



GRRIPP

Gender Responsive
Resilience and Intersectionality in
Policy and Practice

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

SUR CORPORACIÓN EN ALIANZA CON CISCSA Y FUNDACIÓN AVP

Buenos Aires & 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. The Covid-19 crisis has also created 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.¹

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 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 systematised and analysed.
- 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 programme 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 recognising 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 recognise, 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; and to support and provide better coverage for the basic needs of care, from a rights-based approach.

This implies *democratising*, 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.²

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

Proposals were established for implementing municipal programmes 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".

Available: www.gripp.net/lacdigitalresources

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

CISCSA (Argentina); AVP Foundation (Colombia) and SUR Corporación (Chile). Coordinated by Sur Corporación, Chile.

www.ciscsa.org.ar; www.redmujer.org.ar;
www.fundacionavp.org; www.sifiosur.cl

References:

- ¹ M. Nieves Rico & O. Segovia (eds.), *¿Quién cuida en la ciudad? Aportes para políticas urbanas de igualdad*, CEPAL, 2017. pp.60-64.
² CEPAL, *Panorama Social de América Latina, 2020*, Santiago, 2021.