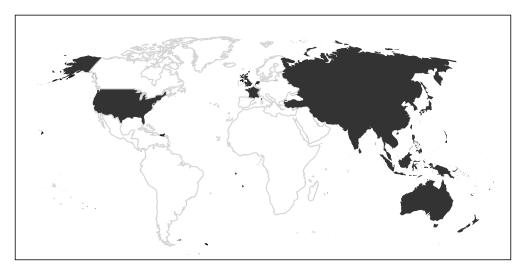
Valuing and Investing in Unpaid Care and Domestic Work

COUNTRY CASE STUDY Cambodia







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Valuing and Investing in Unpaid Care and Domestic Work COUNTRY CASE STUDY Cambodia

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Explanatory notes

The analyses in the *Valuing and Investing in Unpaid Care and Domestic Work: Cambodia* report are based on data and information available up to the end of January 2022. Groupings of countries and territories or areas referred to are defined as follows.

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Abbreviations

ESCAP United Nations Economic and Social Commission for Asia and the Pacific

ILO International Labour Organization

MOEYS Ministry of Education, Youth and Sports

MOWA Ministry of Women's Affairs

SDG Sustainable Development Goal

UNDP United Nations Development Programme

Introduction



The care economy and women's disproportionate role in both shouldering a greater workload and investing more time are well documented (ESCAP, 2021a; ESCAP and UN Women, 2020; ILO, 2018). The COVID-19 pandemic has put a deeper spotlight on how critical this care work is for human survival, health and well-being. Women have been on the front-line of the COVID-19 public health response as essential workers, and their unpaid care and domestic work burdens within the home have intensified owing to the pandemic (UN Women, 2020). As part of the United Nations call to action in the immediate aftermath of the outbreak of COVID-19 (UN, 2020b), the Economic and Social Commission for Asia and the Pacific (ESCAP) commissioned research to document the gendered effects of the COVID-19 pandemic and the policy responses to address the care work of women. A regional report highlighted the extent to which policymakers across countries in Asia and the Pacific have accounted for the gender- and caredifferentiated needs of women while responding to the pandemic. A companion report on the Association of Southeast Asian Nations (ASEAN) region further examined the state of the unpaid care and domestic work done by women in Member States of ASEAN.¹

This case study on Cambodia enhances ESCAP's technical and advisory assistance to its member States, in particular aligning with the ASEAN region's efforts to bring care to the centre of public policy. The ASEAN Comprehensive Framework on Care Economy was developed with inputs from ASEAN countries and sectoral, regional and international bodies, such as ESCAP, to ensure that a care-responsive recovery strategy leaves no one behind (ASEAN, 2021). The

scope of care in this framework takes a broad lens towards direct and relational care work (paid and unpaid) as well as other areas needed to build back better: reskilling and upskilling employability in care sectors, embracing the digital transformation of the care economy, promoting active ageing and lifelong learning, developing the creative industry and encouraging social entrepreneurship and smart cities (ibid., p. 2).

ESCAP's request for country-level case studies centred on Cambodia, Indonesia and the Philippines and aims to direct great attention and resources to the unpaid care component of the care economy among member States. The case studies document the evolution of the unpaid care economy agenda within national machineries and create a repository of promising practices and upcoming initiatives that can aid policymakers in making a case for valuing and investing in unpaid care work. This Cambodia case study report showcases the country's commitment and leadership in furthering Sustainable Development Goal (SDG) 5 on gender equality, with attention on target 5.4 that seeks to "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".2

Care is an issue that cuts across all 17 SDGs. It is essentially a subsidy to the global economy, with the unpaid and underpaid work of caregivers (largely women and girls) reproducing the productive labour force (Enríquez, 2018). The inequitable, gendered and unfair social organization of care work around the

¹ The ESCAP publication, COVID-19 Policy Responses to Unpaid Care in Asia and the Pacific, is available at www.unescap.org/kp/2021/covid-19-and-unpaid-care-economy-asia-and-pacific and Valuing Unpaid Care Work in ASEAN Countries is available at www.unescap.org/kp/2021/addressing-unpaid-care-work-asean.

² See Goal 5: Gender Equality, The Global Goals.

world is one of the main hinderances to women's free and fair economic participation. Resulting in income and time poverty, this unequal distribution of unpaid care and domestic work also has deleterious effects on women's health and well-being. Adding the demands of micro-entrepreneurship or labour force participation amounts to a double shift and exacerbates the depletion of well-being (Chopra and Zambelli, 2017). Underinvestment in the public provision of physical and social care infrastructure leads to an overemphasis on families and households filling in the gap to care for dependants (children, the sick, older persons and persons with disabilities). This is noted in the literature as "gendered familialism" (Palriwala and Neetha, 2009) and has led to the development of global care chains (Yeates, 2012).

In this case study, global and regional data on the unpaid care economy are contextualized with respect to Cambodia, highlighting the way the country has responded to the twin challenges of undervaluation of women's unpaid care and domestic work on one hand and the barriers and resistance to furthering this agenda on the other. An initial overview addresses the national macroeconomic, sociopolitical and institutional contexts in Cambodia, which forms the backdrop against which the care economy agenda needs to be understood. The subsequent section focuses on the journey towards enhancing gender equality and women's empowerment, with special

emphasis on the nature of the unpaid care economy and its gendered implications. Steps taken to address the unpaid care and domestic work of women across various care policy categories as well as ongoing, promising initiatives are featured. The final sections of the report capture some of the main challenges to furthering this agenda and make recommendations for action planning and policy programming. Relevant global and regional promising practices are highlighted to strengthen the case that not only is valuing care work a moral and ethical imperative but to also show that it is possible – investments in the care economy can reap rich dividends for the economy (De Henau and Himmelweit, 2021; Ilkkaracan and Kim, 2019).

Data for this report were compiled from various secondary sources published by the Government of Cambodia, United Nations agencies (including ESCAP, the United Nations Development Programme (UNDP), the International Labour Organization (ILO) and the World Bank) and regional organizations, such as the Asian Development Bank. Some information-sharing sessions were conducted with senior officials in the Ministry of Women's Affairs (MOWA) to understand the background and evolution of the women's agenda in the country as well as the current emphasis and initiatives on women's economic engagement, especially unpaid care and domestic work and their connection with women's paid work.

