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# TRANSFORMATIVE APPROACHES TO RECOGNIZE, REDUCE AND REDISTRIBUTE UNPAID CARE WORK IN WOMEN'S ECONOMIC EMPOWERMENT

GOOD PRACTICES, LESSONS LEARNED AND  
RECOMMENDATIONS FROM RWANDA, SENEGAL  
AND SOUTH AFRICA



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**ECONOMIC EMPOWERMENT SECTION**  
**UN WOMEN**

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# INTRODUCTION

Care work is essential for realizing a range of human rights and for vibrant and sustainable economies and societies. In Africa, women spend on average around 3.5 times more time on unpaid care work than men, performing diverse tasks including cooking, gathering wood, collecting water, provisioning food and tending to families, households and communities. This translates into reduced time and energy for educational, income-generation and personal development activities and for participation and leadership in the community and more widely.

The profile of those most responsible for unpaid care work in Africa are women between the ages of 15 and 54 with several children, limited financial resources, low levels of education, health problems or disabilities, and those who simultaneously are in paid work, mainly in the informal sector and receive minimal or no formal care support.<sup>1</sup>

In Rwanda, women spend 3.7 hours in urban areas on unpaid care work daily, and 3.3 hours in rural areas, compared to men who spend only one hour daily on these activities.<sup>2</sup> In Senegal, women use an average of 4 hours on unpaid care and domestic work daily, compared to 30 minutes for men.<sup>3</sup> In rural areas, the time spent on unpaid care and domestic work by women and girls is higher in large part due to limited access to basic services and infrastructure. A survey carried out by UN Women of 400 women farmers in Northern Senegal showed that women devote up to 12 hours daily to unpaid work,

including caring for family members, domestic work and community activities.<sup>4</sup> In South Africa, women spend on average 6 hours on unpaid care work daily, while men spend 1 to 2 hours per day.<sup>5</sup>

To address women's disproportionate share of unpaid care work, UN Women, with the support of Global Affairs Canada, developed and implemented "Transformative Approaches to Recognize, Reduce and Redistribute Unpaid Care Work in Women's Economic Empowerment Programming", the 3R Programme, in Rwanda, Senegal and South Africa. This document compiles the good practices and main lessons learned from the implementation of the 3R Programme pilot phase between March 2021 and March 2023, and is intended to inform future programming and policy work around the recognition, redistribution and reduction of unpaid care work in the target countries, respective regions and beyond.

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1 International Labour Office (ILO). 2018. [Care work and care jobs for the future of decent work](#). Geneva: ILO.

2 UN Women. 2022. [Survey of existing Care Services and Social Care Infrastructure in 8 Districts of Rwanda](#).

3 Agence Nationale de Statistique et de la Démographie (ANSD) and UN Women. 2021. [Enquête sur l'emploi du temps au Sénégal](#) [Survey on Time Use in Senegal].

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4 UN Women. 2023. Innovative solutions to recognize, reduce and redistribute the unpaid care work of rural women in Senegal.

5 UN Women. 2023. Rapid Care Analysis in Free State, Limpopo and Mpumalanga Provinces in South Africa.

# GOOD PRACTICES

## 1. Evidence-based policy dialogues around unpaid care work

The 3R Programme has demonstrated that evidence and data specific to national and local contexts are key in engaging with national and local authorities and advocating for the integration of unpaid care and domestic work in policies, programmes and budgets.

In each of the three implementing countries, the 3R Programme generated data, evidence and knowledge through research, time-use surveys and citizen-generated data that provided a solid and contextualized basis to engage in dialogues with key policymakers and multiple stakeholders at all levels for the design and formulation of unpaid care policies and the provision of care services and infrastructure.

Contextualized data, evidence and knowledge also help legitimize interventions to recognize, reduce and redistribute (the 3Rs) unpaid care work within communities. By meaningfully engaging community, traditional and religious leaders, projects can lay the foundation for eliminating discriminatory social norms and practices.

