Summary Report

Leveraging the G20 to Advance Policy Action : A South-South Peer Learning Workshop on Gender Transformative Care Systems and Policies

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EXECUTIVE SUMMARY

The South–South Peer Learning Workshop on Gender-Transformative Care Systems and Policies, held in Johannesburg in October 2025, brought together over 120 policymakers, researchers, and feminist advocates from Latin America and Sub-Saharan Africa to exchange experiences on building care systems that are equitable, sustainable, and transformative.

Across discussions, participants converged on a central insight: care is economic infrastructure. It underpins labor productivity, social resilience, and inclusive growth, yet remains chronically undervalued and underfunded. Building robust care and support systems demands sustained political commitment, long-term financing, legal anchoring, and coordinated governance across national and local levels.

The workshop revealed both optimism and realism. Countries across Latin America have developed models of national and subnational/municipal care systems that integrate childcare, eldercare, and disability support, while also focussing on the wellbeing and needs of paid and unpaid caregivers. The recent landmark Advisory Opinion OC-31/25 issued by the Inter-American Court of Human Rights in June 2025, which for the first time recognized care as an autonomous and enforceable human right, provides an important legal backing for these systems and policies. African governments are also advancing promising initiatives, introducing National Care Policies, and supporting care-focused municipal innovations and programs. Yet across contexts, progress is uneven, with persistent challenges around fiscal space, data, political continuity, and norms change.

This report distills lessons from plenaries and roundtables. It synthesizes emerging insights across regions, identifies barriers to institutionalization, and outlines policy directions for governments, funders, and partners seeking to position care as a cornerstone of equitable development.

This workshop held two days before the W20 Summit, was also convened at the end of the Scaling Care Innovations in Africa Mid-Term Workshop which brought together 19 action-research projects across 15 countries in Africa scaling innovations that reduce women's unpaid care time across multiple contexts.

Global recognition of the care economy has grown significantly since the COVID-19 pandemic exposed the social and economic costs of neglecting care systems. Across the G20, W20, African Union, and UN forums, some governments are starting to partly acknowledge that unpaid and underpaid care work sustains economies, yet remains invisible in planning, in policies and budgets. While the care agenda has grown alongside broader discussions around gender equality - progress remains marginal? on care being understood as underpinning and driving the broader economy.

Latin America's experience—especially Uruguay, Chile, and Colombia—has shown that care can be institutionalized through research and data, feminist organizing and advocacy, coordinated policy frameworks, legal recognition, and stable financing. Sub-Saharan Africa is at an earlier but dynamic stage, with countries like Kenya, South Africa, and Ghana supporting the development of new national care policies and integrating care considerations into existing social protection policies. At the same time, municipal innovations and models of care service are being scaled across contexts - such as the "care block" model initiated in Bogota, Colombia being adopted in Freetown, Sierra Leone.

The **South–South Peer Learning Workshop** was designed to bridge these experiences and advance proposals to position care at the centre of the G20 with the voices and leadership of the Global South. This workshop leveraged work initiated many years ago by IDRC and partners, including the Care20, in particular building from work in Brazil to center care in the G20 through partnerships with the W20 and the T20. This workshop was convened by IDRC, the Global Alliance for Care, and W20 South Africa and served as both a learning exchange and a strategic dialogue space. The workshop's goals were to:

- Share cross-regional evidence and strategies on scaling gender-transformative care systems;
- Examine financing and governance approaches suitable for varied fiscal contexts;
- Identify knowledge gaps and research priorities; and
- Strengthen collective advocacy toward the next G20, AU policy cycles and other key multilateral forums.

Unlike formal policy conferences, this gathering prioritized open reflection. Participants spoke candidly about the "messy middle" between pilot projects and policy, where innovations risk fading without institutional anchors and budgets. The sessions emphasized **learning across differences**—what can travel between regions, what cannot, and what can be jointly imagined through feminist and South–South solidarity.

