



TRANSFORMING CARE SYSTEMS FOR EQUALITY AND SHARED PROSPERITY

TransformCare 2025 ANNUAL REPORT



TransformCare
GLOBAL INITIATIVE

TRANSFORMING CARE SYSTEMS FOR EQUALITY AND SHARED PROSPERITY

TransformCare 2025 Annual Report

ECONOMIC EMPOWERMENT SECTION
UN WOMEN

New York, September 2026

CONTENTS

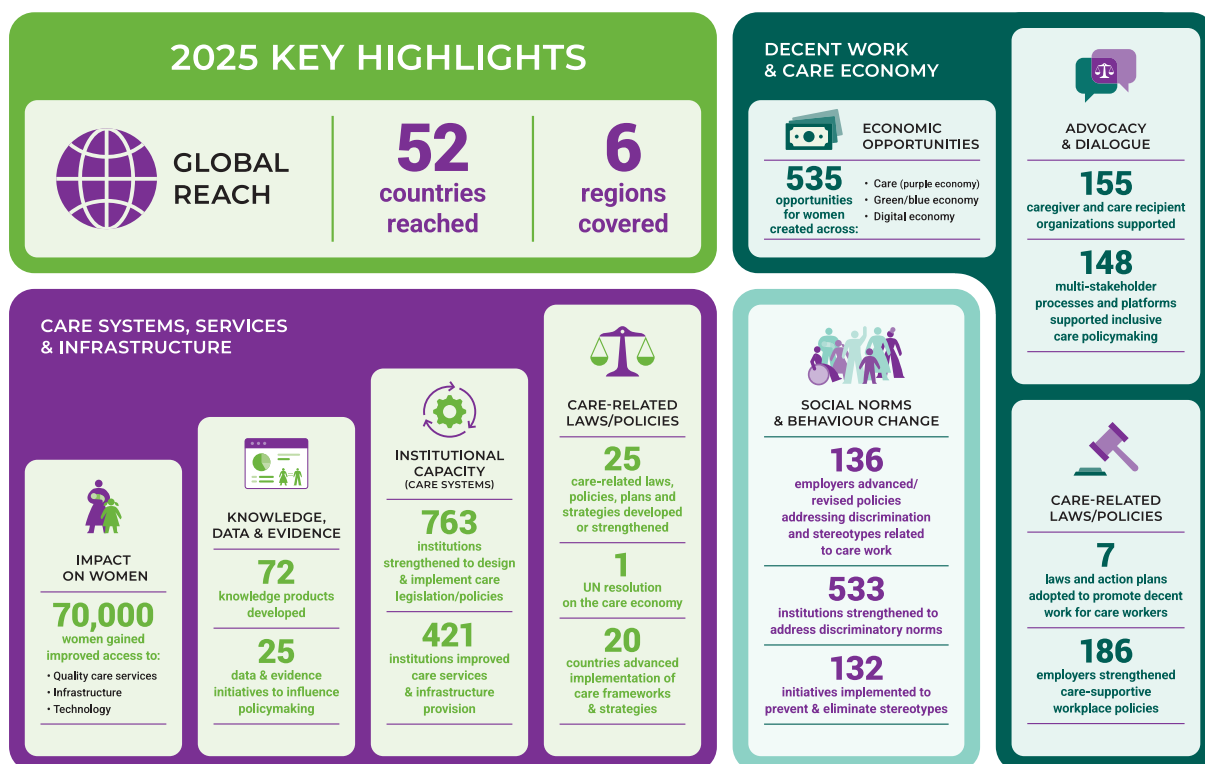
TRANSFORMCARE: 2025 AT A GLANCE	7
INTRODUCTION: WHY CARE MATTERS	8
TRANSFORMCARE GLOBAL INITIATIVE: VISION, SCALE AND IMPACT	9
TRANSFORMING CARE SYSTEMS: 2025 RESULTS	13
Outcome 1: Increased quality and low-carbon care-supporting services, basic infrastructure and energy-saving technology, especially benefiting women and girls in low-income and rural households.	13
Outcome 2: Creation of decent jobs in the purple economy and increased access to jobs in the green and digital economies, especially benefiting informal workers and domestic workers, including women migrant workers.	23
Outcome 3: A shift in social norms to consider care work (unpaid and paid) as valuable and skilled work, and as a shared responsibility within households and between households, the State, businesses and communities.	32
PARTNERSHIPS DRIVING TRANSFORMCARE RESULTS IN 2025	38

TRANSFORMCARE: 2025 AT A GLANCE

TransformCare is UN Women's global initiative that addresses the undervaluing and unequal division of care work (paid and unpaid) to improve the lives of women and girls worldwide.

Building on and leveraging previous and ongoing UN Women programmes supported by partners, TransformCare enables a large-scale, long-term, multi-partner response to advance systemic change through coordinated action at global, regional and

country levels. Grounded in context-specific country and regional interventions with a strong global component, TransformCare operates in over 50 countries across 6 regions, representing over two thirds (67 per cent) of the global population.¹



INTRODUCTION: WHY CARE MATTERS

Care underpins the well-being of people, societies, economies and ecosystems. Everyone will receive or provide care at some point in their lifetime. Without unpaid and paid care work, our societies and economies would grind to a halt. If given a monetary value, unpaid care work alone would represent at least 9 per cent of global Gross Domestic Product (GDP).² Yet the social and economic value of the care economy is largely overlooked in national statistics, policies and budgets.

Care work (paid and unpaid) is predominantly provided by women and girls. Globally, they undertake more than 2.5 times as many hours a day as men on unpaid care work.³ Despite being essential to the well-being of people and the planet, unpaid care work remains largely unrecognized, overlooked in public policy and the market economy, while paid care work remains undervalued, underpaid and perceived as unskilled work. Discriminatory social norms and gender stereotypes continue to portray care work as ‘women’s work’ and as a private responsibility, reinforcing roles of

women as primary caregivers and men as primary income earners, and limiting the recognition of care as a shared societal responsibility across families, communities, governments and the private sector.

At the same time, demographic shifts, including ageing populations and rising chronic health conditions, alongside increasing climate and conflict-related pressures, mean an estimated 2.3 billion people will require care by 2030.⁴ Strengthening care systems⁵ is essential to meet these growing needs and to address broader social and economic challenges.

According to the UN system policy paper on [Transforming Care Systems](#), a care system “involves legal and policy frameworks, services, financing, social and physical infrastructure, programmes, standards and training, governance and administration, and social norms... working in an integrated and deliberate way, with the aim of implementing a new social organization of care to assist, support and care for people and the environment, as well as recognizing, reducing and redistributing, rewarding and representing care work from a gender, intersectional and human rights perspective in a way that fosters co-responsibility between genders and between households, the State, the market, families and the community.”

Investing in care systems is a triple win for women, society and the economy. It could generate nearly 300 million decent jobs by 2030,⁶ while increasing labour force participation and strengthening public revenues. Every \$1 invested in closing childcare policy gaps could yield \$3.76 in global GDP by 2035, while boosting women’s employment rate by more than 10 percentage points.⁷ Care jobs also have the potential to be green jobs: an average care sector job produces 26 times less greenhouse gas than a manufacturing job.⁸

Transforming care systems is a precondition for Sustainable Development Goal 5 (Gender Equality and empower all women and girls) target 5.4 on care.⁹ It is also a key driver with proven multiplier effects to accelerate progress on the 2030 Agenda for Sustainable Development, including Goals 1 (No Poverty), 8 (Decent Work and Economic Growth) and 10 (Reduced Inequalities), fostering just, prosperous and sustainable economies. **Comprehensive care systems provide the foundations for gender equality and women’s economic empowerment, as well as for social and economic development and shared prosperity.**

TRANSFORMCARE GLOBAL INITIATIVE: VISION, SCALE AND IMPACT

TransformCare is UN Women's global initiative that addresses the undervaluing and unequal division of care work (paid and unpaid) to improve the lives of women and girls worldwide.

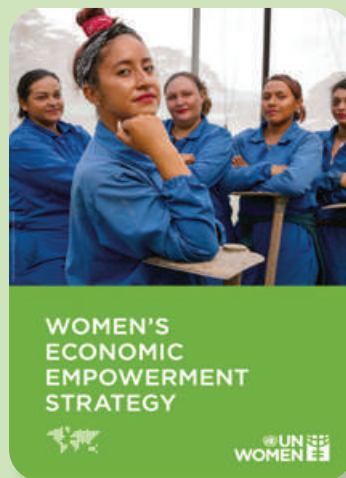
Through TransformCare, UN Women is advancing a vision of care as central to thriving, sustainable and just economies; societies in which care is valued as a public good, recognized as skilled and essential work, and understood as the foundation of equality and shared economic prosperity.