Macro socioeconomic political context



After years of civil war and protracted conflict, Cambodia emerged around 1993 to rebuild its broken social and human infrastructure and transform into a democratic and progressive country. Starting out as a least developed country, Cambodia has experienced robust economic growth and dramatic reduction in poverty in the past two decades, allowing it to move into the lower-middle-income bracket in 2016 (MOP, 2019). A robust average annual growth rate of 7.7 per cent between 1998 and 2019 made Cambodia one of the fastest-growing economies in the world (World Bank, 2021). The Government remains focused on enhancing the development of the people of Cambodia. The country has more than doubled its gross domestic product (GDP) in the past decade (UN, 2021c), with significant expansion in its exports (mainly garments), construction and manufacturing sectors (MOP, 2019). With the country on a path to modernization, industrialization and urbanization, the employment share of Cambodians in agriculture has dropped significantly while it has risen in industry and service occupations (UN, 2021c). It is a transformation of a largely agrarian economy into the latest Asian tiger (OECD, 2017). This performance led the Government to its vision of becoming a high-income country by 2050. It adopted Phase IV of its Rectangular Strategy and began working towards achieving its localized SDGs (UN, 2019a).

This progress is now threatened by the COVID-19 pandemic. Economic growth forecasts have been reduced as job losses rise, and 45 per cent of households continue to experience income losses (World Bank, 2021). Years of progress in human capital and social development could be put at risk without fresh thinking and new strategies for looking forward (UN, 2021b). Cambodia has a relatively young population, having experienced a baby boom in the

post-civil war years. Today, it has the potential to leverage a demographic bonus with a young and productive population as the child dependency ratio declines slightly and the old-age dependency ratio increases slowly (UN, 2021b). This means that policies must address the education, skill development and infrastructure needs of a young and productive population while planning for a future in which an increasingly aged population will need greater care and social protection.

Women and girls are especially vulnerable in the face of this economic reversal. Being overrepresented in economic sectors like the garment industry and tourism, their employment prospects have been badly hit by the pandemic. As much as 60 per cent of the micro, small and medium-sized enterprises are owned by women. They are often not formally registered and hence unable to avail of government benefits (UN, 2021b). In conjunction with women's greater share of unpaid care and domestic work within households, it is imperative for the country to keep a strong focus on gender-responsive policy measures to tackle the setbacks from the pandemic as well as to accelerate women's participation in and contribution to the economy. The prime minister's address on International Women's Day on 8 March 2022 highlighted the theme of "Gender Equality Today for a Sustainable Tomorrow". He underscored the crucial importance of all stakeholders, including the private sector, in recognizing the value of unpaid care work and thus identifying ways to reduce the workload of women and girls while increasing public investment in care and social welfare services. As Cambodia assumes the role of ASEAN chair and leads the second ASEAN Women Leaders' Summit in 2022, this message reaffirms the Government's commitment to gender equality and the critical role of women in leadership (Phon, 2022).

Institutional context for gender equality



Despite the impressive economic performance over the past few decades, Cambodia continues to lag behind its ASEAN neighbours in terms of progress towards gender equality. The Gender Development Index,³ prepared as part of the UNDP Human Development Index 2020, ranks Cambodia in group 4, which is medium-to-low gender equality between men and women. Three basic dimensions of human development are taken into account to arrive at the Gender Development Index: health, knowledge and living standards. While women in Cambodia enjoy longer life expectancy than men, they continue to lag in educational attainment and income measures.

The sex ratio favours girls (at 95.4 boys for every 100 girls) (UN, 2021c), and there has been a significant drop in maternal mortality, from 488 deaths per 100,000 live births in 2000 to around 160 deaths in 2017 (UN, 2021b). Although less than 10 per cent of women parliamentarians enjoy ministerial positions (WEF, 2021), the overall representation of women is 20 per cent in the Parliament. Women's presence at other levels of government has also increased over the years, from 7.4 per cent in 1998 to 14.5 per cent in 2018, with 41 per cent of civil servants being women in 2017 (MOP, 2019). Measures to integrate genderresponsiveness and raise awareness within the Government have led to an increase in representation of women in decision-making roles across ministries, with some ministries surpassing the 33 per cent target. Notable among these are the Ministry of Justice (at 38 per cent); the Ministry of Culture and Fine Arts and the Ministry of Social Affairs, Veterans and Youth Rehabilitation (at 36 per cent each); and the Ministry of Tourism (at 35 per cent) (UN, 2021a).

The female labour force participation (76.9 per cent) is one of the highest in the ASEAN region, alongside the Lao People's Democratic Republic and Viet Nam, but it still lags that of men (at 87.7 per cent) (ESCAP, 2021b). Despite the high female labour force participation, the gender wage gap prior to the pandemic was 19 per cent (UNDP, 2021). The high participation rate of women in paid work must be kept in perspective, with the fact that 93.8 per cent of these women are engaged in informal employment (ASEAN Secretariat, 2019). This means that women are subject to precarious work conditions, low wages and the lack of social security benefits on account of self-employment or being employed as domestic workers. Women are also underrepresented in senior managerial positions in the private sector. They account for 29.3 per cent of migrant workers, with a major flow towards Thailand (UN, 2020a). Availability of time and access to resources, finance, information and technology are some of the other barriers to women's full and effective participation in an economic capacity (MOWA, 2020).

Despite these advances, parity with men continues to be slow in important areas, such as wages, educational achievement, political influence and overall presence in senior management. Women and girls still end up with fewer years of schooling: lower enrolment in secondary and tertiary education; underrepresentation in science, technology, engineering and mathematics subjects; and a smaller presence in senior decision-making roles, within and outside government. This has important implications for the value and recognition afforded to women's work, particularly unpaid care and domestic work.

The political economy landscape of women's paid and unpaid work is mediated by important factors, such as the formal, institutional mechanisms and legislative climate, the informal social and cultural norms and the concrete, gender-differentiated policies and programmes. The following sections review the progress in each of these areas in Cambodia.

3.1 Legislative frameworks

The constitution of a country provides the primary framework for the safeguarding of civil and human rights. The Constitution of the Kingdom of Cambodia, 1993, amended in 2008, has several provisions that support the protection of women's rights and recognize and value care and domestic work. Box 1 summarizes some of the principles enshrined in the Constitution to support women's rights, children's rights and the rights of other groups of dependants who need care.