In addition to national and local policy work, the programme leveraged local and national dialogues to inform regional discussions in both West Africa and East and Southern Africa about the care agenda and its implications for women's economic empowerment.

Two regional platforms have been created for discussion and exchange on unpaid care work reform in West Africa and in East and Southern Africa, in collaboration with global and regional partners, including the International Development Research Centre (IDRC), the African Development Bank (AfDB), the West African Economic and Monetary Union (WAEMU) and the United National Economic Commission for Africa (UNECA). The regional platforms helped establish a common vision and understanding of the unpaid care agenda. Innovative models of care service provision, reforms of discriminatory laws and policies, and prioritizing areas for investment to reduce time burdens in the care sector.

They will amplify solutions beyond the 3R Programme and ensure that the interventions addressing unpaid care work are adapted to specific regional characteristics for greater outreach, impact, ownership and sustainability in the medium and long term.

The 3R Programme has shown that the creation and strengthening of stakeholder coalitions and platforms are fundamental to promote gender-transformative care policies and interventions. Stakeholders include national and local government and policymakers, civil society organizations (CSOs), non-governmental organizations (NGOs), academia and research institutions, the private sector, UN agencies and other development partners that are involved with care services and infrastructure, early childhood development, water and energy services and infrastructure, and time-saving, climate-resilient technologies and equipment.

## 2. Innovative, bottom-up 3R solutions for rural women's economic empowerment

The 3R Programme adopted a bottom-up approach, grounding its interventions on the specific needs of women in their respective contexts and communities. Needs assessments and research studies were carried out to enable the creation of solutions, services and infrastructure based on the actual needs of women, considering existing opportunities and challenges, and stimulating the identification of possible solutions by women.

In Senegal, research assessed the impact of women's unpaid care in rural areas in the Saint-Louis region based on income level, time management and overall economic empowerment, to inform the development of innovative solutions. In collaboration with the government, the programme identified and piloted policy and programmatic measures to better recognize, reduce and redistribute rural women's unpaid care and domestic work responsibilities. Specifically, the programme tested an innovative model to support rural women in accessing a health insurance system that is adapted to their needs and aims to redistribute their unpaid care workload.

The work was structured in two phases. The **research phase** covered the analysis and identification of women's needs related to unpaid care work and a mapping of the existing and potential solutions that could help address those needs. The methodology consisted of a qualitative and quantitative market survey of 400 rural women in 10 municipalities in the Saint-Louis region to identify needs; over 30 interviews with key informants from the public and private sectors; and a literature review to map and identify potential solutions.

The **implementation phase** consisted of the identification, design and piloting of innovative solutions in partnership with public and private sector institutions, along with the capacity-building of rural women—strengthening their financial and digital skills—to enable them to fully understand and take advantage of the innovative solutions developed and increase their willingness and ability to pay for these solutions.

The main research findings revealed that unpaid care work related to health and illness has a significant impact on rural women and that health insurance could therefore be an effective mechanism to address it. Rural women expressed strong interest in financial instruments like health insurance that can offset lost income due to unpaid care work, but their knowledge of and access to these services is very low (only 7 per cent of women sampled had access to health insurance). It is therefore critical to support governmental institutions charged with the design and implementation of social protection policies and programmes to better integrate gender considerations and the needs of rural women. A similar approach can also be adopted with private sector entities, such as insurance providers, to help them understand and address the specific needs of women.

This innovative model was implemented through a partnership with the Universal Health Coverage Agency of Senegal, which fostered demand and awareness of insurance among rural women and offered them access to health insurance products, services and financing that can help redistribute their unpaid care work. Over 1,300 rural women enrolled in national health insurance for the first time, accessing coverage for themselves and their family members, thus providing these essential services to nearly 7,000 people in vulnerable situations. UN Women's technical assistance consisted of:

- Designing mechanisms to adapt the supply and delivery of services to the needs of rural women and their families, through incentive modalities such as lower insurance premiums adapted to income level or the number of children/dependents, more flexible payment options through instalments or in-kind payments, and leveraging digital channels to facilitate enrolment and the payment of the premium with mobile money.
- Encouraging the enrolment of rural women by offering group insurance memberships to women's networks and cooperatives, which led to reduced premiums through economy of scale and risk pooling by facilitating and standardizing agreements between women's groups and service providers, and by strengthening the capacity of these groups to facilitate the collection of premiums.
- Designing mechanisms to ensure the sustainable financing of insurance services in coordination with local authorities, including savings groups, in-kind premium payments, and premium subsidies.
- Strengthening the demand for and the uptake of these services through information campaigns and financial education for targeted participants, including delivering trainings via mobile phones.