1. From Pilots to Systems: Moving Beyond Fragmentation

Across contexts, the transition from project-based interventions to territorial or national systems remains the central challenge. Participants agreed that pilots have generated valuable lessons, but fragmentation undermines sustainability.

In the last ten years. Latin American experience demonstrates the power of **legal frameworks and inter-ministerial coordination.** Uruguay's National Integrated Care System, Colombia National Care System, and Chile's evolving framework anchor care as a social right and assign responsibility across ministries. African counterparts shared promising community and municipal pilots but noted the absence of durable mandates or fiscal lines to scale them.

A recurring lesson was the need for **whole-of-government approaches**. Care cannot remain the domain of social or gender ministries alone—it must be integrated into finance, labor, infrastructure, and planning portfolios.

> **Learning Reflection:** Pilots succeed when they demonstrate viability; they endure when they are institutionalized through law, budget, and public accountability. Scaling requires political leadership and bureaucratic design as much as innovation. The role of evidence and feminist organizing and advocacy is central for all of this.

2. Financing Care as a Public Good

Fiscal and economic policy emerged as the key battleground. Participants stressed that without sustainable financing, care remains rhetorical. Governments often view care expenditure as social spending rather than investment, reinforcing austerity cycles.

Several financing pathways were discussed:

- Embedding care within **fiscal justice and debt relief frameworks**, allowing countries to negotiate fiscal space;
- Using **gender-responsive budgeting** to track allocations and protect care spending during crises;
- Developing climate-linked finance and debt-for-care swaps, framing care as part of resilience infrastructure; and
- Expanding social protection contributions that recognize care work as productive labor.
- Embedding care as part of infrastructure and transportation investment

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- Expanding social protection contributions that recognize care work as productive labor.
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Participants cautioned that while international advocacy has advanced the narrative of care as economic infrastructure, **macroeconomic policy remains resistant.** Ministries of finance often treat care as consumption rather than investment and new challenges arise from far-right governments, who are bringing back the idea of care as a private matter. Bridging this gap requires new metrics and stronger evidence on the economic returns of care.

> **Reflection:** Austerity measures often erode exactly the systems that sustain households and economies. Framing care as counter-cyclical investment—one that stabilizes families and enables productivity—can shift budget politics.

3. Framing Care as a Human Right

In her video presentation, Laura Pautassi, legal scholar and member of the Equipo Latinoamericano de Justicia y Género (ELA), offered a powerful framing of care as a human right, drawing from Latin American legal and policy experiences. Her intervention was grounded in the landmark Advisory Opinion OC-31/25 issued by the Inter-American Court of Human Rights in August 2025, which for the first time recognized care as an autonomous and enforceable human right. Pautassi was a key contributor to the consultative process that led to Advisory Opinion 31. She participated in the legal and academic efforts that shaped the Court's understanding of care as a right, and her work helped articulate its interdependence with other rights, including health, education, social protection, and gender equality.

Pautassi explained that care as a human right encompasses:

- The right to receive care, especially for children, older adults, and persons with disabilities.
- The right to provide care under dignified and protected conditions.
- The right to self-care, including access to time, resources, and services that enable personal autonomy and well-being.

This framing positions care as a legal entitlement, not a private or informal responsibility. It obliges states to guarantee access to care through universal, inclusive, and rights-based systems, and to address the gendered and unequal distribution of care work. This framing matters because:

- It elevates care to the level of other human rights, making it justiciable and subject to state accountability.
- It provides a normative foundation for comprehensive care systems that are resilient, equitable, and transformative.
- It responds to long-standing demands from feminist and human rights movements, especially in Latin America, to recognize care as central to dignity, equality, and sustainable development.

Learning Reflection: Her intervention invited workshop participants including African policymakers, advocates, and researchers to engage with this Latin American framing. She asked about the potential to adapt rights-based approaches to care within African legal and cultural contexts and emphasized the importance of South–South learning and solidarity in advancing care agendas.This framing enriched the workshop's broader goals of fostering gender-transformative, inclusive, and sustainable care systems, and offered a compelling legal and ethical lens for future advocacy and policy development.