Anchored to UN Women's [Strategic Plan \(2026–2029\)](#), it serves as a core pillar of the [Women's Economic Empowerment Strategy](#). Building on

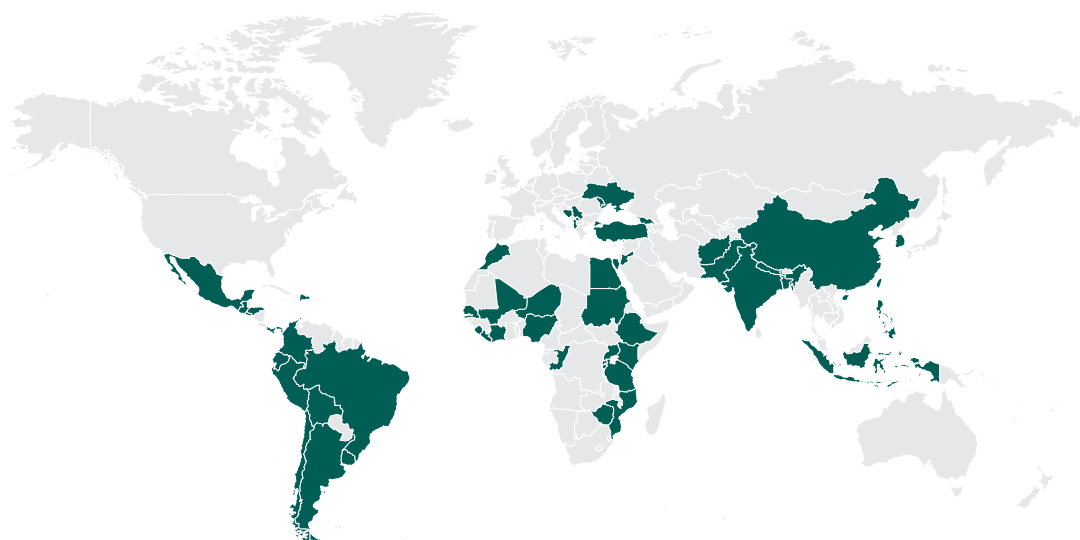
and leveraging previous and ongoing UN Women programmes, TransformCare enables a large-scale, long-term, multi-partner response to advance systemic change. Grounded in context-specific country and regional interventions with an overarching global component, TransformCare operates in over 50 countries across 6 regions, representing over two thirds (67 per cent) of the global population.



TransformCare
GLOBAL INITIATIVE



TRANSFORMCARE COUNTRIES



Asia and the Pacific		Europe and Central Asia		East and Southern Africa		West and Central Africa		Americas and the Caribbean			Arab States
Afghanistan	Nepal	Albania	Republic of Moldova	Burundi	Sudan	Côte d'Ivoire	Nigeria	Argentina	Dominican Republic	Honduras	Egypt
Bangladesh	Pakistan	Bosnia and Herzegovina	Serbia	Ethiopia	Tanzania	DR Congo	Senegal	Bolivia	Ecuador	Mexico	Jordan
China	Philippines	Georgia	Türkiye	Kenya	Uganda	Liberia	Sierra Leone	Brazil	El Salvador	Panama	Morocco
India	Republic of Korea	Kosovo	Ukraine	Mozambique	Zimbabwe	Mali		Chile	Guatemala	Peru	
Indonesia	Timor Leste			Rwanda		Niger		Colombia		Uruguay	

BY INVESTING IN THESE COUNTRIES OVER A 10-YEAR PERIOD, BY 2035 TRANSFORMCARE HAS THE POTENTIAL TO CONTRIBUTE TO:



Enabling systemic
impact for
2.9
billion
women and girls



Generating at least
260
million
decent jobs for women



Releasing more than
10
trillion hours
of women's and girls' time

To do so, TransformCare advances three interlinked global outcomes and three main change pathways:

KEY OUTCOMES

■ OUTCOME 1

Increased quality and low-carbon care-supporting services, basic infrastructure and energy-saving technology, especially benefiting women and girls in low-income and rural households.

■ OUTCOME 2

Creation of decent jobs in the purple economy and increased access to jobs in the green and digital economies, especially benefiting women informal workers and domestic workers, including women migrant workers.

■ OUTCOME 3

A shift in social norms to consider care work (unpaid and paid) as valuable and skilled work, and as a shared responsibility within households and between households, the State, businesses and communities.

CHANGE PATHWAYS



GOVERNMENTS AND INTERGOVERNMENTAL INSTITUTIONS

- ▶ Adopt and implement normative and policy frameworks that recognize, reduce, redistribute, reward and represent care work.
- ▶ Collect care-related data that are used to inform policymaking and budgeting.
- ▶ Increase sustainable financing for care systems, services and infrastructure.



BUSINESSES

- ▶ Adopt standards, certification and training that support quality care services and decent work.
- ▶ Implement care-supporting workplace policies, practices and services.
- ▶ Adopt advertising practices, standards and campaigns.



CAREGIVERS AND CARE RECIPIENTS

- ▶ Meaningfully engage in, and influence the outcome of, social dialogue and policymaking processes.
- ▶ Have the ability and processes to claim their rights in the workplace.
- ▶ Shape and take part in social norms change initiatives.

Leveraging UN Women’s triple mandate – normative standard-setting, operational programming, and coordination – the initiative aligns efforts across regions and thematic priorities, bringing impact at scale while remaining flexible and responsive to

diverse national contexts and country-led priorities. It integrates the care agenda with key adjacent policy areas such as the macroeconomy, decent work, climate resilience and adaptation, migration, disability, and conflict and crisis.



Normative



UN System coordination



Operational

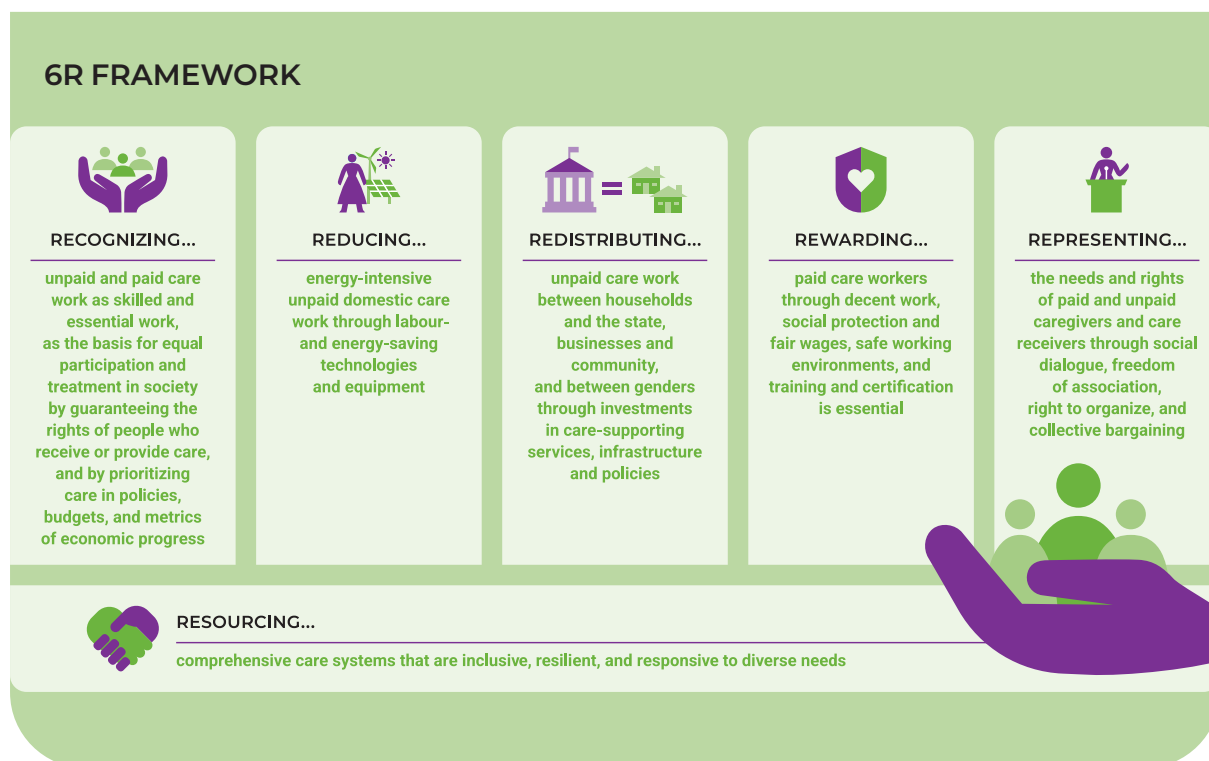
TransformCare

2025 ANNUAL REPORT

> 11

Guided by the UN System policy paper [Transforming Care Systems in the Context of the Sustainable Development Goals and Our Common Agenda](#), the initiative is grounded in the 6R Framework: recognizing, reducing and redistributing unpaid care work, while rewarding paid care workers with

decent conditions and ensuring the representation of caregivers and care recipients. Achieving this depends on resourcing inclusive, resilient care systems that enable equitable participation in society.



In 2025, through TransformCare, UN Women supported the creation of enabling environments for transforming care systems by combining policy advocacy, thought leadership, technical assistance and programme implementation with robust evidence generation and practical knowledge tools that inform decision-making. Selected highlights from the year are presented below against the three global outcomes.

TRANSFORMING CARE SYSTEMS: 2025 RESULTS

OUTCOME 1:

INCREASED QUALITY AND LOW-CARBON CARE-SUPPORTING SERVICES, BASIC INFRASTRUCTURE AND ENERGY-SAVING TECHNOLOGY, ESPECIALLY BENEFITING WOMEN AND GIRLS IN LOW-INCOME AND RURAL HOUSEHOLDS.

Output 1.1: The capacity of institutions is strengthened to develop, finance and/or implement care-supporting laws, systems, policies, services, infrastructure and technologies.

Output 1.2: Research, data and tools are developed and used to support, assess and track the provision of quality care services, infrastructure and technologies.

