range of socio-economic indicators, including gender, access to services related to education and health, and access to infrastructure such as water, sanitation and roads. Likewise, it promotes access to primary education and higher education, the latter in particular for women (e.g. teacher training, paramedical training), and the foundation of a vocational training centre sought to provide basis education and technical skills for women. Commercial activities, such as the foundation of a publishing company, a pharmaceutical production unit and food production unit not only enhance access to quality foods and drugs, but also sustain the health care and education parts of the programme. Another important feature of the programme is that it has extended its services to the ‘chars’, small islands with extremely hard living conditions and that previously had been largely deprived of infrastructures and services.

Through lobby and advocacy efforts, the programme has sought to achieve structural changes with respect to social and gender injustices. Successful examples include the adoption of quota in government jobs and the recruitment of women as health care workers by the government.

The main enabling factor with respect to the GK programme’s contribution to women’s empowerment is that it works in a holistic manner. That is, it focuses on access to knowledge (education, health care), economic empowerment (enterprise development, employment opportunities, vocational training), and social and political empowerment (women taking on leadership positions, gaining respect through their work), which in turn boosts women’s confidence, autonomy, and decision-making power.

### 3.1.4 The potential of ICT

**Mobile Technology for Community Health – Ghana (Source: Grameen Foundation, 2015)**

The programme was developed in 2009 – 2010 to address the high number of maternal and infant mortality in rural Ghana due to lack of adequate information and services, and has directly reached over 70,000 women in its first five years. It seeks to empower women in their health care seeking behaviour and knowledge via two mobile phone applications: the *Mobile Midwife* and the *Client Data Application (CDA)*. The former delivers educational automated voice messages and clinical health care reminders to pregnant women or young mothers in local languages. Community nurses digitalize and track health care information via CDA, which is then uploaded to the MOTECH central database. This database crosschecks information against guidelines, and sends reminders and alerts about care to clients and health care workers. The data is also aggregated in Ghana Health Service (GHS)’s monthly reports.
Box 4: Mobile Technology for Community Health - Ghana

Programme evaluations raised a number of positive outcomes as well as challenges that are outside the scope of this report. Important to note here are the results with respect to women’s empowerment. The programme made that women took their health care into their own hands, by asking informed questions, attending scheduled care visits more regularly, and taking responsibility for their health care, breaking through certain financial and cultural barriers. Women enjoyed a continuity of care, despite practical challenges (e.g. distance, lack or cost of transport), and were better prepared financially for childbirth and childcare. In addition, the women that took part in the programme became shared the information they had access to within their community.

Important constraining factors were network problems that hindered registration, data uploading, messages reaching clients, and lack of access to electricity to charge phones. Fears about the quality of treatment were another important impeding factor, as were high costs, lack of transportation, and/or too great a distance to attend routine care.

This approach has important advantages as well as constraints, one major challenge being the financial and operational models behind the intervention. A number of mobile providers have developed similar and other offers, providing specific services via mobile phones. In Nigeria, the mobile midwife model was copied but by adopting a business model that intends to be commercially viable (Bhandari, 2015a).

As in Ghana, one of the major outcomes was a reported increase in knowledge. Interestingly, far more men signed up than anticipated. Men are targeted with the intervention as they are being encouraged to engage actively in childcare. Still, important barriers such as cultural constraints (e.g. not wanting to share the fact that you are pregnant until later in the pregnancy), financial barriers (not wanting or being able to pay for the service) and connectivity issues have meant that the intervention wasn’t able to reach the targeted audience of rural poor to the extent intended, and that questions can be raised with respect to the viability and upscaling of initiatives according to this model. In Mali, a combined approach of mobile saving and mobile insurance, the latter being activated automatically once the saving balance reaches 40,000 FCFA (about $66), appeared to be more successful. The health insurance grants the subscriber 12 months of life/disability and maternal health insurance, fostering first time insurance among women, as 97% of female users report not having been insured before. Indeed, over 30% of the users report saving in order to be covered by the insurance.

3.2 Linking social protection and sustainable infrastructure

3.2.1 Public work programmes

Public work programmes are a form of social protection that provide cash or food payments in exchange for labour. In doing so they provide an income for the vulnerable, which is particularly important during specific moments of the agricultural calendar. In the same way, as the labour efforts are often targeted towards the development or repair of community assets such as roads, irrigation facilities, and schools or health centres, they can play an important role in the development of (sustainable) infrastructure (Holmes and Jones, 2010).