4. Governance: Building Systems That Endure Political Cycles

The workshop highlighted governance as both an opportunity and a vulnerability. Where care policies exist, they often depend on the political will of a single administration. Participants called for institutional mechanisms that ensure continuity across political transitions. Developing care policies and systems through laws can help to mitigate this, yet, even if included in laws these policies can be diluted by a new government, by not assigning budgets.

Decentralization was widely discussed. Municipalities are closest to communities and often responsible for service delivery, yet lack funding and capacity. The "Care Block" model emerging in cities such as Bogotá and Freetown was identified as a promising blueprint: consolidating childcare, eldercare, health services but also training and educational opportunities, legal and psychosocial services for unpaid caregivers in one accessible hub, all services provided in a simultaneous way: offering care services so that unpaid caregivers can access respite spaces and engage with the offer in the care blocks.

Effective governance also requires multi-level coordination—clear division of responsibilities between national, regional, and local actors. Participants noted that gender ministries often play a convening role but need stronger mandates and cross-sector partnerships to influence fiscal and infrastructure policy. Care policies and systems shall be anchored directly reporting to presidential or planning units. Or at the ministries of Social Development, to elevate the concept that care is central for gender equality, but also for shared prosperity and that requires all sectors to collaborate.

Learning Reflection: Care systems endure when they are informed by evidence, supported by feminist organizing and movements, designed as institutions, not programs—anchored in law, coordinated across ministries, and financed through predictable public budgets.

5. The Care Workforce: Valuing Labor, Ensuring Rights

Care systems depend on the labor of millions—mostly women—who provide childcare, eldercare, and domestic work, often without protection or fair pay. Participants agreed that care policy cannot be transformative if it reproduces precarity.

While several countries have ratified ILO conventions on domestic and family-related work, implementation is inconsistent. At the same time, even ratification remains very low - especially across Africa - with the heaving reporting requirements being one of the reasons why countries are reluctant to ratify. At the same time, informal and migrant workers often remain excluded from social and labour protections. Formalization and professionalization of care work are critical but require investment in training, certification, and social protection.

Participants emphasized the importance of **decent work principles**: fair wages, safe conditions, collective bargaining rights, and social insurance. Governments were encouraged to link care employment strategies with broader job-creation and skills-development policies, and go even beyond to consider care jobs as green jobs.

Learning Reflection: The ratification and implementation (crucial: money, data and integrated policies) of ILO conventions 156, 183, 189 and 190 are called upon. This would support the international and regional coordination on labour standards for migrant care workers. And finally, there is a need to amplify the voices of care and domestic workers, and the alliances and solidarity among stakeholders.

6. Norms and Cultural Change

Despite policy progress, entrenched social norms continue to assign care to women, and centers on families' bearing the primary responsibility for care over the state. Participants observed that legal reforms alone cannot redistribute care; cultural change must accompany policy. Norm-shifting efforts—such as fatherhood programs, public campaigns, and gender-responsive education—are beginning to alter perceptions, but require sustained investment. Participants highlighted the importance of storytelling and media in normalizing shared responsibility for care and policy that doesn't reinforce mothers as primary caregivers.

> **Reflection:** Without addressing gendered expectations around care, even the best-designed systems will reproduce inequality. Structural transformation requires cultural transformation.

7. Rural, Climate, and Intersectional Dimensions

The workshop expanded the care discussion beyond urban and household contexts. Rural and climate sessions underscored that care responsibilities are intensified by poor infrastructure, the climate crisis, and environmental stress.

Rural women spend disproportionate time collecting water, fuel, and food, limiting participation in paid work. Climate shocks multiply these demands. Integrating care into **rural development, climate adaptation and resilience, and infrastructure planning** was seen as essential.

Participants called for the use of **time-use data** to guide rural investment and gender-responsive infrastructure (water, energy, transport). Recognizing care as part of climate resilience strategies can also unlock new funding through green and climate finance mechanisms. This discussion continued in the W20 summit lunch event unpacking the links between climate crisis and care work co organized with Wits University.