Article 36, for example, paves the way for the recognition of domestic work as equal in value to paid work and thus lays the foundation for caregivers to be valued. It provides a crucial starting point from which laws, policies and programmes can be devised to further the agenda of recognition, reduction, redistribution, reward and representation of care work and care workers⁴ (ILO, 2018). Similarly, provisions under article 46 and article 73 make way for supporting the needs of rural women and for establishing childcare services to aid women's caregiving roles. Section 3.3 elaborates on the specific policy and programmatic measures undertaken or in the pipeline to realize their constitutional protections.

Guided by an earnest commitment to transform itself into a progressive and developed country, Cambodia's Vision 2050 document provides the overarching ambition, within which localization of the SDGs are being carried out by adapting the targets and indicators to the national context and adding an 18th goal on the clearance of landmines and unexploded

BOX 1 Key constitutional provisions

ARTICLE 36

- Khmer citizens of either sex shall enjoy the right to choose any employment according to their ability and the needs of the society.
- Khmer citizens of either sex shall receive equal pay for the same work.
- Housework shall have the same value as work outside the home.
- Khmer citizens of either sex shall have the right to obtain social security and other social benefits as determined by law.

ARTICLE 45

- All forms of discrimination against women shall be abolished.
- The exploitation of women in employment is prohibited.
- Men and women are equal in all fields, especially with respect to marriage and family matters.

ARTICLE 46

- The termination of a woman's employment because of her pregnancy is prohibited. Women shall have the right to take maternity leave with full pay and with no loss of seniority or other social benefits.
- The State and society shall provide opportunities to women, especially for those living in rural areas without adequate social support, so that they can obtain employment and medical care, send their children to school and have decent living conditions.

ARTICLE 73

• The State shall pay attention to children and mothers. The State shall establish nurseries and help support women who have numerous children and have inadequate support.

ARTICLE 74

• The State shall help support the disabled and the families of combatants who sacrificed their lives for the nation.

ARTICLE 75

• The State shall establish a social security system for workers and employees.

Source: MOFAIC, 2008.

⁴ The ILO refers to this as the 5R framework, or "the high road to care".

ordinance. The final framework thus comprises 18 goals, 88 nationally relevant targets and 148 globally and locally defined indicators (MOP, 2019). Primary strategic documents, such as the Rectangular Strategy Phase IV and the National Strategic Development Plan 2019–2023, help the Government set its strategic priorities.

Article 16 of the Law on Education of 2007 makes early childcare and childhood education from birth to before kindergarten the responsibility of the State through the provision of childcare centres in communities. The Ministry of Education, Youth and Sports (MOEYS), along with other relevant ministries, is tasked with detailing the meaning and scope of early childcare and childhood education. The MOEYS adopted the Education Strategic Plan 2019–2023 to implement reforms across the education, youth and sport subsectors to support Cambodia's vision of moving to an upper-middle-income country by 2030.

3.2 Women's machineries

The MOWA is the main institutional machinery for guiding the country towards gender equality and women's empowerment. Within the Neary Rattanak V strategic plan (2019-2023), the MOWA (2020) identified gender mainstreaming as the core strategic framework with six priority areas: women's economic empowerment, education of women and girls, health of women and girls, legal protection for women and girls, women in public leadership and politics, and gender and climate change. Increasing the capacity-building and efficiency of the MOWA and other ministries is the main institutional support strategy. The MOWA realized that women alone representing and advocating for women's interests is insufficient to bring about lasting change. It has therefore pioneered an approach since 2005 to partner with other ministries and engage them in gender mainstreaming efforts.

A Gender Mainstreaming Action Plan for civil services guides the setting up of Gender Mainstreaming Action Groups across the line ministries. All management and technical experts within the MOWA are members of a Gender Mainstreaming Action Group. By 2018, as many as 30 ministries and institutions had developed their own Gender Mainstreaming Action Plan to pilot their actions. The MOWA liaises with the Ministry of Economy and Finance to promote gender-responsive budgeting as a tool for gender mainstreaming across sectors. In 2016, funds from the national budget and development assistance were made available to 28

government ministries and institutions to implement their Gender Mainstreaming Action Plan (MOP, 2019). The MOWA meets periodically with the Gender Mainstreaming Action Groups to review progress and support them as appropriate. The MOWA has also conducted capacity-building programmes on such topics as gender-responsive budgeting.

Under the coordination of MOWA, other initiatives undertaken or in the pipeline are: formulation of the first National Policy on Gender Equality; integrating gender into policies, such as the Population Policy and the National Social Protection Framework; integrating gender into reform processes, such as public administration reform, public financial management reform and legal and judicial reform; implementation of the Labour Migration Policy (2019–2023) to have gender-responsive policies in addressing the needs of migrant workers; incorporating a gender lens into climate change policy formulation, green growth and disaster management via the Gender and Climate Change Strategic Plan; and drafting a National Strategy to promote women in management positions at the subnational levels (UN Cambodia, 2021a; MOP, 2019).

In addition to the public sector's capacity-building initiatives, the MOWA works with development partners and international organizations as well as civil society leaders and the private sector to mobilize a whole-of-county effort towards shifting the needle on gender equality. One example is the Leading the Way for Gender Equality programme (2017-2020), in partnership with UNDP, that aims to strengthen national systems and capacities by working with universities, youth networks and four ministries and institutions: the MOEYS, the Ministry of Information, the Ministry of Culture and Fine Arts and the Civil Service (UNDP, 2019). Another example is the United Nations' efforts to collaborate with the Ministry of Industry, Science, Technology and Innovation and the MOWA in conducting a gender policy gap and training needs assessment on enhancing gender equality and women's economic empowerment in a green industry. Based on the findings, an action plan was developed with guidance tools on integrating gender into renewable energy policies (UN, 2021a). Box 2 features the efforts by the Ministry of Labour and Vocational Training to bring about decent work conditions for domestic workers.

Other institutional mechanisms available for coordinating and promoting the status and social welfare of women are the National Council for Women as well as trade unions representing the interests of women. The Council was established in 2001 by royal

BOX 2 Promising practice to regularize informal workers

The Ministry of Labour and Vocational Training conducted awareness-raising sessions since 2015 on the work conditions of domestic workers, with 140 participants from different line ministries, enterprises, civil society organizations and development agencies. Tripartite consultations were conducted to develop a road map and identify priority actions towards implementing the International Labour Organization Convention on Domestic Workers, 2011 (No. 189).