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8 All under the ‘Connected women’ programme, implemented by GSMA in partnership with USAID and Australian Aid.
The second phase of the rural roads project in Peru sought to improve the access of (poor) rural populations to social services and regional economic centres, generate employment, and strengthen the local capacity to sustainably manage the roads. Rural women’s implication as main stakeholders in the project was to help them overcome a range of constraints on their productivity and mobility: time burdens (looking for water and fuel), low literacy, cultural barriers to the use of public transport, limited control over household spending and lack of involvement in previous transport projects, the prevalence of female-headed households due to male migration, and isolation. Men and women had equal opportunities to be selected as microenterprise workers for road maintenance (selection criteria were modified to overcome the higher illiteracy levels among women and to valorise their technical and leadership skills), rural committees included women’s groups’ representatives, gender focal points were assigned among staff, and the project provided gender training. During community consultation, separate sessions were organized for women to ensure that they could speak out. In response to mostly women’s needs, about 3,500 km of non-motorized transport tracks were rehabilitated, which ultimately had a greater economic impact than the main road intervention.

The programme contributed in a number of ways to women’s empowerment. It enhanced their economic empowerment through the roadwork and involvement in microenterprises and increased their mobility. 77% of the surveyed women travelled more, 67% said to feel more safe when traveling. Girls’ access to primary school increased by 7%. Women’s increased mobility also had an effect on their access to basic services, such as to markets and health centres (notably for childbirth). The reduced travel time engendered a reduction in the time burden of women, and their increased mobility led to an increased participation in community meetings, which in turn contributed to their social and political empowerment.

Important enabling factors were a decentralized and community-oriented decision-making process focusing on gender equity, and a gender-sensitive monitoring and evaluation, including a gender impact assessment at the end of phase II.

Overall, the assessment of the intervention is very positive, for instance by exceeding the gender quota set out in the gender action plan. Still, it serves to notice that the established quota for employment in the framework of the intervention, for instance, were at 10% for women. In that respect, the final 24% is a positive result, but it does raise questions as to whether more could have been done to involve more women. In the same way, the project required 20% of the members of road committees to be women. Once more, with 30% the envisaged number was surpassed, but it still leaves room for improvement.

**Box 5: Rural Roads project II – Peru**
4.1 Unpaid care work

Unpaid care work is work that contributes to meeting the basic needs of individuals, families and communities. It includes caring for children, the ill, and the elderly, doing housework, fetching firewood and water, and preparing food. As a majority of countries around the world still know gender norms that ascribe care work to women, it is no surprise that up to 75% of unpaid care work is carried out by women. Time spent on care work cannot be spent on other social, economic, or political activities. Time poverty becomes all the more important when intersected with income poverty, as it reduces women’s opportunities to increase their income, limits them to local markets with limited bargaining power and to informal and insecure employment, and in that way keeps them in a cycle of insecurity that may well last into old age, due to the lack of social protection (cf. supra; ILO, 2017b). Gendered inequalities in unpaid care work can thus be seen as the ‘missing link’ in the analysis of gender gaps in labour force participation rates, quality of employment, and wages (OECD, 2014).

The time burden does not only affect women at working age. A recent study by Plan International (2017) revealed that girls are often forced to miss out on school when they have to assist with domestic or care work. The study suggests that this may be one of the explanatory factors for poor academic performance and grade repetition among girls. This, in turn, may discourage girls and their parents from their schooling, resulting in the fact that the decision to keep them at home to help may be taken more easily. New income generating opportunities for mothers often impact negatively on girls’ time spent on household tasks. Vulnerable families are forced to outweigh the benefits of short-term gains against strategies that may prove more fruitful on the long run (such as a girl’s education), the former often getting the upper hand. A study on the impact of fetching water by girls in Ghana on their schooling suggests that if this time were to be halved, school attendance would be increased by up to 7% for girls aged 5 to 15, with more important results in rural areas (Nauges et al., 2015 in Plan International, 2017). Whereas some examples suggest that perceptions in this regard are changing, in general gendered social norms still place the burden of household tasks firmly on women and girls’ shoulders. In other words, a new generation of young people is growing up with the same norms and expectations that continue to make it very hard for girls to envisage alternative futures, or for boys and young men to be encouraged to take on a greater responsibility in care and domestic work.

As such, unpaid care work stands in the way of women’s equal participation in society and girls and women’s empowerment. The recognition of unpaid care work was included in the 2030 Agenda for Sustainable Development, as target 5.4 under the SDG striving for gender equality and empowerment of women and girls. It is monitored by the indicator ‘proportion of time spent on unpaid domestic and care work, by sex, age and location’. For a large number of countries however, in particular in sub-Saharan Africa, available data is limited.