The 3R Programme demonstrated that integrating a gender lens in microinsurance can lead to significant benefits to both the insurance provider and the women, including tailoring these services to effectively address women's unpaid care work needs.

In addition, digital solutions can be leveraged to address rural women's unpaid care needs, through improved access to tailored savings and financing models, such as asset financing and digital savings groups. For example, the 3R Programme used mobile voice technology for mobile trainings to improve the knowledge and skills of rural women around complex topics such as insurance. Unlike traditional in-person training, this modality can reach a large number of people in a reduced time as well as be tailored to minimize the burden on women's time.

Ensuring the adoption of innovative products, services and technology by target populations is often challenging, particularly for those living in rural settings and remote locations or who are unfamiliar with such services and

technology. However, the programme showed that human-centred design and an approach based on evidence and needs is critical for the adoption and uptake of such services and innovations by the target population. This involved periodic consultations with participants and stakeholders and working with local partners.

### 3. Leveraging local development plans to address unpaid care work

The programme shows how local planning processes offer significant opportunities to discuss local needs around unpaid care and to identify and prioritize community-led solutions through a bottom-up approach where information and leadership starts at the community level and flows up to policy and decision makers.

In Senegal, for the first time ever, six municipalities integrated women’s unpaid care work needs and solutions in their Local Development Plans (LDPs). Through a participatory process of discussion on social norms and behavioural change, communities identified critical investments for addressing women’s unpaid care needs. These investments have focused on reducing unpaid care by ensuring gender-responsive social protection coverage for rural women and girls and increasing funding for services and care infrastructure and time- and labour-saving technologies. The LDPs can help change discriminatory social norms with initiatives that raise awareness about unpaid care and domestic tasks and aim to redistribute the household responsibility for them.

TABLE 1

## Summary of the process of integrating women’s unpaid care work needs and solutions in six Local Development Plans in Senegal

Phase	Data needs and other entry points
<b>Phase 1: Diagnostic</b>	<p>Data collection at the individual, household and community level via interviews or focus groups to obtain information about:</p> <ul style="list-style-type: none"> <li>• Unpaid care needs disaggregated by sex and age; time spent on care work by sex and age and type of care work; and men’s and women’s access to and control over resources that can be used to meet care needs (e.g. income, assets, public services and infrastructure, insurance, social protection and saving mechanisms, digital technology)</li> <li>• Underlying factors leading to unequal distribution of unpaid care work in the household (by sex and age)</li> <li>• Existing and potential solutions to address unpaid care needs</li> </ul>
<b>Phase 2: Planning</b>	<p>From the needs, constraints and solutions identified in the diagnostic phase, a priority action plan (in the form of a matrix) is developed, including:</p> <ul style="list-style-type: none"> <li>• Identification of priority needs for men and women (differentiating by age when relevant and possible)</li> <li>• Identification of priority actions needed to meet the differentiated and common needs of men and women</li> <li>• Formulation of expected results</li> <li>• Budget for the priority actions selected</li> </ul>
<b>Phase 3: Validating priorities</b>	<p>Women farmer groups and women’s organizations participate effectively in the consultation and validation of the plan.</p>
<b>Phase 4: Integrating a monitoring and evaluation process in the LDP</b>	<p>Establish specific targets, indicators and mechanisms to monitor the execution of unpaid care-related activities and investments included in the LDP.</p> <p>Ensure women’s participation in LDP review, monitoring and evaluation processes.</p>

LDPs in Senegal are structured around the three pillars of the national development plan: governance, the structural transformation of the economy, and human capital – where most of the activities related to unpaid care work have been included. UN Women and the Regional Development Agency of Saint-Louis developed a step-by-step methodology to support municipalities in identifying and analysing community care needs and to develop and finance solutions through LDPs with the participation of women farmer groups and women’s organizations in their consultation and validation process.