2025 KEY HIGHLIGHTS

In 2025, **UN Women's technical support** contributed to significant progress in transforming care systems across multiple levels. Institutional capacities were strengthened, enabling **adoption of 2 care-related laws, 23 multisectoral policies and action plans and 1 UN resolution on the care economy**, while **20 countries** advanced implementation of care frameworks and strategies. In parallel, **763 institutions enhanced their capacities** to design and implement care-related legislation and policies,

and **421 institutions improved the provision and accessibility** of care services and infrastructure.

Expanded research, data and tools – reflected in **72 knowledge products and 25 data and evidence initiatives** – supported more informed policy design, financing strategies and service provision.

Through programmes and platforms supported by UN Women, around **70,000 women** were able to access quality care services, infrastructure and technology.

CARE SYSTEMS, SERVICES & INFRASTRUCTURE



MAIN RESULTS

Across global, regional and national contexts there was tangible progress towards transforming care systems. Ranging from legal reform and policy development to data systems and service delivery, the examples below reflect regions' and countries' diverse priorities and different stages of care system transformation.

At global level, UN Women's technical support advanced the normative agenda on care through the adoption of key resolutions and frameworks.

In November 2025, care gained increased visibility as a development priority through a landmark resolution ([A/RES/80/152](#)) on 'The Care Economy and its Contribution to Sustainable Development', adopted by the UN General Assembly Second Committee, with UN Women serving as Secretariat to the process. The first-ever global UN resolution to link the care economy with poverty reduction and macroeconomic outcomes, it calls on Member States to strengthen care systems, protect the rights of care recipients and caregivers, and to recognize, reduce and redistribute unpaid care work to advance gender equality. This achievement was built on a series of intergovernmental milestones throughout the year, including:

- The adoption of 'Recognizing and strengthening care and support systems to achieve gender equality and the empowerment of all women

and girls' as the priority theme for the 72nd session of the Commission on the Status of Women (CSW72).

- The inclusion of care in the outcomes of the Second World Summit for Social Development (WSSD2).
- The launch of the Sevilla Platform for Action initiative on [Investing in Care for Equality and Prosperity: A Global Initiative to Advance Gender-Responsive Financing for Development](#) at the [Fourth International Conference on Financing for Development \(FfD4\)](#).

Care also gained prominence at regional level, with important advancements in the recognition of care as a human right.

In Latin America and the Caribbean (LAC), in August 2025 ministers and high-level authorities adopted the [Tlatelolco Commitment](#) during the XVI Regional Conference on Women in Latin America and the Caribbean, organized by the United Nations Economic Commission for Latin America and the Caribbean (ECLAC) in coordination with UN Women, under the presidency of the Government of Mexico. The agreement recognizes care as a human right and launches a [Decade of Action \(2025–2035\)](#) to advance gender equality and a care society as a new paradigm for sustainable development, prioritizing the care of people and the planet.



Participants in the Adoption of the Tlatelolco Commitment at the XIV Regional Conference on Women in Latin America and the Caribbean. Photo: UN Women/Ismael Jiménez.

Also in the LAC region, the Inter-American Court of Human Rights issued its landmark [Advisory Opinion OC-31/25](#) recognizing care as an autonomous right, including the right to be cared for, to provide care, and to self-care. This progress shaped the [Bi-regional Pact on Care](#), endorsed at the IV CELAC–EU Summit (Santa Marta, 2025) by the European Union and 17 Latin American and Caribbean countries. The Pact establishes a framework for regular bi-regional dialogue and cooperation to strengthen comprehensive care systems, improving their quality, inclusiveness, accessibility and financial sustainability, while advancing well-being, gender equality and social justice. It also promotes cooperation at subregional, regional and multilateral levels.

At the country level, governments translated commitments into concrete legislative, policy and institutional reforms that recognize care as a public good and lay the foundations for comprehensive care systems.

In **Albania**, the [Gender Equality Law](#) adopted in November 2025 recognizes unpaid care and domestic work as a contributor to societal well-being and economic development. The law establishes care as a governance, labour and social protection priority, creating binding obligations for national institutions, employers and local governments.

In **Colombia**, the [National Care Policy](#) adopted in February 2025 sets out 133 concrete measures across 34 government entities and 15 ministries. This milestone builds on sustained technical support from UN Women to establish the National Care System in 2023.

In **Kenya**, under the leadership of the State Department for Gender and Affirmative Action, the National Steering Committee drove the finalization, validation and submission of Kenya's first [National Care Policy](#), which was approved in December 2025. UN Women participated in the committee alongside representatives from academia, civil society organizations, private sector institutions, development partners and care practitioners.



National Stakeholder Convening on Nigeria's National Care Policy, June 2025. Photo: International Center for Research on Women.



Marie Claire Uwizeyimana from Musanze District, Rwanda, used to wake up at 3am to fetch water from a distant valley, a round trip of seven to eight hours. Today, equipped with a water tank, she has regained that time and now invests it in the pursuit of economic prosperity. Photo: UN Women Rwanda.

The policy's inclusion in the Medium-Term Plan IV (2023–2027) further institutionalizes the care agenda within the country's broader development framework, enabling coordinated and multisectoral implementation across government.

In **Nepal**, led by the National Planning Commission, a multi-stakeholder and interministerial Care Working Group was formed and generated robust data on the care economy, highlighting deficits in care, women's disproportionate unpaid care workload, and the job creation potential of the care economy. These efforts informed care-related priorities in the 16th periodic plan and supported the development of the Draft National Integrated Care Policy with technical assistance from UN Women and the International Labour Organization (ILO).

Beyond policy development, countries expanded access to care-related services, infrastructure and technology that help reduce the time and labour intensity of indirect care and domestic work.

In **Rwanda**, women's cooperatives supported by UN Women have improved access to energy-efficient cooking stoves and water tanks across five districts (with 780 stoves and 118 tanks distributed in 2025). A [2025 rapid impact assessment](#) showed an 80 per cent reduction in fuelwood consumption, a reduction in time spent collecting firewood of 3.5 days per household per week, and daily water collection time savings of 1–2 hours for 80 per cent of respondents. Persons with disabilities reported even greater gains, saving up to 4.5 days per household per week.

At the same time, countries strengthened the evidence base to build a stronger case for sustained public and private investment in care systems as a driver of gender equality and shared prosperity.



UN Women Bangladesh and the Bangladesh Bureau of Statistics (BBS) launch the country's official Household Production Satellite Account (HPSA) through the event 'Dissemination of Unpaid Household Production Satellite Account of Bangladesh'.
Photo: UN Women/Sohel Ali Sohel.

In **Bangladesh**, with UN Women's support, the Bangladesh Bureau of Statistics launched the country's first Household Production Satellite Account in September 2025, measuring the economic value of unpaid household and care work. This follows a landmark government commitment in the 2025–2026 national budget to include women's unpaid labour in GDP calculations.

In **Egypt**, the Ministry of Social Solidarity completed the country's first national survey of nurseries, generating a detailed picture of the childcare ecosystem. The survey identified gaps and opportunities to inform policy and strengthen interventions by different actors. Findings highlighted the need for increased investment, stronger governance and regulatory frameworks, workforce development, and more equitable access to early childhood services.

In **India**, under the TransformCare Investment Initiative Asia-Pacific (TCII-AP) Regional Learning Facility, UN Women strengthened stakeholder capacities on care financing and investment, informing the development of a policy paper on financing care systems in India. The initiative also generated evidence on scalable care delivery models and expanded India's engagement in the Global Alliance for Care through the onboarding of 12 members to support knowledge sharing.

In **Mozambique**, UN Women supported the National Institute of Statistics and the United Nations Economic Commission for Africa (UNECA) to implement the country's first pilot time-use survey, with full data collection scheduled for January 2026. The initiative strengthened national statistical capacity by training 14 professionals in care economy analysis and 17 enumerators in time-use methodologies, gender equality, disability inclusion, and Protection from Sexual Exploitation and Abuse (PSEA). As a result, Mozambique now has an expanded pool of trained experts and an operational foundation to generate high-quality data on unpaid care work, supporting evidence-based, gender-responsive and disability-inclusive policymaking.

In **Nepal**, UN Women contributed to advancing the Care Geographic Information System as an innovative tool to inform care delivery prototypes and pilot initiatives with Kathmandu Metropolitan City, helping translate data into practical planning and service improvements.

In **Nigeria**, the country's first standalone time-use survey, supported by UN Women, provided critical data on unpaid care work and informed the development of national and sub-national policies. With UN Women's technical support, the [Cross River State Technical Working Group](#) was established in 2025 and is leading the development of State Care Policy for launch in 2026.

Examples of progress in other countries where governments and local authorities are advancing a range of policy, institutional and programmatic reforms with technical support from UN Women include:

Advancing policy and legal frameworks

- **El Salvador:** Operationalization of the 2024–2029 Action Plan of the National Policy on Shared Responsibility for Care and the development of local care plans in Santa Ana and San Martín.
- **Guatemala:** Implementation of national care system strategy.
- **Honduras:** [Draft Comprehensive Care System](#) Bill developed.
- **Mexico:** Care objective incorporated into [National Development Plan 2025–2030](#).
- **Senegal:** Roadmap and financing framework for early childhood care developed.
- **Sierra Leone:** Care-related priorities integrated into the draft Gender in Agriculture and Food Security Policy.