In April 2018, the Ministry issued Prakas No. 235 on Working Conditions for Domestic Workers in Cambodia. The Prakas defines what constitutes domestic work and includes a description of tasks and responsibilities, the minimum age (18 years generally and 15 years for light duties) and requires written contracts, days off and paid public holidays. The labour law also requires employers to register their domestic workers with the National Social Security Fund.

Source: MOWA, 2019.

decree as an advisory body to the Government. Trade unions working for urban women workers are actively engaging with the MOWA on the Women Worker's Rights through Stronger Trade Unions project. Three unions in particular: the Cambodian Food and Service Workers Federation, representing hotel and restaurant service staff and the large number of women involved in food processing; the Building and Woodworkers Trade Unions of Cambodia, representing the large number of women employed in no-skill, low-waged labouring jobs in Cambodia's booming construction industry; and the Independent Democracy of Informal Economy Association, representing informal economy workers, such as street vendors, waste collectors, domestic workers and tuk-tuk drivers. Their focus is on decent work for improving the lives, health and well-being of women workers through awarenessraising and advocacy among government officials and employers.

Despite the legislative and formal institutional measures in Cambodia, patriarchal attitudes remain dominant, and the general awareness in society about the importance of women's economic empowerment is low.

3.3 Social and cultural norms

Like other societies in the South-East Asian region, Cambodia too has a culture that emphasizes the family and women's roles in maintaining family welfare. The signal of being a good wife or mother is the extent to which one cares for the family. Providing gratitude to older persons is another cultural practice that directs the young to care for older persons. This role mostly falls on women in the family. With its large rural population and agricultural background, women in Cambodia have had to traditionally balance both paid and family care work. In a major United Nations survey conducted in 2013, 82.4 per cent of men and 92.7 per cent of women thought that a woman's most important role is to take care of her home and cook for her family, while 62.6 per cent of men and 57.1 per cent of women agreed that men should have the final say in all family matters (UNDP, 2019). This clearly points to the prevalence of traditional and patriarchal gender norms and social attitudes.

Cambodia is one of the few countries within the Asia-Pacific region to have national time-use data available on the allocation of time by men and women towards unpaid care and domestic work (ILO and UNDP, 2018). Analysis of time use based on the 2004 Household Survey data found a gendered pattern of time use skewed in favour of men, who performed only 18 minutes per day of unpaid care and domestic work,5 compared with women who performed these activities for 188 minutes per day. These figures indicate the contribution of men in Cambodia is one of the smallest across the region, alongside men from India and Pakistan (ESCAP and UN Women, 2020). Additionally, Cambodian women spent 270 minutes on paid work, which accounted for more than 50 per cent of their total work time (Charmes, 2019). This points to the large burden of work and long working hours borne by women. The survey also found that women with tertiary education spent more time in paid work than their counterparts with a secondary level or a primary level

⁵ Unpaid care and domestic work here include all unpaid domestic services for own final use within the household, all unpaid care giving services to household members and all voluntary community services and help to other households.

education. While higher levels of education increase one's employment prospects, the overall cultural norm mandating unpaid care work as primarily the role of women is undeniably present.

Rapid gender assessments undertaken by UN Women (2020) have confirmed the further intensification of unpaid care work activities on women during the pandemic. Almost 30 per cent of women in Cambodia experienced an increase of at least three activities related to care or domestic work in the household, compared with 20 per cent of men who also experienced a similar increase. Single women living in households with children reported the greatest increase (UN Women, 2020, p. 9). Nguyen and others (2020) highlighted that decision-making power within the household is linked to income contribution. With income and job loss being experienced more by women during the ongoing pandemic, the traditional distribution of power within the household is likely to worsen. Another negative knock-on effect of the pandemic owing to loss of livelihoods and income is the increase in likelihood to consume cheaper and less nutritious food by women and girls, who are largely responsible for household food consumption.

This could exacerbate the problem of malnutrition and anaemia, especially among pregnant and lactating women (UN, 2021b). These factors underscore the play of gendered social expectations and normative behaviour with adverse consequences for women.

Efforts are needed to loosen the enduring influence of traditional gender norms and to caution against policies that could entrench stereotypes of female behaviour, for example, public orders proposing to prohibit certain dress codes for women (UN, 2021b, p. 41). Trainings conducted by the MOWA at the subnational levels have been successful in bringing about some mindset shifts. This is evidenced by stories of families becoming open to the idea of sending their daughters to school for education instead of limiting them to housework. Considering the larger constraints on women's time, there is a need to include men in the sharing of family responsibilities. Instituting systems of work-life balance has been identified as one of the strategic priorities in the Neary Rattanak V guiding document for MOWA (MOWA, 2020, p. 29). Box 3 singles out a campaign to promote social change that was a clever step in a good direction.

BOX 3 Promising practice on behaviour-change campaign

In 2011, the Ministry of Women's Affairs launched the Good Men Campaign to effect positive social change and prevent violence against women through the use of men's engagement. This campaign was a nationwide communication initiative, targeting 3.5 million men aged 15–49 years. It produced several TV and radio spots, posters, brochures and other materials to deliver the message for positive behaviour change among men. The campaign aimed to promote an understanding of what it means to be "a good man" and stop violence against women by using such messages as "Good men give value to women".

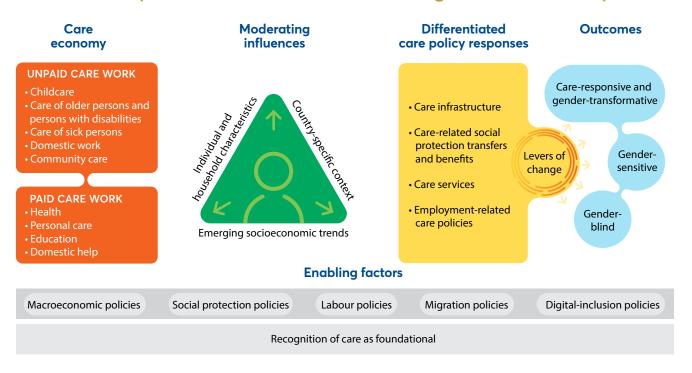
Source: United Nations Population Fund, 2015.