4.2 Recognition, reduction and redistribution
Debates and efforts addressing the issue of unpaid care work centre around three main objectives: its recognition, reduction, and redistribution, three features that are also reflected in the formulation of target 5.4.

A review of the integration of unpaid care concerns in public policies on social protection and early childcare development has highlighted their significant invisibility (Chopra, 2013). Of 149 social protection policies in 53 countries, only 23 recognized unpaid care concerns and mainly sought to redistribute care between the family and the state (e.g. providing child support grants, crèches, maternity leave). No policies aimed to redistribute unpaid care work from women to men, and only a few policies sought to reduce unpaid care work. With respect to early childcare development, of the 263 identified policies in 142 countries only 40 stated an intent to address unpaid care, again mostly via redistribution between the family and the state. 16 policies specifically recognized the role of fathers in childcare, half of which in Latin America. Importantly, on both accounts the review found very little information on the implementation and outcomes of these intents, which led Chopra to point out that there has also been an important invisibility of unpaid care concerns among evaluators and funders.

4.2.1 Recognition

With unpaid care work being largely invisible in statistics as well as public policy, a first objective is the recognition of unpaid care work. This includes its recognition as work that is important both on a social and an economic level, as well as the recognition of the responsibility of different stakeholders, including government and the private sector actors. It can be done by collecting data (e.g. carrying out time use surveys, including unpaid care in national surveys), including the resulting data in national statistics and social security systems, and use this data to inform policy-making and budgeting.

Steps forward include:

- The recognition of the shared responsibility of both parents to care for their children in Kenya’s constitution.
- Equal wages but 50% less hours of work for women in public work programmes in Ethiopia in recognition of their unpaid care work; providing women with work opportunities close to home in public work programmes (MEGA, MGNREGA) in India. It serves to notice that whereas this may alleviate the double burden of women involved in these programmes, this does not transform gendered norms and practices.
- The Uganda Bureau of Statistics has incorporated unpaid care work in relevant national surveys.

4.2.2 Reduction

Unpaid care work can be reduced in a number of ways, in particular but not exclusively by creating or improving access to services such as childcare, and to infrastructure such as water and sanitation, energy, and public transport, and to technological solutions that allow to decrease time spent to housework.

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9 Sources: Oxfam (2018), Chopra (2013) for the example on India.
Steps forward include\(^\text{10}\):

- The Turkish government pays a ‘home care allowance’ equivalent to the net minimum wage to people caring for a disabled family member at home. Again, however, when this task is taken up by female family members, as can be expected when efforts like these do not go hand in hand with gender-transformative sensitization efforts encouraging men to take on care work, this confirms women in their caring role which in the short and long term will have a negative impact on women’s career opportunities and financial independence. In the same way, and as discussed higher, when the time spent to care work is not qualified as ‘worked time’ this will negatively impact the carer’s pension.
- The Federal Day care Programme in Mexico provides grants to provide subsidized child-care for children from lower income households.
- Mobile Crèches in India (cf. supra); the provision of crèches in the framework of the Cambodian National Social Protection Strategy for the Poor and Vulnerable, and in the Rwandan VUP Social Transfer programme.
- Longer school days or pre-school hours: when the Kenyan government expanded its preschool education, this increased female labour participation
- Improved road infrastructure, such as in the case of the rural roads programme in Peru, reduces women’s time burden (cf. supra)
- A project seeking to render unpaid care work visible revealed that women in a rural community in Nepal spent up to 99 minutes a day collecting water and firewood. During a community meeting and with the assistance of the Village Development Committee a water tank was constructed to store drinking water.
- In the same way, a mapping exercise among women in a rural community in Kenya revealed that the early childhood development (ECD) centre was too far. Addressing their concerns to local authorities, responsible for the development of ECD centres, their advocacy efforts ultimately resulted in the acquisition of additional funds allowing for the construction of two classrooms to be used as ECD centres.

4.2.3 Redistribution

The redistribution of unpaid care work calls for a gender-transformative approach, calling into question gendered norms that keep in place an unequal distribution of unpaid care work. This approach should not only concern individuals within families, but also governments, private sector actors and social economy/third sector actors that should adopt policies that allow precisely to transform these norms (e.g. parental leave for fathers, provision of quality childcare services).

Steps forward include\(^\text{11}\):

- The Gender Equity Movement in Schools in India promotes gender equality and seeks to challenge social norms, with positive results on the pupils’ view on a more equal task division at home.

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\(^{10}\) Sources: Oxfam (2018) for first two bullet points, OECD (2014) for the 4th, Chopra (2013) for the examples on Cambodia and Rwanda, ActionAid (2013) for the last two bullets points.