Strengthening institutions and governance

- **Argentina:** Inter-institutional care mechanisms created in Neuquén and research informed the draft Municipal Care Pilot Plan.
- **Dominican Republic:** Capacity strengthening of the National Council for the Elderly (CONAPE) to improve care services for older persons.
- **Mali:** National Care Committee established to implement the 2024 national care roadmap.
- **Timor-Leste:** First National Working Group on Care established.

Expanding evidence and data

- **India:** Evidence generated on financing care systems and scalable care services delivery models.
- **Republic of Moldova:** Time-use survey module integrated into Labour Force Survey by the National Bureau of Statistics.

Advancing local care systems and services

- **Afghanistan:** Integration of care facilities into programmes for returnee women.
- **Philippines:** Advancements in local care policy development in Quezon City.
- **Türkiye:** Care-sensitive approaches advanced within the Ankara Metropolitan Municipality.

To accelerate the scale-up of transformative and care-responsive initiatives, UN Women strengthened the care agenda in 2025 through the development of global practical tools, normative guidance, strategic knowledge products and targeted capacity-building initiatives.

Collectively, these efforts enhanced institutional capacities, addressed critical evidence and policy gaps, and supported governments and partners in designing, financing and implementing integrated and inclusive care systems across development, humanitarian and crisis contexts.

At the global level, UN Women developed the first-of-its-kind [Guidance Note on Addressing Care in Times of Conflict and Crisis](#) to support policymakers, practitioners and researchers working in conflict- and crisis-affected contexts. The guidance provides practical, evidence-based approaches and tools to better understand and respond to shifting care dynamics across the humanitarian–development–peace nexus, from prevention and preparedness through to sustainable recovery and peace.

To strengthen financing for care systems and gender equality, UN Women in partnership with the Asian Infrastructure Investment Bank (AIIB) and the Finance in Common Summit (FICS) Gender Coalition developed the [Financing Care Infrastructure](#) report, bringing together insights and technical expertise from public development banks and key stakeholders to strengthen understanding of how strategic investments in accessible, affordable and quality care infrastructure can advance gender equality, foster prosperity and build more resilient economies.

In 2025 UN Women also launched the [Engendering Fiscal Space](#) tool, supporting governments and stakeholders to identify and mobilize sustainable financing pathways for transformative care investments.

These efforts were complemented by the development of 69 regional and country-based knowledge products, expanding the evidence and practical guidance available to policymakers and practitioners. Key publications can be accessed through the [UN Women website](#).



Institutional capacity to design, finance and implement gender-responsive care systems was further strengthened through the rollout of ‘Transforming Care Systems’ global training.

More than 120 participants in over 50 countries, as well as 55 representatives from governments and partners across 21 institutions, completed the training, strengthening capacity to position care as both an economic and public policy priority and to

accelerate its integration into national development planning processes. In **West and Central Africa**, for instance, the Economic Community of West African States (ECOWAS) developed a Regional Care Action Plan following capacity-building dialogues with officials and gender focal points from 12 Member States. These efforts were supported by the UN Women Feminist Economists Taskforce, which played a pivotal role in advancing norms on women’s economic empowerment across the region.



ECOWAS regional dialogue with representatives from Member States in West and Central Africa. Photo: UN Women/ Abdoul Ahad Thiam.

IMPACT STORIES

BUILDING A CARE SYSTEM THROUGH SOCIAL DIALOGUE: CHILE’S FIRST NATIONAL CARE POLICY

Chile has made significant progress in advancing care as a public policy priority. Recognizing the essential role care plays in sustaining families, communities and the economy, the country embarked on an ambitious effort to build a National Care System grounded in the

experiences and needs of caregivers and care recipients. To ensure that the future system reflects Chile’s diverse realities, the Government launched an unprecedented national consultation process that placed citizens at the centre of policymaking.

Listening to communities to transform care

UN Women provided technical assistance to the Government of Chile in designing, implementing and systematizing ‘Hablemos de Cuidados’ (Let’s Talk About Care), a nationwide participatory initiative carried

out in partnership with the Undersecretariat of Social Services. Across all 16 regions of the country the initiative engaged 12,614 participants, the majority of whom were women. Through dialogues, workshops

and consultations, caregivers, care recipients, women's organizations, local authorities and community members shared their experiences, concerns and proposals for improving care services and support systems. UN Women helped ensure that the process was inclusive, evidence-based and aligned with international standards. Technical assistance also strengthened the integration of gender-responsive approaches, elevating perspectives

that have historically been underrepresented in public policy discussions. The evidence generated provided policymakers with a comprehensive understanding of care needs and reinforced the importance of recognizing care as a shared responsibility among the State, communities, families, the private sector and society as a whole.

From dialogue to policy change

The participatory process laid the foundation for a major policy milestone. In 2025, Chile adopted its first National Care Policy (2025–2030) and the first National Support and Care Plan, led by the Ministry of Social Development and Family and the Ministry of Women and Gender Equity. The policy establishes a roadmap for creating the institutional and political conditions needed to

progressively build a National Care System. It advances the right to care and promotes a new social organization of care based on shared responsibility. In early 2026, Chile enacted the historic [Chile Cuida](#) (Chile Cares) law, establishing the right to care and providing the legal basis for the country's new National Care System.



Participants at one of the 'Hablemos de Cuidados' (Let's Talk About Care) dialogues in Chile, which helped shape the country's National Care Policy. Photo: Universidad de Atacama.

Lessons learned

Chile's experience demonstrates that care policies are stronger and more sustainable when they are rooted in territorial realities and shaped through meaningful participation. Engaging local governments, women's organizations, caregivers and care recipients not only strengthens policy design but also builds public ownership and support for implementation.

Moving forward, successful implementation of the National Support and Care Plan involves translating policy commitments into accessible, quality care services and support systems. As Chile advances the development of its National Care System, it demonstrates how participatory policymaking can help transform care from a private concern into a public priority.

FROM EVIDENCE TO INVESTMENT: ADVANCING CARE SYSTEMS IN KATHMANDU, NEPAL

As the population of Kathmandu continues to grow, integrating care into urban planning and public investment has become increasingly important. Limited access to affordable and quality care services affects women's ability to participate in education, paid employment, entrepreneurship and public life, while increasing the

time they spend on unpaid care and domestic work. In response, city officials at Kathmandu Metropolitan City and development partners have been advancing efforts to strengthen care systems and ensure that care is recognized as a key component of inclusive and gender-responsive urban development.

Making care visible in urban development

Recognizing this opportunity, UN Women partnered with the ILO to strengthen the evidence base for care investments and support policymakers in integrating care into urban development agendas. Using the [UN Women-ILO Costing and Investment Tool](#), partners generated [critical evidence](#) on the economic and social returns of investing in care. The findings helped shift the policy conversation by demonstrating that care is not only a social issue but also a strategic investment that can support women's economic participation,

strengthen communities and contribute to more inclusive urban development.

The evidence informed national policy dialogue and contributed to the establishment of a [National Care Working Group](#), under the leadership of the National Planning Commission of the Government of Nepal, bringing together government stakeholders to advance the care agenda and identify opportunities for action.

Turning evidence into public investment

The most significant result emerged at the city level. In 2025, Kathmandu Metropolitan City allocated 2 million Nepalese rupees (approximately \$13,160) to pilot integrated urban care services. The investment will support community childcare centres and expand access to care services for women workers and their families. The initiative also catalysed broader action. National

and local stakeholders, including governmental entities, collaborated to develop geospatial analyses of care demand and supply, as well as standardized care service delivery guidelines. These tools are helping policymakers to identify service gaps, prioritize investments and design more responsive care systems.

Lessons learned

Kathmandu's experience demonstrates how evidence can drive policy change and unlock public investment. By combining robust data, technical expertise and strategic partnerships, UN Women helped position care as an essential component of urban development rather than a private household concern. Building on this momentum,

stakeholders are preparing to pilot proximity-based care models designed to reduce women's time poverty and expand access to quality services. Kathmandu offers a promising example of how cities can translate evidence into action and place care at the centre of inclusive, sustainable and gender-responsive development.

OUTCOME 2:

CREATION OF DECENT JOBS IN THE PURPLE ECONOMY AND INCREASED ACCESS TO JOBS IN THE GREEN AND DIGITAL ECONOMIES, ESPECIALLY BENEFITING INFORMAL WORKERS AND DOMESTIC WORKERS, INCLUDING WOMEN MIGRANT WORKERS.

Output 2.1: Caregivers and care recipients have enhanced capacities to influence social dialogue and policymaking processes and claim their rights in the workplace.

Output 2.2: The capacity of employers is enhanced to provide care-supporting workplace policies, practices and services and adopt standards for decent work conditions for paid caregivers.

2025 KEY HIGHLIGHTS

In 2025, UN Women's technical support contributed to the adoption of **6 multisectoral policies and action plans and 1 law promoting decent work for care workers**, while **186 employers strengthened care-supportive workplace policies and practices**. **In parallel, 155 caregiver and care-recipient organizations were supported** to influence norms and standards in the care economy, alongside

26 dedicated mechanisms and 122 broader multi-stakeholder dialogue processes that advanced inclusive policymaking. Additionally, **341 institutions strengthened capacities to improve care services and infrastructure**, and **535 economic opportunities** were created across the care (purple), green/blue, and digital economies.