Addressing unpaid care work

The focus on valuing and redistributing unpaid care and domestic work is enshrined in the Cambodian SDG 5, which aims to foster gender equality. Target 4 of SDG 5 aims to 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. Under this goal, target 5.4.1 quantifies the number of legal and policy measures to address the work-life balance, recognize unpaid care and domestic work and promote women's access to decent employment. Cambodia's Voluntary National Review in 2018–2019 evaluated the country's efforts on SDG 5, target 4.1 to be ahead of what is expected, with eight legal and policy measures adopted while the target asks for seven (MOP, 2019).

ESCAP (2021a) developed a conceptual framework (figure 1) to address the unpaid care economy, which comprises the care of children, older persons, persons with disabilities and sick persons, household and domestic chores as well as voluntary community services. The time, extent, quality and outcomes of this care along with who provides the care and where are mediated by many factors, such as individual household characteristics, country-specific contexts, emerging socioeconomic trends and the overall enabling legislative and policy landscape in the country. The type of gender-differentiated care policy response and the success of levers of change then determine the type of care-responsive and gender-transformative outcomes.

FIGURE 1 Conceptual framework for care-sensitive and gender-differentiated policies



This section uses the four care policy categories identified in figure 1 to evaluate the efforts and success Cambodia has had in prioritizing and addressing women's gender-differentiated care needs. Box 4 details the areas where instituting policies can materially address the differentiated care needs of women and girls, who tend to perform the lion's share of care work in Cambodia.

BOX 4 Care policy categories to address unpaid care and domestic work

Care infrastructure — water, sanitation, energy, transport, food services, health care infrastructure for persons who are sick (HIV patients, COVID-19 patients) or living with a disability and pregnant women.

Care-related social protections — cash transfers, cash for care, vouchers, tax benefits, non-contributory pension schemes.

Care services — childcare, older person care and care provisions for persons with disability or illness through the State or the market.

Employment-related care policies — sick leave, family-friendly working arrangements, flexitime, career breaks, sabbaticals, severance pay, employer-funded or contributory social protection schemes like maternity and parental leave benefits.

Source: ESCAP, 2021a, p. 15.

ESCAP recently commissioned a survey in partnership with the MOWA to measure the experiences of women entrepreneurs, public servants and informal workers to understand their unpaid care and domestic work responsibilities – how they affect their paid work and how their paid work has in turn affected their caring responsibilities. By interviewing their partners, it is hoped that meaningful insights will be gained into the challenges of addressing the paid–unpaid work connection and its potential in transforming gender relations within households.⁶ The findings are expected to be available by December 2022 and lead to more consultations across government institutions and line ministries to inform action planning.

4.1 Care infrastructure

Infrastructure that can ease the drudgery and difficulty associated with care work and that reduces women's time and energy spent in care work is included as part of the care infrastructure. This can refer to physical infrastructure, such as schools, hospitals, roads, transport and affordable housing, as well as microinfrastructure, such as electricity, water, food services and piped gas.

Given a large rural population, Cambodia has had to combat differential living standards and access to infrastructure between rural and urban areas. For example, Cambodians living in rural areas and in low-income households have less access to water, sanitation and hygiene facilities than urban and richer households. An estimated 40 per cent of rural Cambodians do not have basic handwashing facilities, like soap and water, and up to 22 per cent rural households experience wet-to-dry season decrease in water sources (UN, 2021b). Around 79 per cent of the poorest rural families still practise open defecation, compared with 8 per cent of rich rural families (ibid.). Another area of the rural-urban gap is in primary health care infrastructure and spending, with rural populations incurring huge out-of-pocket expenditure as a total percentage of health expenditure (ILO, 2017, p. 107).

Lack of infrastructure and facilities can have particularly gendered consequences. Unsafe transportation has been cited as one of the reasons for women with young children dropping out of factory work because they are unable to take their infants with them or commute for long hours, especially if living outside Phnom Penh (Better Factories Cambodia, 2018). Box 5 discusses the expansion in the road network, especially in rural areas, that has had helpful effects for women's ease and access of transport facilities to facilitate their paid and unpaid work.

Allocation of time to collect fuelwood or water or fodder increases dramatically for women in rural areas thereby resulting in time poverty for other care tasks, like cooking, cleaning, breastfeeding children or participating in market work. The Ministry of Rural Development has been promoting access to clean water and sanitation facilities. The National Strategic Plan for Rural Water Supply, Sanitation and Hygiene 2014–2025 was approved in January 2014, and each province created their own Provincial Action Plans in 2016, following from the National Action Plan.

In another positive development, the European Investment Bank, along with the Asia Investment Facility of the European Union and the Agence Française de Développement, signed a mutual reliance initiative in 2019 with the Phnom Penh Water Supply Authority to improve drinking water supply in and around the capital of Cambodia. The project's funding was set to enable the construction of the Bakheng Water Treatment Plant in the northern outskirts of Phnom Penh (EIB, 2019). It will help increase the water production capacity and extend the distribution network of the city, especially benefiting women and girls who are more likely to be responsible for water collection. Other clean water projects for low-income families have enabled cost and time savings for women, thereby reducing care burdens and ultimately increasing their health and well-being (Oxfam, 2021).

BOX 5 Promising practice on care infrastructure

The Ministry of Rural Development has made important progress in promoting access to improved water supply and sanitation in rural areas, in line with the National Strategic Development Plan and the Cambodia Sustainable Development Goal targets. The Ministry also has made significant progress in rehabilitating rural roads at the provincial, district, commune and village levels.

A total of 45,241 kilometres of rural roads is now registered under the Ministry. The improvements in rural road infrastructure have made travel easier for everyone, and women have better access to health centres, schools, markets and employment opportunities, thereby contributing to overall poverty reduction efforts in rural areas. For many rural women, switching to biogas has not only saved them money but has freed them from collecting firewood. Doing domestic chores is much faster, enabling women to have more free time for income-generating activities and participating in community activities.

Source: MOWA, 2019.