This good practice of local policy work is meant to be scaled up at the national level in the next phase of the 3R Programme with the involvement of mayors, other government officials, regional institutions and the Ministry of Family, Social Protection and Children.

#### 4. Addressing the impacts of climate change, environmental degradation and biodiversity loss on women’s unpaid care and domestic work

The impacts of climate change and environmental degradation disproportionately affect the most marginalized women.<sup>6</sup> Clear links have been made between the exploitation of nature and the appropriation of women’s unpaid care and domestic work.<sup>7</sup> In many contexts, including Rwanda, Senegal and South Africa, many women rely on natural resources for subsistence or employment and are primarily responsible for providing all the necessary raw materials for the household to function: water, food and fuel. Therefore, the negative impacts of climate change, such as extreme weather, land degradation, deforestation, pollution and water scarcity, directly impinge on their paid and unpaid workloads, which consistently increase during climate and environmental crises and disasters, and consequently, women’s vulnerability to poverty and food insecurity also dramatically increases.<sup>8</sup>

6 UN Women. 2021. [Beyond COVID-19: A Feminist Plan for Sustainability and Social Justice](#); UN Women. 2017. CSW61 Priority Theme SG Report.

7 B.P. Resurrección. 2021. [Gender, Climate Change and Disasters: Vulnerabilities, Responses, and Imagining a More Caring and Better World](#). Background paper. CSW 66 Expert Group Meeting.

8 UN Women. 2021. [Beyond COVID-19: A Feminist Plan for Sustainability and Social Justice](#).

The 3R Programme was conscious of the care–climate nexus and intervened to support women farmers who are facing the impacts of climate change and environmental degradation through specific interventions with CSOs, women’s cooperatives and other women’s organizations.

In doing so, the programme underscored the great potential of women’s cooperatives and women’s organizations in reducing and redistributing unpaid care work – providing and strengthening Early Childhood Development (ECD) services at the community level and by supplying women with time-saving and climate-resilient equipment and technologies for food preparation and agricultural-processing, among others. These actions also improved children’s well-being at a nutritional, educational and hygiene level. In Rwanda, for example, ECD services introduced fruit trees and enlarged kitchen gardens with the aim to feed children with a balanced diet to reduce malnutrition and stunting. Moreover, monthly visits by healthcare workers were conducted to improve children’s health and general well-being.

#### 5. Gender-transformative approaches to addressing unpaid care work

To mitigate rural women’s disproportionate responsibility for unpaid care work, while it is important to support the provision of operational solutions, such as services and infrastructure, it is also essential to address the root causes of the unequal distribution of unpaid care work in rural areas to achieve long-lasting, transformative change. This can only happen by addressing the structural inequalities and unequal power relations embedded in discriminatory social norms, gender roles and practices that make women carry a disproportionate share of unpaid care work. One effective approach of the 3R Programme has been to engage men and boys at the household and community level to address unpaid care roles and responsibilities.

The Rwanda Men’s Resource Centre (RWAMREC), one of the implementing partners of the 3R Programme, has demonstrated good practice in addressing discriminatory social norms and gender stereotypes by engaging men and boys at both the household and community levels through a gender-transformative approach. RWAMREC operates in the communities through the promotion of behavioural change and positive masculinity in the context of the 3Rs of unpaid care work. The project used



two combined approaches: i) a gender-transformative approach aimed at creating safe spaces for couples to dialogue on unpaid care and domestic work responsibilities and to challenge the rigid gender norms that limit men's participation in care work, contribute to gender-based and domestic violence, and undermine women's agency and autonomy, and ii) a gender-transformative module encouraging young people to critically reflect on gender norms, stereotypes and power relations. This combination of approaches has been proven to result in a more balanced share of unpaid care and domestic work tasks among men and women and boys and girls, a reduction of gender-based and domestic violence, an increase in self-esteem and self-confidence among women, higher participation of women in income-generating activities, more shared decision-making about property, and legalization of marriages.