DECENT WORK & CARE ECONOMY



ECONOMIC OPPORTUNITIES

535
opportunities
for women
created across:

- Care (purple economy)
- Green/blue economy
- Digital economy



ADVOCACY & DIALOGUE

155

caregiver and care recipient
organizations supported

148

multi-stakeholder
processes and platforms
supported inclusive
care policymaking



CARE-RELATED LAWS/POLICIES

7

laws and action plans
adopted to promote decent
work for care workers

186

employers strengthened
care-supportive
workplace policies

MAIN RESULTS

At the global level, UN Women contributed to advancing the care agenda as a key driver of decent work, employment creation and inclusive economic prosperity by convening multi-stakeholder advocacy and policy dialogues within international and multilateral processes to shape international normative frameworks and global standards.

As co-convenor of the [Global Alliance for Care](#), UN Women joined forces with its 350+ members from governments, UN entities, civil society, development partners and private sector actors to organize high-level dialogues and advocacy across major global forums, including the [Commission on the Status of Women \(CSW69\)](#) and the [Fourth International Conference on Financing for Development \(FfD4\)](#).

In partnership with Chile and the ILO, UN Women jointly developed the policy paper [Caring for the Future: Redefining Development through Care Politics](#), presented during the [Second World Summit for Social Development](#). The paper highlights how current care deficits, combined with persistent discriminatory social norms, place an unequal and excessive share of unpaid care responsibilities on women, limiting their opportunities and access to quality employment, constraining their engagement in labour markets and in broader economic, social, cultural and political life.

In commemoration of the [International Day of Care and Support](#) (IDCS), UN Women co-organized the United Nations official observance with the Office of the United Nations High Commissioner for Human Rights (OHCHR) and the ILO, held on 29 October at the Palais des Nations in Geneva. The event brought together UN Member States, UN and international organizations, employers' and workers' organizations, civil society organizations and UN human rights mechanisms, with coordination support from the Global Alliance for Care, to advance dialogue on the human rights dimensions of care and support systems.

In addition, UN Women convened more than 25 events in over 20 countries and 6 regions in the margins of the IDCS. These included the launch of care policies, action plans and knowledge products along with high-level policy dialogues, strengthening national commitments, advancing policy dialogue, elevating diverse stakeholder perspectives and reinforcing multi-stakeholder efforts to promote gender-responsive care systems across national, regional and global policy agendas.

At regional level, UN Women strengthened intergovernmental collaboration and policy alignment to advance commitments on care as a driver of gender equality and decent work.

In the **Asia and the Pacific** region, UN Women's technical support to the Government of Malaysia as the Association of Southeast Asian Nations (ASEAN) Chair, during the [New Frontiers in the Care Economy Conference](#) (CARECON), contributed to two policy milestones at both regional and national level, namely the [ASEAN Declaration on Strengthening the Care Economy and Fostering Resilience Towards the Post-2025 ASEAN Community](#) and [Malaysia's first National Care Strategy](#). The process strengthened regional consensus on transforming care systems and advanced priority areas including care delivery models, evidence-based policy development, rural care and entrepreneurship, and safe migration and protections for care workers.

This work was further reinforced in **Latin America and the Caribbean** through UN Women's participation in the [XVI Regional Conference on Women](#) and through support for the [Tlatelolco Commitment](#), which calls for special measures to ensure women's access to social protection and decent work.

At the country level, an additional 25 multi-stakeholder dialogues were held across more than 20 countries, and 6 regions further supported national policy processes and strengthened advocacy to advance decent work. These efforts are translating into concrete reforms in labour policies, regulatory frameworks and accountability mechanisms that advance care-responsive systems and decent work conditions for care workers.



Women in the Ziguinchor region of Senegal using energy-efficient improved cookstoves, helping to reduce the time spent collecting fuel and carrying out cooking activities. Photo: UN Women Senegal.

In **Chile**, UN Women technical support contributed to the [Exempt Resolution No. 1,067](#) of the Ministry of Labor and Social Security, which entered into force on 1 August 2025, and the establishment of an Observatory to monitor the implementation of the work-life balance law (Law No. 21,645), strengthening data collection and accountability mechanisms to support more equitable labour outcomes.

In **Côte d'Ivoire**, UN Women technical support contributed to the Government's adoption of a decree in March 2025 extending parental leave for public civil servants, doubling maternity leave to 6 months and increasing paternity leave from 3 to 30 days. The measure represents a significant advancement in the region, where average paternity leave is approximately three days, and supports more equitable sharing of unpaid care and paid work between women and men.

In **Pakistan**, UN Women and the National Commission on the Status of Women (NCSW) convened the first National Dialogue on the

Care Economy in Islamabad, bringing together different actors to prioritize care as central to economic growth, gender equality and social justice. Recommendations from the dialogue were consolidated into a policy brief, leading to the launch of the roadmap 'Transforming Care Systems: A Roadmap for Economic Growth and Social Equity in Pakistan' during the event.

In **Uruguay**, the Social Dialogue on Care, initiated in July 2025, resulted in a consensus-based reform document for legislative consideration and to inform the National Care Plan 2026–2030. The process was coordinated by an Executive Commission comprising 18 members from public institutions, civil society, political parties and business chambers, ensuring broad participation and legitimacy. UN Women's technical input supported the identification of key policy issues, including the duration of maternity and paternity leave, uptake of the shared parental subsidy, and coverage gaps affecting informal workers without social security protection. All the proposals developed to advance gender-responsive care policy were informed by

international experience and national analysis and financially costed, providing policy options to improve coverage and access within the national care framework.

Across sectors, interventions supported by UN Women led to the creation of decent and sustainable employment opportunities at the intersection of care, climate and just transitions and enhanced pathways for women's participation in the labour market.

In **Bosnia and Herzegovina** (BiH), the roll-out of the Gerontodomaćice Model enabled the formal employment of home care workers for older persons through training, certification, and access to health and pension benefits. In 2025, 337 women and 5 men were certified,¹⁰ creating formal pathways into the sector; 71 gerontodomaćice (home care aides) were subsequently employed, delivering 114,433 in-home care services between 22 April 2025 and 13 May 2026, including assistance with daily living activities. The intervention is implemented through a partnership between the Federal Ministry of Labour and Social Policy, the Red Cross of the Federation of BiH, the Federal Employment Institute and UN Women.

In **Brazil**, 47 jobs for refugee and migrant women were created through the [Empoderando Refugiadas](#) (Empowering Refugee Women) programme, a joint initiative implemented by UN Women, UNHCR and the UN Global Compact Network Brazil, providing vocational training, employability support and job-matching services.

In **India**, through UN Women's regional initiative [Care and Climate Entrepreneurship Accelerator](#) for Asia and the Pacific, seven women-led and women-owned care and climate enterprises strengthened their technical and entrepreneurial capacities. In addition, UN Women partnered with the United Nations Development Programme (UNDP) to incubate and support 10 women-led and women-owned enterprises delivering childcare solutions for low-income communities in urban areas.

In **Moldova**, after the Ministry of Labour and Social Protection amended the Labour Code to enable employers to advance family-friendly workplaces, with UN Women's support six public and private institutions established child-friendly spaces for employees' children, with a further three spaces under development.

In **Nepal**, the Government, in partnership with UN Women and ILO, under the United Nations



Care workers receive their certificates after completing training under the Gerontodomaćice Model in Bosnia and Herzegovina. Photo: UN Women BiH/Merima Račić.



Participants at the WEPs Corporate Action Lab in Indonesia. Photo: UN Women/Christina Phan.

Secretary-General's flagship initiative [Global Accelerator for Jobs and Social Protection](#), developed a roadmap to identify priority sectors – including the care economy – with strong potential for investment and job creation.

In **Senegal**, building on women's existing roles in the ceramics value chain, UN Women support contributed to the creation of around 50 green jobs through the production and marketing of improved cookstoves. The initiative enhanced women's technical and entrepreneurial capacities, enabling them to improve their market position, take on new roles across the value chain and increase their incomes. UN Women also supported the rehabilitation of the Thiobon ceramics production unit, the main regional supplier, improving working conditions, production quality and management systems.

At country level, UN Women also partnered with the private sector to promote its engagement in the care agenda and support for inclusive, care- and gender-responsive employment environments.

In **Bolivia**, support to microfinance institutions participating in the Women's Empowerment Principles (WEPs) 2.0 business accelerator, including BancoSol, contributed to the issuance of a gender bond that expanded access to finance

and enhanced business capacities for women entrepreneurs. UN Women also provided training for BancoSol's clients on care and co-responsibility, helping them integrate these principles into business decision-making and management.

In **Georgia**, UN Women launched a certification course for WEPs signatory companies on creating care-responsive workplaces, strengthening private sector capacity to integrate care considerations into business operations and human resources policies. The course increased understanding of the care economy and supported companies in identifying and addressing barriers to women's labour force participation through family-friendly workplace measures that also promote employee well-being.

In **Indonesia**, 12 state-owned enterprises designed and piloted 22 care-supportive workplace initiatives aligned with the WEPs Corporate Action Lab implemented by UN Women. These included expanded paternity leave, flexible work arrangements, childcare and lactation facilities, and employee well-being programmes to address caregiving restraints and promote shared responsibility for care. As a result, the companies strengthened gender equality in the workplace, improving employee well-being, retention and productivity while supporting women's workforce participation.