4.2 Care-related social protections

Social protection transfers and benefits have been the largest category of policy responses during COVID-19, attesting to the efficacy and popularity of this policy tool to address the needs of vulnerable and marginalized populations. Even before the pandemic, social protection was the centre of the SDGs. It has been promoted since 2012 through the ILO Social Protection Floors Recommendation (No. 202) as the global standard. "Well-designed social protection systems contribute to reducing poverty and inequality while enhancing social cohesion and political stability" (ILO, 2017, p. vi). Women continue to be overrepresented among the global poor (World Bank, 2020a), and aiming social protection programmes specifically at responding to women's needs is crucial.

Poverty levels have declined sharply in Cambodia in the past two decades - 13.5 per cent of people who were living below the nationally defined poverty line in 2014 reduced to 10 per cent by 2019. However, many families have only narrowly escaped falling below the poverty line, and 28 per cent of the population remain near-poor (UN, 2019a). As a result, the Government adopted the National Social Protection Framework (2016-2025) that provides non-contributory social assistance to vulnerable groups, such as older persons, pregnant women, children and persons with disabilities, as well as contributory pensions, social insurance, employment injury and unemployment benefits. The pandemic has presented an opportunity to expand this system and reach a wider base of poor and vulnerable households. Box 6 demonstrates the reach and impact of social protection measures on poor households, especially families with children.

Cash benefits for families with children continue to remain limited in scope, despite their positive developmental impacts. And fewer than one in ten persons with severe disabilities are covered by social protection schemes (ILO, 2017). Women being the primary caregivers for children and persons with disabilities are thus indirectly affected by this lack of social protection to vulnerable groups. It is encouraging that after the pandemic, disability allowance programme coverage is set to scale up in 2021–2022 through the roll-out of a national disability identification process (UN, 2021a).

BOX 6 Promising practice on care-related social protections

The IDPoor system of social protection is the national targeting system for identifying poor households for social assistance. Since May 2020, the on-demand system has allowed newly poor households to register. As many as 692,092 poor households comprising nearly 2.8 million people were able to benefit from cash assistance under the Cash Transfer for COVID-19 scheme as of March 2021. And 50 per cent of the beneficiaries were expected to be women.

Noteworthy is the cash transfer to pregnant women and families with children aged up to 2 years. More than 170,000 pregnant women and children younger than 2 years have received social protection stipends totalling \$10 million since June 2019. Around 68,000 women had received this benefit in March 2020 as a baseline and 6,600 more women were being added per month.

Cambodia, along with Japan and Malaysia, has attempted to put in place targeted social protections for women employed in non-standard forms of work.

Source: ADB, 2021; Samean, 2021; UN, 2021b; ESCAP and UN Women, 2020.

4.3 Care services

As outlined in box 4, care services refer to institutional care provided by the State or markets to address the needs of dependants, such as young children, older persons, persons with sickness or disability. This requires social care infrastructure and institutional capacity to be built as well as the availability of trained care professionals, regulatory guidelines, quality standards of care and adequate funding. Care services must also factor in disruptions caused by shocks, conflicts or climate change. The COVID-19 pandemic has already made the availability and access to necessary health and rehabilitation services more difficult due to mobility restrictions and threats of transmission.

Care of children - Cambodia launched an early childhood education programme with the objective of expanding early childhood services for children aged up to 6 years. The focus is to reach children from low-income families, ethnic minorities and children with disabilities. Community and homebased schools have been set up by the MOEYS, with 88 per cent of the preschools located in rural areas. Over the past ten years, the Early Childhood Care and Development Policy, the National Early Childhood Care and Development Action Plan, the Early Childhood Care and Development National Committee, a prakas (order) for managing private preschools and a prakas for recognition of early childhood care and development national core trainers and subnational core trainers have been announced. These provides the regulatory and foundational basis for quality and inclusive education in Cambodia (MOWA, 2019).

Home-based programmes (using core mother groups) for children aged 1-3 years are promoted, whereby mothers get information on early childhood education. These early childhood interventions have the potential to create transformative change for Cambodia because the curriculum can be used to influence young minds at an early age. Communitybased childcare is another initiative that MOWA is promoting. The first day-care centre in a public institution was set up on the MOWA premises in 2016 to support the childcare needs of civil servants. It has now become a model for other line ministries who have shown an interest in setting up a similar facility for their staff. Guidelines are expected to be included in the public services administration reform to integrate a gender lens and support civil servants' childcare needs. Day-care centres in garment factories and near street markets are being set up with the support of development partner funding, as elaborated in box 7.

Care of older persons – As a culture, Cambodians believe it is the responsibility of children to take care of their parents. Khmer custom requires "gratitude" or "spirit" to be paid to parents as a means of taking care of their needs in old age. However, widowed, abandoned or destitute elders, especially older women, need to be provided for by the State. The National Ageing Policy (2017–2030), along with the National Healthcare Policy and Strategy for Older People, 2016, aim to improve the well-being of older persons in the country. With the fertility rate stagnant, it is expected that the category of older persons will

BOX 7 Promising practice on childcare services

In June 2020, the World Bank financed a four-year project along with the Japan Social Development Fund, to provide a \$2.7 million grant to the French NGO Planète Enfants & Developpment to implement the Community-based Childcare for Garment Factory Workers Project. The project involves setting up 22 childcare centres to provide communitybased childcare services for children aged 3-36 months. Of garment factory workers, 90 per cent are women who are also the primary care providers for infants and young children. These childcare centres are expected to provide safe, reliable and affordable childcare thereby supporting women workers to stay employed after maternity leave and reduce absenteeism due to child illness. A dual benefit of such centres is the investment in early childhood development by focusing on cognitive growth, motor skills, social skills and early learning. The centres are expected to pay attention to the nutritional needs of children and monitor their development for better health outcomes.

Source: World Bank, 2020b.

increase from 8 per cent to 11 per cent of the total population by 2030 (Xinhua, 2018). Box 8 highlights some of the provisions available for the care of older persons. The goal is to provide training to caregivers, incentivize elder care businesses, encourage elder care volunteerism, protect older persons from all forms of abuse, establish community-based old-age centres and maintain appropriate standards of care. This will help remove age-related discrimination and enable older persons to participate fruitfully in family, community, economic, social, religious and political activities with dignity.