Similarly, work through Men Engage Clubs and Youth for Change Clubs was crucial in addressing gender inequalities and behavioural change, as was engagement with and support from local leaders to create sustainable change in their communities. A focus on fatherhood was important to encourage men to participate in the proposed activities and increase their involvement in care and domestic tasks and responsibilities. The intervention provided a great opportunity to initiate behavioural change; however, given that behavioural change requires long-term and larger-scale implementation, ongoing work is needed to consolidate and scale up the results.

In Senegal, the gender-transformative approach adopted at the local level allowed the strengthening of the commitment of men and boys from communal youth councils and leaders of village chiefs' associations and neighbourhood delegates to the elimination of discriminatory social norms and the reduction of women's disproportionate share of unpaid care in the 13 municipalities involved in the 3R Programme. A pool of 58 community networks made it possible to inform and sensitize more than 959 of their peers on themes related to (i) the equal economic participation of men and women and (ii) the constraints of unpaid care work on the economic empowerment of women.

## 6. Leveraging local platforms for policy transformation: the Men's Parliament movement

In South Africa, in collaboration with the local partner Azali Health Care, the 3R Programme leveraged the approach used by the Takuwani Riime Men's Movement to set the foundation for a substantive transformation at the community level for the recognition, reduction and redistribution of unpaid care work.

The Takuwani Riime Men's Movement supports a biennial national Men's Parliament at the Parliament of the Republic of South Africa, which provides a platform for men to discuss organizational and skills development, leadership and sustainability of the men's civil society movement, and explore opportunities for partnerships with development partners, business and government.

The 3R Programme proposed incorporating the 3Rs of unpaid care work in local municipalities' Men's Parliaments and Traditional Councils, which are community mechanisms designed as a bottom-up consultation model, enabling men to help define solutions that will be conveyed and discussed at various levels.

Through the Men's Parliaments, the programme reached the targeted communities, including men and boys, with the goal of soliciting policy reforms from government and inspiring transformative behavioural change for the recognition, reduction and redistribution of unpaid care work. This intervention involved different local actions such as: enhancing the sharing with different stakeholders of evidence-based information on the inequitable distribution of unpaid care work; facilitating relevant trainings and awareness-raising activities; building strategic partnerships and alliances; and identifying communities' unaddressed care needs and making proposals to government and partners for more targeted programming and coordination to optimize the outcomes of investments.

# LESSONS LEARNED AND RECOMMENDATIONS

## Lessons learned

The main lessons learned from the 3R Programme underscore the importance of consultations and engagement with programme participants in design, implementation and monitoring; the development of partnerships for solutions to address gender inequalities and enable women's empowerment; providing adequate time to implement capacity development and behavioural change activities; and the critical involvement of both the public and private sectors to promote women's economic empowerment and resilience, especially of those in the most vulnerable situations.

The key lessons learned include the following:

- **In all three countries, interventions focusing on discriminatory laws and policies are of huge importance for achieving gender equality and women's empowerment.** Conveying relevant data, evidence and knowledge about the social norms, power relations, and cultural values at the grassroots level to the stakeholders involved in policy and law reforms is important for them to understand and address unpaid care work issues.
- **Mobilizing women, the most marginalized in particular, including through self-help groups, and providing space for empowerment boosts their social skills** such as leadership, communication, negotiation, teamwork, decision-making and others that are critical for increasing access to decent work and entrepreneurship opportunities.
- **The 3R Programme catalyzed the key enablers of women's economic empowerment** such as shifting gender roles, improving understanding of unpaid care work and how it compromises women's economic opportunities, and understanding the connections between women's economic empowerment and the welfare and education of children and the quality of life in households.
- **In Rwanda and Senegal, the achievement of programme targets can be attributed to the timely provision and high relevance and quality of products and services provided to programme participants,** which responded to the specific needs of women and their households and communities.
- **In all three countries, the achievement of programme targets can be attributed to strong strategic partnerships** developed with governments and non-governmental organizations.
- **The pivotal role of both the public and private sectors in promoting gender equality and women's empowerment should be emphasized,** while proactively using existing UN system opportunities to promote the development of innovative public-private partnerships.