In **Pakistan**, UN Women, UNICEF and the Pakistan Business Council jointly launched the report [Enhancing Family Friendly Workplace Policies](#), highlighting how progressive workplace measures such as parental leave, flexible working arrangements and childcare support contributed to employee well-being, child development and a more gender-inclusive workforce.

Also at country level, 155 caregivers' and workers' organizations were supported to strengthen their capacity to influence norms, standards and policy processes in the care economy from a rights-based perspective.

In **Egypt**, following the enactment of the Elder Care Law adopted in 2024, the Ministry of Social Solidarity launched the 'Elderly Companion' model to expand home-based care services for older persons and developed a unified curriculum that will serve as the national certification framework for training and qualifying long-term care workers, with support from UN Women.

In **Georgia**, UN Women contributed to strengthening caregiver organizations' capacity to influence and advance standards and practices in the care economy from a gender equality and human rights perspective. In 2025, members of the Association of

Nannies and Domestic Workers, legally established in 2023 with the support of UN Women, founded Georgia's first [Domestic and Care Workers' Union](#). Targeted support provided to the Domestic Workers Employment Center LLC and to the care organizations Hand in Hand and Peristsvaleba strengthened both their service delivery and their ability to engage in policy dialogue and advocacy.

In **Panama**, 79 women caregivers graduated from the first Care Diploma programme, implemented by UN Women in collaboration with the Specialized University of the Americas (UDELAS). In partnership with the Ministry of Employment and Labour Development (MITRADEL), with technical support from UN Women, graduates of the programme are establishing the country's first care cooperative.

In **Peru**, the 'Cuidarme también es cuidar' (My self-care is also care) programme, implemented in coordination with local municipalities, supported 67 women caregivers in two districts of Metropolitan Lima with a range of in-person services designed to promote self-care and strengthen their physical, emotional, psychological and social well-being. The programme also provided reflective and educational spaces to challenge gender norms and stereotypes that perpetuate the unequal distribution of care responsibilities, fostering co-responsibility for care.



Meeting of the founders of Georgia's Domestic and Care Workers' Union. Photo: Domestic and Care Workers' Union.

IMPACT STORIES

STRENGTHENING WOMEN-LED CARE ENTERPRISES IN MEXICO

In Mexico, unpaid care work represented 23.9 per cent of GDP in 2024, highlighting its critical contribution to the economy.¹¹ Despite its value, care work remains largely invisible and is often viewed as a social assistance issue rather than an economic concern. This perception has resulted in limited investment and entrepreneurship in the care economy, despite rising demand for quality

care services. The challenge is particularly significant for women. While women contribute more than 70 per cent of the value of unpaid care work, only 4 in 10 women in Mexico participate in the labour market – one of the lowest rates in Latin America. This highlights the untapped potential of the care economy to create jobs and expand women's economic opportunities.

Turning care into economic opportunity

Recognizing this opportunity, in 2025 UN Women launched a care accelerator programme in Mexico with support from Visa Foundation and Tecnológico de Monterrey. Building on lessons from the Care and Climate Entrepreneurship Accelerator in Asia and the Pacific, the initiative seeks to transform the care economy through innovation and entrepreneurship. It began with a pre-acceleration phase that equipped 40 women entrepreneurs with a range of skills, including matching product to market, strategic

communication, the Women's Empowerment Principles (WEPs), revenue models, well-being and community building. Following a competitive process, 11 enterprises were selected to continue in the accelerator programme. These businesses are developing innovative solutions to address growing care needs, including childcare, services for older persons, support for persons with disabilities, and digital platforms.

Innovation with a human-centred approach

Among the selected entrepreneurs is Mar Ceci Montiel, founder of Kidcare, a childcare enterprise that provides professional care services with a strong human-centred approach. The model connects families with a network of specialists who offer holistic support for children and adolescents up to age 14. For Montiel, participation in the accelerator programme has provided valuable tools

to strengthen and scale her business while preserving its social mission. She says: "The challenge is to build a model where care is accessible to families – not a privilege – while also ensuring fair working conditions for care professionals and reaching more families while creating more jobs."

Lessons learned

The care accelerator programme demonstrates the potential of entrepreneurship to transform care systems and create more inclusive economies. By combining business development with care-focused innovation, the initiative is helping women entrepreneurs find sustainable

solutions to care needs. Mexico's experience shows how investing in women-led care enterprises can improve access to quality care services while advancing women's economic empowerment.



Entrepreneurs engage in a collaborative discussion to explore impact measurement and to reflect on their personal and business purpose at the Care Entrepreneurship Acceleration Bootcamp in Mexico. Photo: Tecnológico de Monterrey/Josué Eduardo Padilla Ruiz.

EXPANDING WOMEN'S ECONOMIC OPPORTUNITIES IN INDIA THROUGH INTEGRATED CARE AND ENTREPRENEURSHIP SUPPORT

Across India, many women face a common challenge: balancing their caregiving responsibilities with the need to earn an income. Limited access to affordable childcare often prevents women from participating in training programmes, pursuing employment or starting a business. At the same time, many low-income families lack access to quality early childhood care and

education services. Recognizing that care and economic empowerment are deeply interconnected, UN Women has been advancing innovative solutions through the Better Skills Better Care (BSBC) programme, helping women build livelihoods while ensuring that children have access to safe and stimulating learning environments.

An integrated approach to care and economic empowerment

Funded by the International Development Research Centre (IDRC) and the Visa Foundation, and implemented in partnership with Dharma Life Labs, Titli and others, the initiative builds on India's commitment to strengthening early childhood care and education. The programme combines vocational skills development, childcare

services and community engagement to create pathways for women's economic empowerment. A key component is the Dharma Life Community Learning Centre model, which creates community-based spaces where children can learn, grow and thrive while women access opportunities to improve their economic prospects.

Creating opportunities for women and families

By reducing caregiving constraints and expanding access to skills development, BSBC has helped women build their confidence and explore new opportunities. For many participants, the programme has opened the door to greater independence and given them hope for the future. Among them is Ranthi Topo, a 34-year-old mother from Ekamba. Through the BSBC programme and the Dharma Life Community Learning Centre, Ranthi gained access

to a supportive environment where her youngest son, Adarsh, could attend preschool while she participated in training. The programme helped her to build new skills, gain confidence and explore income-generating opportunities. With reliable childcare support, Ranthi was able to invest time in her own development, knowing her child was in a safe and nurturing learning environment.

Lessons learned

The BSBC programme demonstrates that women's economic empowerment and care services cannot be addressed in isolation. The initiative also highlights the value of community-based care models in reaching underserved populations. Building on its early success,

the Dharma Life Community Learning Centre model has already begun expanding to other villages across India, creating new opportunities for women, children and families while advancing more inclusive local economies.

ESTABLISHING GEORGIA'S FIRST LABOUR UNION FOR DOMESTIC AND CARE WORKERS

Domestic and care workers play a vital role in supporting families and economies. Yet their work remains undervalued and is often carried out under precarious conditions. In Georgia, domestic work is not explicitly recognized as a distinct type of employment under national legislation, and the country has not yet ratified

the ILO Domestic Workers Convention, 2011 (No. 189). As a result, many domestic and care workers lack access to basic labour protections, including formal contracts, minimum wage guarantees and social security coverage. The challenge disproportionately affects women, who make up approximately 96 per cent of domestic workers.

Giving voice to domestic and care workers

In Georgia, the domestic workers movement gained momentum during the COVID-19 pandemic, when many workers in the sector faced job losses, worsening working conditions and exclusion from State support due to their informal employment status. These challenges underscored the need for stronger labour protections.

With UN Women's support, domestic workers began organizing to advocate for change. They achieved a major milestone in 2023 with the establishment of the Association of Nannies and Domestic Workers. This created a platform where workers could access legal advice and support services. Today, it has more than 400 members and provides a hotline and a dedicated workspace for domestic workers in Tbilisi.

A historic milestone for labour rights

Building on these efforts, members took another important step forward in June 2025 by establishing the Domestic and Care Workers' Union, the first labour union of its kind in the country. The Union currently brings together 123 members, including nannies, cleaners, tutors, personal assistants for children, nurses, cooks and eldercare workers. For the first time, workers in a sector traditionally characterized by informality have a formal mechanism to advocate for their rights.

"A labour union is a decision to fight together – when people with similar professions or work experience come

together around common interests and find ways to deal with challenges," says Ina Charkviani, co-founder of the Domestic and Care Workers' Union. "We are taking the first steps now, and we believe in what we are doing."

With UN Women's support, domestic and care workers have strengthened their capacity to advocate for legal recognition and improved working conditions. The Union has now expanded its support services by establishing a Domestic Workers Employment Centre, connecting women with employers and promoting formal employment relationships.

Lessons learned

The establishment of Georgia's first Domestic and Care Workers' Union demonstrates the power of collective action in advancing labour rights. Moving forward, the

Association of Care Workers and the newly established Union plan to continue advocating for labour protections and improved safeguards for migrant domestic workers.



OUTCOME 3:

A SHIFT IN SOCIAL NORMS TO CONSIDER CARE WORK (UNPAID AND PAID) AS VALUABLE AND SKILLED WORK, AND AS A SHARED RESPONSIBILITY WITHIN HOUSEHOLDS AND BETWEEN HOUSEHOLDS, THE STATE, BUSINESSES AND COMMUNITIES.

Output 3.1: The capacity of institutions is enhanced to promote a shift in discriminatory social norms to value and redistribute care work.