> **Reflection:** climate change deepens care burdens—especially for women—and investing in care systems is essential for climate resilience and justice. This means climate policies and financing need to value care labour, strengthen social infrastructure, and integrate gendered care metrics into adaptation and mitigation plans. In practice, this means treating childcare, health, and community care systems as core pillars of climate resilience, not as peripheral social policy.

8. Evidence and Data: The Missing Infrastructure

Across regions, a persistent data deficit undermines policy design and accountability. In Latin America and Kenya, the role of time use surveys to advance care systems and policies was crucial. However, few countries conduct regular time-use surveys, and even fewer link them to fiscal planning. Participants stressed the need to institutionalize **care data systems** that capture both paid and unpaid care, disaggregated by gender, location, and socioeconomic status.

Better data would enable costing policy options, monitoring of gender-responsive budgets, and clearer communication and recognition of care's economic value. Some participants also highlighted that given the cost of data collection, utilizing existing data efficiently is also a viable option. This would help move the agenda from visibility and recognition towards its valuation and reward. Even in countries with institutionalised care systems in Latin America, data fragmentation remains a limitation with data sharing across ministries and sectors remaining a key limitation. There is an opportunity to address this. There is data that can be used to advance care systems but it is not being shared across. Researchers called for harmonized indicators to track progress across the Global South.

Reflection: Robust evidence is crucial to move the care economy from rhetoric to reform—data makes visible the unpaid and undervalued work that sustains societies. It equips policymakers to design budgets, labour laws, and social protection that truly recognize and redistribute care. Building and using this evidence base should be a political and policy priority for every government.

9. Feminist Movements and Political Traction

A consistent thread through all discussions was the **political role of feminist movements.** From national coalitions in Latin America to regional advocacy in Africa, movements have reframed care as a public issue and kept pressure on governments to act.

Participants acknowledged the role and impact of having the Global Alliance for Care as a convenor to bring movements together and put care at the centre. Participants reflected on the importance of alliances between movements, researchers, and government champions, right from the grassroots to the national, regional and global levels.. Advocacy gains at the W20 and G20 demonstrate how sustained coalition work can shift norms in global governance. Yet, movements also face fatigue and resource constraints. Participants called for more predictable funding for feminist organizing to maintain policy engagement beyond one-off events.

Reflection: Technical solutions alone cannot transform care; political power does. In the end it is about priorities and political will. Feminist movements are not complementary actors—they are the drivers of change.

While contexts differ, several shared insights emerged:

1. **Institutionalization matters.** National care systems must be embedded in law and budget frameworks, not reliant on donor cycles.
2. **Multi-sectoral design is key.** Care systems are about leveraging available infrastructure and coordinating across ministries. Care is inextricably linked to labor, health, infrastructure, and education - and better coordination across government can maximise impact.
3. **Local governments are crucial.** Municipal innovations often pioneer integration and accessibility but need sustained funding.
4. **Fiscal justice underpins sustainability.** Care cannot be scaled under austerity; equitable fiscal policy is a precondition.
5. **Evidence sustains agendas and drives legitimacy.** Regular data collection, research and impact evaluation make care visible and defensible in policy debates. It is an important tool to sustain care policies and investments throughout political changes.
6. **Solidarity strengthens innovation.** South–South collaboration accelerates learning and amplifies collective voice in global fora.

> **Learning Reflection**: Learning Reflection: The diversity of approaches across Latin America and Africa is an asset, not a challenge. Different starting points allow for mutual learning and shortening processes, avoiding bottlenecks, and sharing strategies.