## Recommendations

Recommendations for the subsequent phases of programming include supporting enabling policies and legal frameworks, data and evidence collection for advocacy, policy dialogues at both local and national levels, the geographical scaling-up of the intervention and shifting from the 3R framework (Recognize, Reduce and Redistribute unpaid care work) to the 5R framework (Recognize, Reduce and Redistribute unpaid care work and Reward and Represent paid care work)<sup>9</sup> by promoting decent work and social protection, and supporting paid care workers' representation, social dialogue and collective bargaining.<sup>10</sup>

9 ILO. 2018. [Care work and care jobs for the future of decent work](#). Geneva: ILO.

10 UN Women. 2022. [A toolkit on paid and unpaid care work: From 3Rs to 5Rs](#). New York: UN Women.

### The key recommendations are:

- **Adopt participatory, bottom-up approaches ensuring the participation of women**, women's organizations and cooperatives, CSOs and local authorities and community leaders throughout all stages of the programme cycle.
- **During the inception phase of the intervention, carry out research and analysis** to generate data and evidence to fill knowledge gaps on unpaid care work and the root causes of gender inequality in the targeted geographical areas and populations.
- **Focus on policy advocacy and development** that targets provision of services, social protection and basic infrastructure, promote the equitable sharing of unpaid care and domestic work between men and women, and create more decent paid jobs in the care economy.
- **Build on the successful local-level advocacy and policy interventions from the first phase of the programme and scale them up** to the national level to coordinate and advocate with governments and other stakeholders, including CSOs experienced in this area of work.
- **Work directly with the national governments** to foster greater understanding and awareness of the care economy and unpaid care work and greater ownership of programme objectives and results.
- **Implement capacity-development programmes for national and local stakeholders to improve advocacy for policies to address unpaid care work** based on capacity gap assessments and standardized capacity-building modules with adequate duration and follow up.
- **Develop policy dialogues to introduce the 5R framework and support women's leadership** to promote the 5Rs at the community level and in local and national policies through targeted training on improving the terms and conditions of women's participation in the care economy.
- **Design and implement innovative approaches**, such as microinsurance and digital solutions, based on research and analysis of solutions to address unpaid care work.
- **Ensure the provision of holistic packages of transformative solutions**, including time- and labour-saving equipment, such as water pumps, environmentally-friendly cook stoves and food warmers, as well as childcare services and infrastructure, identified in consultation with women's groups and cooperatives.
- **Identify and explore potential partnerships with private sector entities**, such as companies and foundations, in sub-Saharan Africa potentially interested in collaborating and funding interventions on the care economy and unpaid care work.
- **Work with custodians of cultural traditions and faith leaders** to address discriminatory social norms that perpetuate the inequitable distribution of unpaid care work.
- **Engage men and boys** to change current social norms and gender roles around valuing and equitably sharing unpaid care work.
- **Integrate the care–climate nexus** in policies and programming to address the needs and problems that arise from the negative impacts of climate change, such as extreme weather, land degradation, deforestation, pollution and water scarcity, on women's and girls' unpaid care work loads.
- **Consider the intersection of care and gender-based and domestic violence**, especially in capacity-building and awareness-raising activities, as well as in the creation of adequate infrastructure and services.
- **Integrate interlinkages between unpaid care work and other thematic areas**, such as water, sanitation and hygiene, political participation, education and early childhood development, technology and innovation.
- **Build on regional dialogues and alliances** to develop new partnerships and opportunities for collaboration, and inspire programmatic improvement through capacity-building and sharing experiences.

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