\(^{11}\) Sources: Oxfam (2018) for the first three bullet points, OECD (2014) for the 4th and 5th
In the Philippines, the national government’s 4Ps programme (cash assistance) includes a Family Development Session that addresses women’s rights and household management, and that requires the attendance of both fathers and mothers.

La Nueva Cultura Laboral, promoted by the government of Mexico City, promotes fathers’ engagement in caring for their children.

The ILO has set a standard of maternity leave on public subsidies of 14 weeks, which is to encourage women’s return to the labour force. In Morocco, an increased maternity leave was associated with an increase in the share of working mothers.

The Africacare’s Male Empowerment Project in Zimbabwe has sought to challenge gender norms related to care by increasing male involvement in home-based care for rural people with AIDS.
5.1 Conclusion

Social protection, public services and sustainable infrastructure all have the potential to contribute to women’s empowerment. Social protection provides measures that are to reduce or overcome vulnerabilities related to unemployment, illness, old age or biologically determined events (such as childbirth). Public services such as health care and education are to ensure personal wellbeing and development, redistribute wealth in society and contribute to sustainable development, and sustainable infrastructure allows women to take part in social and economic life. But in many countries around the world, there are important gaps between what is to be expected from each of these spheres and what they actually provide. A range of substantial gendered inequalities in each of these sectors negatively impact women’s access to, use of, and benefits from these provisions.

This study has looked at the interlinkages between these three provisions to examine the necessary conditions for these interlinkages to become levers for gender equality and the empowerment of women and girls. As these interlinkages ensure (or hinder) access to the potential benefits of each of the sectors, essential questions were whether the specific needs and interests of women are taken into account when programmes build on these linkages (consciously or not) to look for specific outcomes. In the same way, this study has explored a number of case studies to illustrate how programmes may take these interlinkages into account, what the consequences are when this is not done, and what the (potential) outcomes are with respect to gender equality and women and girls’ empowerment.

A first observation is that few social protection policies and programmes are designed with the primary objective of contributing to women’s empowerment and gender equality, as manifested for instance in the findings of Holmes and Jones (2010), Chopra (2013), or numerous of the examples presented in this study, such as the Progresa programme in Mexico, or the provisions with respect to unpaid care work in the Turkish, Ethiopian and Indian social protection programmes.

Secondly, some programmes build on assumed linkages between different provisions while in practice they are often absent, or do not take into account structural gendered constraints that negatively impact potential benefits, such as restrictions on women’s mobility and access to public spaces (due to the double burden and resulting time poverty, safety concerns due to inadequate infrastructure or public services, or social norms), or negative impacts on time use (as can be the case for conditional cash transfers). In the same way, programmes do not sufficiently take into account time use in monitoring and evaluation. This would allow to identify risks, such as the increased employment or other responsibilities (e.g. meeting requirements of a conditional cash transfer programme) of women leading to an increased burden on girls, which in turn negatively impacts the latter’s education, or the need for a focus on access to sustainable infrastructure to address time poverty. These first two observations point to the centrality of developing a gender-sensitive social protection that likewise adopts a gender lens when implementing programmes that build on the linkages with public services and (sustainable) infrastructure. The case study on Bangladesh points to the potential of adopting an integrated approach to social protection that takes into account women’s empowerment on the outset and creates linkages with public services and sustainable infrastructure.
Finally, the study suggests that while programmes may contribute to women’s empowerment, this is often limited to economic aspects and a thorough gender-transformative approach is lacking or insufficiently developed. The challenges and inequalities addressed in this study highlight the need to adopt such a **gender-transformative** approach, creating opportunities to challenge and change gender norms that stand in the way of gender equality and girls and women’s empowerment.

### 5.2 Recommendations

**At the level of policy:**

- The UN, its agencies and its Member States should ensure that their social protection, public services and infrastructure policies and programmes be *designed from a rights-based approach that promotes the equality of women and men, integrating women and girls as actors and rights-holders*. This approach requires all actors to take into account the specific needs and situations of both women and men during the *design, implementation and evaluation* of all policies and programmes. Where needed specific, additional programmes with a focus on the empowerment of women and the promotion of gender equality should be adopted.

- The UN, its agencies and its Member States should ensure that their policies and programmes take into account and develop gender-sensitive linkages between the three provisions so as to ensure an integrated approach and hence the gender-transformative potential of social protection in relation to public services and sustainable infrastructure.

- The UN, its agencies and its Member States should engage in and support advocacy efforts of civil society toward national governments with respect to the implementation of recognized rights and national policies that would allow to reduce unpaid care work, such as the provision of water or the development of early childhood development centers.