The W20 and Global Advocacy Context

The W20 side event reinforced the strategic importance of positioning care within macroeconomic and global governance frameworks. Participants noted that while care now is growingly featured in multilateral declarations, actual implementation and financing lags. Bridging this gap requires connecting feminist advocacy to fiscal reform, debt negotiations, and climate finance. The discussion highlighted the need for a **Global Care Compact**—a cross-regional framework to coordinate financing, governance, and accountability. This compact could align G20, AU, and UN commitments and provide technical support for national systems. Participants agreed that care should not be siloed as a gender issue but integrated into **economic and environmental policymaking**. Linking care to human capital, labor productivity, and resilience can secure broader political buy-in.

Institutional and Operational Reflections

From an internal learning perspective, several reflections emerged for donors and conveners:

- **Learning spaces matter.** The workshop's participatory format encouraged candid dialogue and cross-sector trust, fostering shared ownership of outcomes.
- **Bridging research and policy is crucial but remains challenging.** The role of evidence was recognized as central to advance the care agenda and implementation of systems and policies. Yet, researchers and policymakers often operate on different timelines and incentives; deliberate mechanisms are needed to translate evidence into reform. An interesting example is the Care Fund in Latin America that, by design, fosters partnerships between care policymakers, local researchers and feminist movements
- **Coordination between funders must improve.** Parallel initiatives risk duplication; joint frameworks to streamline collaboration, and sustain movements rather than creating new projects, and pooled funding could enhance coherence and impact.
- **Follow-through is essential**. Participants stressed the importance of post-workshop action—joint publications, policy dialogues, and regional task forces to maintain momentum.

For Governments

1. **Institutionalize care as a public sector responsibility.** Adopt national care frameworks that integrate childcare, eldercare, and disability support under a unified vision. Refer to targets set by the ILO's Johannesburg Goal and the W20's recommendation of allocating 10% of national income to care systems.
2. **Embed care in national development and fiscal planning.** Treat care as economic infrastructure, not residual social spending.Create dedicated budget lines, introduce gender-responsive budgeting, and explore innovative finance (e.g., debt-for-care swaps, climate funds).
3. **Strengthen governance and coordination.** Establish inter-ministerial committees and multi-level governance mechanisms linking national, regional, and municipal actors, including local feminist movements, caregivers, and researchers.
4. **Protect and professionalize the care workforce.** Put caregivers voices at the centre of policy design.Extend labor protections, develop training and certification systems, and include care workers in social protection schemes.
5. **Regulate the private sector** as a provider of care services to ensure dignified jobs and service quality. But also regulations can incentivize the private sector to become co-responsible. Beyond paying taxes to contribute their share to the fiscal space, companies can invest in care services for their collaborators and employees through their value chains, by contributing to shifting social norms, and more.
6. **Promote norm change.** Pair policy reform with public education and male-engagement initiatives to redistribute care responsibilities and foster cultural change.

For Multilateral and Regional Institutions

1. **Inclusion of care in Leader's Statement.** Recommendations and targets on the care economy, as outlined in the W20 Communique and C20 Communique, in the G20 Leaders Statement
2. **Advance a Global Care Compact.** Leverage the regional commitments including the recent Tlatelolco commitment (Regional Conference on Women August, 2025), and coordinate G20, FFD4, AU, and UN commitments into a shared framework for financing and accountability.
3. **Integrate care into economic governance.** Mainstream care in climate, debt, and fiscal justice negotiations.
4. **Support global policy platforms.** Strengthen the Global Alliance for Care as a hub for evidence, peer exchange and South–South collaboration.
5. **Fund feminist movements and research networks.** Recognize advocacy as public infrastructure for accountability and learning.

For Research and Donor Communities

1. **Invest in longitudinal data and impact research.** Institutionalize time-use surveys, care economy accounts, and fiscal analyses
2. **Support action research and experimentation while avoiding fragmentation and ensuring sustainability.** Fund pilots that test integrated service delivery, municipal models, and innovative financing ensuring sustainability and coordination. Focus research on scaling what works.
3. **Bridge evidence and policy.** Create rapid-response synthesis and communication mechanisms for policymakers.
4. **Model inclusive convening.** Continue facilitating cross-regional learning spaces that center local voices and lived experience.