



GRRIPP

Gender Responsive
Resilience and Intersectionality in
Policy and Practice

CITIES AND TERRITORIES THAT CARE: LOCAL SYSTEMS OF CARE WITH A GENDER PERSPECTIVE

**BUENOS AIRES AND CORDOBA,
ARGENTINA; BOGOTA, COLOMBIA;
SANTIAGO, CHILE**

Context

The planning and management of cities have privileged the centrality of work, giving priority to a male vision that establishes a separation between productive and reproductive space. This situation generates multiple consequences in women's lives:

- a decline in labor participation;
- increased poverty for women and their dependents;
- loss of human talent, among others.

The Covid-19 crisis has reaffirmed the importance of care, a task that contributes to people's physical and emotional well-being and is essential for sustaining life and the reproduction of societies. It has also meant a context in which women have experienced an overload of unpaid care, deepening the sexual division of labor that constitutes one of the structural nodes of gender inequality.

From a feminist perspective, it is vital to overcome this dichotomy, to build cities and territories that care, to value the sphere of reproduction, and to connect private space with public space. In the new scenario, the planning of inclusive cities should seek to understand the dynamics of women as caregivers in the city, applying short and interconnected paths that allow for combining productive and reproductive work (Falú 2017).

Objectives

Contribute to the design of care policies and strategies with a gender and territorial approach that guarantee the right of people to care and be cared for, based on local experiences and proposals located in four Latin American cities facing the pandemic challenges.

Courses of action

- 1) **Generation of knowledge on care needs and demands at the territorial level** in four cities, incorporating lessons from the region. Consultations on care at the local level were carried out; diagnoses were developed; geo-referenced maps of care were produced; and findings in each territory were systematized and analyzed.
- 2) **Strengthening territorial care initiatives through coordination** with women's groups, governments, and local actors. Participatory workshops were held for diagnosis, feedback, and validation of results and proposals.



Graph showing the analysis of the BOSA Care Block developed within the Caring Cities and Territories program framework.

- 3) **Participatory formulation of care guidelines with a territorial and gender focus that respond to the needs of the most vulnerable territories.** Local multi-stakeholder dialogues were held with academia, municipalities, and social actors to develop an agenda incorporating recommendations and proposals for recognizing the right to care. A document of guidelines for a territorial care system with a gender perspective was prepared.
- 4) **Dissemination of project results to contribute to the positioning of care as a relevant topic in public policies, academic research, and urban collectives' practices.** An international seminar was held on experiences and lessons learned, and a bulletin of the project's results was published.

Approach

From a gender equality perspective, the project argues that it is essential to recognize, make visible and revalue care work as a key task for the well-being of societies; to redistribute, in a fairer and more balanced way, unpaid care work and domestic responsibilities between women and men; to reduce the burden of unpaid work; to support and provide better coverage for the basic needs of care, from a rights-based approach.

This implies democratizing, i.e., redistributing the supply of care between the State, the market, the community, and families; *decommodifying* the care experience based on a change of concept from "who can pay" to "who can access"; and defeminizing, i.e., deconstructing gender roles by making care an option, and including those who provide unpaid care in social protection (ECLAC 2020).

Considering these approaches, the construction of local care systems with a gender perspective requires joining wills and coordinating different actors and levels of management.

From this perspective, proposals were established for implementing municipal programs so that caregivers, most women, have greater autonomy and time to devote to other activities.

From a territorial approach, emphasis was placed on the importance of building and managing inclusive cities and territories that value the reproduction of daily life: providing care services that balance the reproductive and productive spheres and women's economic autonomy.

Impacts

Based on the work carried out, the public, private, and community services existing in the territory were made visible. The maps and cartographies of the location of community and district care services and infrastructures have made it possible to locate the limitations and opportunities for access and provision of care services in the localities. Likewise, these tools have been configured as essential inputs for constructing care infrastructure in the cities.

Published resources:

[Preliminary document: concepts, recommendations, and policy guidelines at the local level](#)

[Diagnostic analysis document on care in four territories.](#)

[Informative bulletin "Cities and territories that care: local care systems with a gender approach"](#)

Cities and territories that care: Local systems of care with a gender perspective

Project implemented by member organizations of the Women and Habitat Network of Latin America and the Caribbean: CISCsa (Argentina); AVP Foundation (Colombia) and SUR Corporación (Chile).

Coordinated by Sur Corporación, Chile.

Web pages: www.ciscsa.org.ar, www.redmujer.org.ar, www.fundacionavp.org, www.sitiosur.cl



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