Output 3.2: Social norms change initiatives are developed and implemented to tackle the undervaluing and gendered inequitable distribution of care work.

2025 KEY HIGHLIGHTS

In 2025, UN Women contributed to advancing long-term shifts in discriminatory social norms related to care work, recognizing that such change requires sustained, multi-year efforts. Guided by the [UN Women social norms framework](#), the interventions focused on strengthening consensus, enabling tangible changes and reinforcing countervailing power through support to feminist movements and coalition-building.

As a result, **136 public and private sector employers advanced or revised policies** to address gender-based discrimination and challenge stereotypes.

Capacities were strengthened across 533 institutions to identify and address discriminatory behaviours and social norms, supporting a broader shift towards valuing and redistributing care work.

In addition, **8 gender-focused data and evidence initiatives were implemented** to inform understanding and monitoring of care-related norms, while **132 initiatives were rolled out by public and private sector actors to prevent, monitor and mitigate discrimination and stereotypes in care work.**



SOCIAL NORMS & BEHAVIOUR CHANGE

132

initiatives implemented to
prevent & eliminate stereotypes

136

employers advanced/
revised policies
addressing discrimination
and stereotypes related
to care work

533

institutions strengthened to
address discriminatory norms

MAIN RESULTS

At the regional level, social norms change was advanced through community engagement and large-scale campaigns.

In the Arab States region, UN Women implemented the [Dare to Care](#) community-based model, strengthening the capacity of local organizations to address patriarchal masculinities and promote the redistribution of unpaid care work across Egypt, Jordan, Morocco, Tunisia, Lebanon and Palestine. The mid-term evaluation conducted for Jordan and Morocco showed impressive results, including a reduction in the gender gap in time spent on unpaid care work of 112 minutes per day in target families in Morocco, and a 45-minute reduction in the gender gap per day among married couples in Jordan.

This initiative was complemented by the youth-led [Hand in Hand](#) regional campaign, co-developed by a Youth Advisory Group composed of young men and women, which was rolled out across 10 countries to promote men's engagement in unpaid care and household responsibilities. In 2025, the campaign generated approximately 2.5 million digital engagements, contributing to increased visibility of care issues and challenging stereotypes around the gendered division of care work. The highest levels of engagement were recorded in Egypt (920,000), followed by Morocco (550,000), Jordan (550,000), Iraq (132,000), Syria (137,500), Lebanon (125,000), Tunisia (120,000), Libya (111,000), Palestine (100,000) and Yemen (90,000), with women representing approximately 60 per cent of all engagements.



Families from Egypt take part in the Hand in Hand Campaign's Social Experiment, rethinking household and childcare responsibilities and challenging their own perceptions on unpaid care work. Photo: UN Women.

Across other regions, similar efforts translated into increased awareness, stronger institutional practices and broader public engagement.

In Brazil, 53 public institutions enhanced their capacities to identify and address discriminatory social norms, including through the development of care diagnostics and mapping tools to inform

policy and planning. The Belém Municipal Government launched the Care Diagnosis and Care Map, while 52 institutions in Sergipe and Paraíba engaged through the 'Fortalece Elas' (Empowering Women) programme. These institutions improved their ability to mainstream care into policies, challenge stereotypes and promote shared responsibility for care.

In China, UN Women supported the Women Care Workers Art Festival and the 'Domestic Work Has Value' campaign to raise public recognition of paid and unpaid care work and the vital contributions of care workers. By combining art, storytelling and community engagement, the initiative elevated the voices of migrant women and domestic workers, boosting the confidence and visibility of more than 90 participants. The campaign also enhanced the advocacy capacity of civil society organizations and reached wide audiences, engaging over 2,200 people through live events and more than 800,000 through media outreach.

In Kenya, national media engagement helped elevate care as a public issue, reaching an estimated 6.6 million people through televised and radio discussions and reinforcing government commitment to advancing care policies. Three major televised discussions aired on KTN, Nation TV and KBC further amplified the national conversation on care.

In Nepal, UN Women helped shift discriminatory social norms around care in rural communities across three provinces. By establishing Care Advocacy Groups, the initiative empowered women to advocate for care priorities and influence local decision-making. It also engaged wider communities, including men and boys, in recognizing time poverty and its impacts, while promoting positive masculinities and fatherhood to encourage shared responsibility for care and address the root causes of gender inequalities in unpaid care work.

In Rwanda, UN Women partnered with ActionAid to raise awareness of the disproportionate share of unpaid care and domestic work borne by

women and girls. Through information, education and communication (IEC) materials, school and community-based outreach, and radio and television programmes, the initiative promoted the need to recognize, reduce and redistribute unpaid care work. This reached over 30,000 people – including community members, opinion leaders, men and boys – 17,500 through outreach activities and around 12,000 through radio and TV broadcasts. Targeted collaboration with neighbouring communities engaged 720 people, increasing awareness of care inequalities and encouraging more equitable sharing of care responsibilities. The programme also leveraged key commemorations, including the International Day of Rural Women and the International Day of Care and Support, to engage local actors and promote positive social norms change and greater recognition of unpaid care work within households and communities.

In the **Republic of Korea,** UN Women's Knowledge and Partnerships Centre collaborated with Root Impact to implement the 'Papa School: Fatherhood Care Capacity-Building Initiative' in Seoul. This strengthened the caregiving capacities of more than 20 fathers from 22 organizations across finance, technology, manufacturing, social enterprises, cooperatives and government. It also contributed to more care-responsive workplace practices by engaging human resources professionals, organizational leaders and diversity, equity and inclusion focal points, and building support for future fatherhood and caregiving initiatives.

In **Tanzania,** UN Women partnered with the Tanzania Network of Community Radios (TADIO) to produce 24 radio shows, including 16 community dialogues, reaching an estimated 11 million listeners across Singida, Kigoma, Mtwara, Lindi and Arusha. By engaging 54 community facilitators, the programme raised awareness of key issues such as gender-based violence, the need to reduce unpaid care work, and the promotion of women's leadership and participation in decision-making, particularly among women with disabilities.



Participants of Papa School, a partnership initiative between the UN Women Knowledge and Partnerships Centre in the Republic of Korea and Root Impact, learn about fatherhood at Heyground in Seoul in July 2025. Photo: Jaeyeon Jeong/UN Women.

IMPACT STORIES

COMMUNITY ACTION REDEFINING CARE AND CHALLENGING GENDER NORMS IN EGYPT

Across the Arab States region, social norms continue to shape expectations around care and household responsibilities. Women carry the majority of unpaid care and domestic work. Addressing these inequalities requires changes not only in policies, but also in attitudes and behaviours. UN Women's regional 'Dare to Care' programme is helping to drive this change through

community-based approaches that engage men, women and families in conversations about care, gender equality and shared responsibility. Implemented with local organizations across Egypt, Jordan and Morocco, the programme promotes a more equitable distribution of unpaid care and domestic work.

Community-led solutions for lasting change

In Egypt, the programme partnered with Gozour, a community-based organization that facilitates dialogue, awareness-raising and behaviour-change initiatives, combining discussions on gender equality, women's economic empowerment and the value of care work.

Working with community members to encourage reflection on household roles, participants explored how unequal care responsibilities affect women, men and families, while identifying practical ways to share care more fairly.

A personal transformation

The experience of Nady Ashry, a father of two sons and two daughters from a village in Fayoum, illustrates the impact of this approach. Nady used to believe that caregiving and household work were exclusively women's responsibility. His wife managed domestic tasks alone, while he worried that helping at home would expose him to criticism. That perspective changed after he took part in the activities organized by Guzour.

"What made me change my mind is 90 per cent what I learned about our role model, Prophet Muhammad (Peace Be Upon Him), and how he contributed to the home," Nady explains. "The remaining 10 per cent came from realizing

how harsh society can be on women by limiting them to a single domestic role. Women are now leaders, why should their role be limited?"

Today, Nady shares caregiving and household responsibilities with his wife. The change has also influenced his children. In Nady's own words, "My sons do a lot of household tasks. It's not okay for my son to ask his sister for water, why wouldn't he fetch it himself?" Nady notes that dividing household tasks has given him and his wife more time together and enabled her to pursue income-generating activities.

Lessons learned

Nady's story reflects broader changes taking place in participating communities. As men become more engaged in caregiving they help challenge stereotypes and model new behaviours for their families and peers. A key lesson is that trusted community organizations can

play a critical role in shifting social norms. By engaging men and boys alongside women and girls, these initiatives help build more equitable households and communities where care responsibilities are shared more fairly.



Nady Ashry and his daughter Sagda play together in Fayoum, Egypt. After participating in activities organized by the Gozour Foundation, Nady now shares caregiving and household responsibilities with his wife and encourages equal participation in care at home. Photo: Gozour Foundation.

FROM POLICY DIALOGUE TO SYSTEMIC CHANGE: ADVANCING THE CARE ECONOMY IN WEST AND CENTRAL AFRICA

Across West and Central Africa, unpaid care responsibilities continue to limit women's economic empowerment. Care work has often been overlooked in public investment and policy development. As countries seek pathways to inclusive development, recognizing care as both a social and economic issue has become increasingly important.

In 2025, the UN Women Feminist Economists Taskforce played a key role in advancing the care agenda. By collaborating with policymakers, government institutions and development partners, the Taskforce helped position care as a driver of inclusive economic transformation and a public policy priority.