- The UN, its agencies and its Member States should *invest in the implementation of and evaluation of outcomes* of gender-sensitive approaches in policies and programmes to social protection in relation to public services and sustainable infrastructure with respect to women’s empowerment, which will allow to identify missing links that will need to addressed. Investments in evaluation should include processes of exchange and learning across the involved actors and institutions.

- The UN, its agencies and its Member States should work towards the *removal of gendered inequalities* from social protection, public services and infrastructure.

- The UN, its agencies and its Member States should promote policies on spatial planning of infrastructures and services that adopt a gender-sensitive approach and as such take into account time and mobility constraints, which would allow to overcome gendered inequalities in accessing services or making use of infrastructure, and reduce unpaid care work.

- Ensure secured budgets for each of the three focus areas, irrespective of political changes, and ensure a *gender-sensitive use of these budgets*.

- Ensure adequate *coordination* between relevant institutions and gender machineries necessary to design gender-sensitive policies based on the potential of the synergies between the three provisions. This calls for a political commitment and strategic coordination at national and local levels.

- The UN and Member States should enforce the obligation of corporations to pay their fair share of taxes. This should enable States to ensure the quality of social protection, public services and sustainable infrastructure.

- Extend the legal entitlement to social protection and invest in policies and programmes that ensure an adequate coverage of informal workers, such as social pensions, the provision of
maternity benefits to women that do not have access to formal social security, and universal free health schemes.

- Ensure gender-mainstreaming in the human infrastructure of institutions (e.g. via quota, capacity development with respect to gender)
- With respect to unpaid care work:
  - Measure the economic contribution of unpaid care work (e.g. including time use sections in national surveys) so as to recognize unpaid care work
  - Promote a better distribution of household tasks and care work between women and men, boys and girls.
  - Invest in sustainable infrastructure that reduces unpaid care work (e.g. access to water, to electricity)
  - Invest in policies that recognize unpaid care work, such as the provision of social pensions, that allow to tackle gendered inequalities in this regard
  - Invest in policies and interventions that redistribute care work between families and the state, such as by providing early childhood development centres and providing paid care for the sick and elderly

**With respect to interventions:**

- *Prioritise interventions that envisage a multiplier effect, based on gender-sensitive synergies between the three provisions,* notably integrated approaches that focus on women’s empowerment in design, implementation and evaluation.
- An essential prerequisite for any intervention with respect to social protection, public services and sustainable infrastructure is an ex-ante in-depth study of the social and economic context it will take place in, and in particular of a gender analysis of needs and interests of different stakeholders.
- Interventions need to include a reflection and approach on how they can work in a gender-transformative manner in different spheres (social level, economic level, political level) from the outset when working in the fields of social protection, public services and sustainable infrastructure.
- Building on the first four recommendations and the cases brought forward in this study a number of more specific recommendations can be made with respect to programmes that are built on the linkages between social protection in relation to public services and sustainable infrastructure:
  - Conditional cash transfers have the potential to contribute to women’s empowerment, for instance via enabling access to education and health services. The creation of linkages in this regard are therefore a valuable approach to develop. At the same time, it is essential to focus on women’s empowerment from the outset. This should avoid according an instrumental role to women in the programme by focusing on their role as carers or exacerbating time burdens for either women or their daughters. A focus on women’s empowerment necessarily includes gender-transformative measures that actively engage men, for instance via measures that seek to redistribute unpaid care work. At the same time, these interventions should take into account and address supply-side constraints.
  - Public work programmes should be designed from a gender-sensitive approach. This includes active consultation and participation of women on the outset, their active implication during the implementation while taking into account specific needs and interest, which requires taking into account unpaid care work and might require the provision of alternative provisions for pregnant or older women, participation of women
in the governance of programmes, and prioritising public work programmes aimed at developing sustainable infrastructure that reduces gendered vulnerabilities, most notably the time burden.

- Single window approaches facilitate access to and use of social protection programmes and services, and is particularly relevant when taking into account gendered vulnerabilities such as mobility constraints, lack of access to information, and opportunity costs, which is particularly relevant when taking into account the high representation of women in informal economy.

- Ensure participatory and inclusive consultation, planning and design processes to include the practical and strategic needs and interests of all stakeholders

- Monitoring and evaluation: include gender-sensitive indicators such as impacts on girls’ health and education, on women’s decision-making power at the level of the household, community and society, on women’s mobility, or on women’s income, and include time use data in qualitative and quantitative monitoring and evaluation so as to assess impacts on paid and unpaid care work.
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