Care of persons with disabilities – In a 2016 empirical study, researchers estimated that in Cambodia, persons with disabilities incur an average additional living cost of \$40 per month. This is equivalent to 17.1 per cent of household income, and including these costs would show double the poverty rate for households, including persons with disabilities. But poverty among persons with disabilities remains largely underestimated (ILO, 2017, p. 73). Because women often provide care for this group of dependants, it indirectly affects their own income, health and well-being outcomes.

BOX 8 Promising practice for the care of older women

The National Healthcare Policy and Strategy for Older People, 2016 was launched by the Ministry of Health to promote healthy ageing based on a multisector, life course approach. It involves developing standards for the care of older persons, collecting disaggregated data on older persons' health and improving risk protection.

The National Ageing Policy (2017–2030) unveiled in 2018 takes a comprehensive approach to the social welfare, health care, economic needs and inclusion of older persons through nine priority areas. Given that women have higher life expectancy than men, older women are projected to outnumber older men. Often being poor, widowed and neglected, they are likely to face greater discrimination.

The Ministry of Social Affairs, Veterans and Youth Rehabilitation coordinates across line ministries through the Cambodian National Committee for the Elderly. The Ministry launched two important programmes:

- 1 Community-based Older People Development Programme
- **2** Family-based Care for Older People Programme.

A total of 569 Older People's Associations have been established at the commune, or sangkat, level throughout the country with engagement in health care, rice or cow banks, microcredit, funeral assistance and social activities. The Older People's Associations are particularly important for women because 10 per cent of older women are the sole adult in a household, compared with only 2 per cent of older men.

Source: MOWA, 2019.



Women washing in the river in Cambodia. Photo © Sasin Tipchai

4.4 Employment-related care policies

Articles 182 and 183 of the Cambodia Labour Law of 1997 allow women workers up to 90 days of maternity leave with half their wages and prohibits their being laid off during this period. For two months after returning to work, women must be given only light work to do and allowed breastfeeding breaks (box 9). There is no provision for paternity leave, although employees may avail of up to seven days of special leave in the event of childbirth. Additionally, article 186 requires employers who employ at least 100 women or girls to set up onsite day-care facilities. In the event of not being able to set up a facility, the employer must pay for the expense for female workers to use any day-care centre for children older than 18 months. Articles 219 and 220 require day nurseries for children younger than 6 years to be set up in plantations near workers' housing. Article 171 specifies a special leave time to be given to workers in the event of something directly affect their family, although there is no mention of the purpose, duration or payment for this special leave.

BOX 9 Legal provisions for pregnancy and childbirth

- · Women are entitled to 90 days maternity leave.
- An employer may not terminate an employee: because she is pregnant, while she is on maternity leave and immediately before taking maternity leave.
- Employers must pay employees who have at least one year work seniority half their wages and benefits for the duration of the maternity leave. Employers should calculate the payment on the basis of the employee's average pay during the 12 months prior to departing on maternity leave.
- During the first two months after returning from maternity leave, employees may only be required to perform light work.

Source: Better Factories Cambodia, 2018.

Challenges to furthering the care agenda

Estimating the monetary value of women's unpaid care and domestic work remains the primary challenge in measuring the value of the care work provided by unpaid carers. As feminist economists have found since the 1970s, women's care work within the household continues to be excluded from systems of national accounts and GDP calculations. As a result, policymakers tend to emphasize investments in sectors delivering immediate and high economic growth in GDP terms. The global consulting firm McKinsey & Company (2018) has estimated that \$4.5 trillion of additional annual GDP could be added to economies of Asia and the Pacific by 2025 if countries advance women's equality. This would amount to 12 per cent more than the businessas-usual GDP estimates. The socioeconomic impact of the continuing COVID-19 pandemic requires attention to gender-responsive strategies to help cover lost ground.

Despite pre-existing legislative frameworks and constitutional commitments to women's rights, labour rights and overall human rights, the **absence** of gender-disaggregated and care-disaggregated data continues to limit evidence-based policymaking. Absence of data hinders the ability to identify and quantify those in danger of being left behind. When something is not measured, it is not visible and hence receives no budgetary or implementation support. There are no studies available to measure the employment and income-generating potential of freeing up women's time for market work or investments in paid care sectors.

Societal attitudes are slow to change. Families continue to perpetuate the gendered division of labour by socializing women and girls to be responsible for care work. There is an urgent need to raise awareness and shift mindsets on the importance

of reducing and redistributing women's unpaid care and domestic work responsibilities. This requires efforts of other societal stakeholders, such as men, the State, markets and the community.

Many well-intentioned policies are unable to deliver the results or reach the needy in **the absence of funding and commensurate budgetary challenges**. Studies of community preschools show how teachers are often treated as volunteers and receive varying amounts as a stipend, leading to lack of motivation. Expansion of social protection and institutional care facilities like childcare centres or elder care require substantial funding outlays. In the aftermath of the pandemic, when the economy is slowing down, increasing the fiscal space for public spending on care will present a significant challenge.

Finally, **lack of capacity** is another pitfall that limits the perspectives and abilities of civil servants, local officials, commune leaders, religious monks and private and community organizations from incorporating a gender lens and a care perspective into their strategic action plans and policy designs.

Cambodia continues to have huge gaps in infrastructure and services between urban and rural areas. An overreliance on a few industries and economic sectors, with labour market segregation of women into garment production and tourism, has resulted in harmful effects to their income and livelihoods during the pandemic. Concentration of women in the informal sector and lack of support to women entrepreneurs are other barriers facing women's economic engagement.

Social investment in human capital is the need of the hour in Cambodia, and women are a pivotal constituency for catalysing change.

Recommendations for action planning

Care is foundational to human life. Unpaid care and domestic work form the critical substratum on which the edifice of societies, economies and polities are built. Persons who perform these care functions contribute not just to the mental and emotional well-being of others but also to economic growth, sustainability and the resilience of communities. The aim of MOWA as the primary agency to promote women's rights and gender equality in Cambodia is to increase awareness within government and the public regarding the importance of unpaid care and domestic work.

The conceptual framework of this report (see figure 1) illustrates several levers of change that are necessary for policymakers to anchor around. Given the possible synergies from regional collaborations, several recommendations and innovative solutions have been outlined in the ESCAP report, *Addressing Unpaid Care Work in ASEAN*, which member States can build upon (ESCAP, 2021b). Taking these as the basis, specific strategies and actions that emerge for the Cambodian context for each of the four policy categories are detailed in figure 2.