Driving change through regional and national engagement

Working at different levels, the Taskforce brought together diverse stakeholders to build a shared understanding of the care economy. Through 13 multi-stakeholder policy dialogue and training processes in Côte d'Ivoire, Mali and Nigeria, around 200 institutions enhanced their capacity to integrate gender-responsive approaches into economic policy design, implementation and monitoring.

The initiative also fostered collaboration through a policy dialogue with the Economic Community of West African States (ECOWAS) Commission and a discussion on the care-climate nexus, co-organized with the International Development Research Centre (IDRC). These engagements convened ministries of finance, gender,

social protection, labour and trade, alongside statistical institutions, municipalities, parliamentarians, civil society organizations and private-sector actors.

The Taskforce also supported the ECOWAS Commission in advancing care as a regional policy priority. Two dialogues convened 27 ECOWAS parliamentarians, government officials and 46 gender focal points from 12 Member States, strengthening their capacity to design and implement care-responsive policies. This culminated in the development of a Regional Care Action Plan, marking an important step toward coordinated action and commitments to advancing the care agenda.

From dialogue to action

The results of these process are already visible in changes at country and local level. For example:

In Côte d'Ivoire, UN Women supported reforms that expanded parental leave provisions, extending maternity leave from 3 to 6 months and increasing paternity leave for civil servants from 3 to 30 days. Additionally, 40 parliamentarians have better understanding of care-responsive policies and approaches to recognize, reduce and redistribute unpaid care work.

At the local level, representatives from 100 municipalities in Côte d'Ivoire received training on integrating unpaid care work into development and investment planning. As a result, authorities are incorporating care considerations into local planning processes. In Mali, the establishment of a National Care Committee marked a milestone in implementing the country's National Care Roadmap. The Committee coordinates care-related reforms, helping embed care governance within national systems.

Lessons learned

The experience of the Feminist Economists Taskforce in West and Central Africa demonstrates that care reforms require coordinated action across multiple levels. Policy

dialogue, evidence-based advocacy and institutional capacity-building can create conditions for transforming care systems.



PARTNERSHIPS DRIVING TRANSFORMCARE RESULTS IN 2025

Partnerships are central to the TransformCare global initiative, bringing together development partners, UN entities, governments, civil society, academia and the private sector to advance care systems at scale.

Within the UN system, UN Women co-chairs the Inter-Agency Working Group on Transforming Care Systems with the ILO and ECLAC, strengthening coordination of the global care agenda across UN entities.

Globally, as co-convenor of the Global Alliance for Care – a multistakeholder platform with over 350 members – UN Women continues to bring together governments, UN entities, civil society, development partners and private sector actors to advance care as a public good and a human right.

At the regional level, UN Women partners with intergovernmental organizations including the [African Union Commission](#), the [Intergovernmental Authority on Development](#) (IGAD), the [Economic Community of West African States](#) (ECOWAS) and the [Association of Southeast Asian Nations](#) (ASEAN), as well as partners such as the [International Development Research Centre](#) (IDRC), [FEMNET](#) and [Akina Mama wa Afrika](#), among others. These collaborations support regional policy dialogues, joint programmes and the development of frameworks such as a Continental Care Economy Roadmap in Africa and care agendas in the Arab States and Asia-Pacific. UN Women also engages in global economic governance fora, including successive G20 presidencies, to advance the

integration of care into macroeconomic policy discussions.

At the country level, partnerships with governments, national statistical offices and public institutions have enabled the development and implementation of national care policies, time-use surveys, parental leave reforms, and the recognition of unpaid care work in legal and policy frameworks.

UN Women's collaboration with civil society organizations, workers' and women's organizations, and local communities continues to strengthen movement-building, skills development, and the expansion of care services and infrastructure.

Across all levels, UN Women works with networks of feminist economists and academic institutions, including the [Levy Economics Institute](#) and [Istanbul Technical University](#), to strengthen evidence-based policy and advance comprehensive care systems.

UN Women also partners with [Women's Empowerment Principles \(WEPs\)](#) signatory companies and [WEPs Allies](#) across global, regional and country levels to advance gender equality and women's empowerment in the workplace, marketplace and community through private sector engagement and the promotion of gender-responsive and care-inclusive business practices.

In 2025, UN Women's work in transforming care systems has been made possible through the contribution of funding partners to the global initiative as well as to regional and country-level programmes.

GLOBAL FUNDING PARTNERS

- Foreign, Commonwealth & Development Office (FCDO), United Kingdom
- German Federal Ministry for Economic Cooperation and Development (BMZ)
- Norwegian Agency for Development Cooperation (Norad), through the Strategic Partnership Framework (SPF III)
- Swedish International Development Cooperation Agency (Sida), through the Strategic Partnership Framework (SPF III)
- Global Disability Fund (GDF)

REGIONAL AND COUNTRY-LEVEL FUNDING PARTNERS:

- Spanish Agency for International Development Cooperation (AECID)
- German Agency for International Cooperation (GIZ)
- Basque Agency for Development Cooperation (eLankidetza)
- Open Society Foundations (OSF)
- Visa Foundation
- Royal Norwegian Embassy
- European Union
- Ministry of Foreign Affairs of Denmark
- Government of Sweden
- Government of Canada
- Global Affairs Canada
- Austrian Development Agency (ADA)
- Swiss Agency for Development and Cooperation (SDC)
- Gates Foundation
- International Development Research Centre (IDRC)
- African Women's Development and Communication Network (FEMNET)



NOTES

- 1 Transform Care countries in 2025 were: Arab States: Egypt, Jordan, Morocco. East and Southern Africa: Burundi, Ethiopia, Kenya, Mozambique, Rwanda, Sudan, Tanzania, Uganda and Zimbabwe. West and Central Africa: Côte d'Ivoire, DR Congo, Liberia, Mali, Niger, Nigeria, Senegal and Sierra Leone. Asia and the Pacific: Afghanistan, Bangladesh, China, India, Indonesia, Nepal, Pakistan, Philippines, Republic of Korea and Timor-Leste. Americas and the Caribbean: Argentina, Bolivia, Brazil, Chile, Colombia, Dominican Republic, Ecuador, El Salvador, Guatemala, Honduras, Mexico, Panama, Peru and Uruguay. Europe and Central Asia: Albania, Bosnia and Herzegovina, Georgia, Kosovo, Republic of Moldova, Serbia, Türkiye and Ukraine.
- 2 International Labour Organization. 2018. [Care Work and Care Jobs for the Future of Decent Work](#). Geneva: ILO.
- 3 UN Women and UN DESA. 2025. [Progress on the Sustainable Development Goals: The Gender Snapshot 2025](#). New York: UN Women and DESA. © UN Women and United Nations Department of Economic and Social Affairs, Statistics Division.
- 4 International Labour Organization. 2025. [Advancing Decent Work and the Care Economy: An Essential Component Of Social Development](#). Policy Brief prepared for the Second World Summit for Social Development. Geneva: ILO.
- 5 According to the UN System policy paper [Transforming Care Systems in the Context of the Sustainable Development Goals and Our Common Agenda](#), a care system “involves legal and policy frameworks, services, financing, social and physical infrastructure, programmes, standards and training, governance and administration, and social norms... working in an integrated and deliberate way, with the aim of implementing a new social organization of care to assist, support and care for people and the environment, as well as recognizing, reducing and redistributing, rewarding and representing care work from a gender, intersectional and human rights perspective in a way that fosters co-responsibility between genders and between households, the State, the market, families and the community.”
- 6 International Labour Organization. 2022. [“Greater investment in care could create almost 300 million jobs.”](#) Newsroom, 7 March.
- 7 International Labour Organization. 2025. [Employment-Intensive Investments for Advancing Decent Work in the Care Economy](#). ILO Care Economy Brief. Geneva: ILO.
- 8 Women’s Budget Group. 2022. [A Green and Caring Economy: A feminist vision for tackling the climate crisis and transforming the economy](#).
- 9 SDG 5 ‘Achieve gender equality and empower all women and girls’, target 5.4: ‘Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate.’
- 10 UN Women Europe and Central Asia. 2025. [“Empowering caregivers, transforming lives: Over 200 home and personal care aides are certified in Bosnia and Herzegovina.”](#) News and events, 24 July.
- 11 Instituto Nacional de Estadística y Geografía (INEGI). 2025. [En 2024, el valor económico del trabajo no remunerado en labores domésticas y de cuidados reportó un monto de 8 billones de pesos](#). 25 November 2025. Mexico: INEGI.

UN WOMEN EXISTS TO ADVANCE WOMEN'S RIGHTS, GENDER EQUALITY AND THE EMPOWERMENT OF ALL WOMEN AND GIRLS.

As the lead United Nations entity on gender equality and secretariat of the UN Commission on the Status of Women, we shift laws, institutions, social norms and services to close the gender gap and build an equal world for all women and girls. Our partnerships with governments, women's movements and the private sector, coupled with our coordination of the broader United Nations, deliver lasting changes. We make strides in four areas: leadership, economic empowerment, freedom from violence, and peace, security and humanitarian action.

UN Women keeps the rights of women and girls at the centre of global progress – always, everywhere. Because gender equality is not just what we do. It is who we are.



220 East 42nd Street
New York, New York 10017, USA
unwomen.org
facebook.com/unwomen
x.com/un_women
youtube.com/unwomen
flickr.com/unwomen