6.1 Recommendations for levers of change

This section proposes the concrete action for change that policymakers in Cambodia should bear in mind to address women's unpaid care and domestic work. Valuing and redistributing this work more equitably across all pillars of society have proven to benefit economic growth, democratic institutions, women's rights and economic empowerment as well as gender equality outcomes. Universal coverage — be it of health care, childcare or social protection — must be the goal to ensure equitable and inclusive growth. National integrated care systems, such as in Uruguay, provides an example (box 10).

FIGURE 2 Levers of change to mainstream care policies



Source: ESCAP, 2021b, p. 57.

1 Financing of care policies - Given the economic slowdown and tightening fiscal space in most countries, innovative ideas and multilateral partnerships are needed to raise adequate revenue and funds. Financial assessments and genderresponsive budgeting within existing budgetary outlays of line ministries must be taken up as a priority. The United Nations Country Team in Cambodia, through the Joint Sustainable Development Goal Fund and the South-South Partnership Fund, was able to raise \$3 million to create an SDG financing portfolio. Two joint programmes, the Integrated National Financing Framework and the Joint Credit Guarantee for Women Entrepreneurs, aim to expand policy options for financing the SDGs (UN Cambodia, 2021a). Transforming tax and international finance

BOX 10 Promising practice on national care system from Uruguay

A national integrated care system was adopted by Uruguay in 2015. It aimed to create a system of care that consistently addressed the need for care services such as high-quality childcare centres for children younger than 3 years and homes or in-house professional care for dependant older persons and persons with disabilities. This also aimed to increase the professionalization of paid care services.

A National Care Board was created to manage the system, which consisted of the Ministry of Social Development and Culture, Ministry of Labour and Social Security, Ministry of Education, Ministry of Economy and Finance, as well as the Office for Planning and Budgeting, the National Administration for Public Education, the Bank of Social Provision, the Institute for Children and Adolescents, the National Care Secretary and the National Women's Institute. The Board regularly consults with representatives from NGOs, academia, unions and the private sector.

Source: ESCAP, 2021b.

systems in the country to create revenue streams that pay for investments in care is another important way forward (Women's Budget Group, 2020).

- 2 Changing social attitudes and norms Societal attitudes on the gendered division of labour within households and assigning the sphere of care to women needs to change. The pandemic has been an important opportunity for men who lost their job to contribute more to housework and childcare. This trend must be promoted. Media campaigns with gender-responsive messaging can be carried out through TV, print, posters and social media platforms. Initiatives like the successful Good Men campaign can be replicated with a focus on reducing and redistributing unpaid care and domestic work within the household. Reaching youth and parents is crucial for shaping attitudes of how the next generation is raised to think about gender equality. Religious leaders who hold influence over communities can be pivotal in aligning people's cultural and religious beliefs to support gender-equitable outcomes. Their influence must be leveraged in communities for change. School curriculum design is another important avenue for shifting mindsets during the tender ages, when students are more open to progressive ideas. Box 11 demonstrates a promising practice from India.
- 3 Evidence-based policymaking through the use of gender-disaggregated and care-disaggregated data Although it is widely recognized that women bear the disproportionate burden of unpaid care and domestic work, the absence of data on the differentiated effects of economic policies results in an invisibility of women's issues and care issues.

Concrete statistical evidence and updated national time-use survey data are necessary to argue for the valuing of women's unpaid care and domestic work. The Ministry of Planning is crucial for filling this void in Cambodia. The United Nations Development Assistance Framework on Data prioritizes the strengthening of data, statistical architecture and capabilities across line ministries. Support has been provided on building data exchange platforms and national census and surveys (UN, 2021a). Capacitybuilding of the National Statistics Institute has been undertaken and must be extended. A data exchange platform (CAMSTAT) with line ministries has been established and launched (UN, 2021a; 2019b). Data from the national census concluded in March 2019 can be leveraged to publish gender-disaggregated and care-disaggregated insights. This data can, in turn, be used more systematically to support targeted policies and social protections. Further, empirical studies on women's paid and unpaid work and their interconnections are needed to gather more evidence on the gendered effects of social policies and how various care policy categories interact and intersect with each other. Close monitoring and implementation of care policies and programmes, with a focus on their gendered effects, must be strengthened.

- 4 Increasing representation of women's issues by inclusion of women and carers into decision-making and programme leadership
 - Engendering all policy frameworks (the social protection framework, the national economic recovery framework and the Older Persons Policy) is essential. Women's voices must be present at the policy table and directly influence public policy.

BOX 11 Promising practice on a gender equity school programme in India

Since 2008, the International Centre for Research on Women has been testing and replicating the Gender Equity Movement in Schools (GEMS) programme, a school-based intervention that promotes gender equality among girls and boys, observes the social norms that define men's and women's roles and counters gender-based violence. In India, the GEMS programme promotes gender equality, including through challenging social norms, among school children aged 12–14. Children who participated in the programme later showed increased support for gender-equal practices, including greater male involvement in household work. Since the pilot programme started, GEMS has reached 2.5 million students in 25,000 schools. And 26,000 teachers have been trained in the successful implementation of the programme across five states. In November 2019, the government of Rajasthan State signed a memorandum of understanding with the International Centre for Research on Women to become the first state in India to implement an offshoot of the programme, GEMS for Boys, across the entire public school system.

The pilot phase in Mumbai demonstrated the potential of GEMS to engage young adolescents on issues of gender and violence and bring attitudinal change to support equitable norms. The outcome variables that demonstrate the greatest change are clustered around appropriate roles for women and men and girls and boys. Other attitudinal and behavioural changes are increased support for an older age at marriage for girls, greater male involvement in household work, increased opposition to gender discrimination and improved reactions to violence. The programme has been expanded to Bangladesh, the Philippines and Viet Nam.

 $\textit{Source:} \ \mathsf{ICRW}\ \mathsf{Flagship}\ \mathsf{Program:}\ \mathsf{Gender}\ \mathsf{Equity}\ \mathsf{Movement}\ \mathsf{in}\ \mathsf{School}, available\ \mathsf{at}\ \mathsf{www.icrw.org/research-programs/gender-equity-movement-in-schools-gems/.$

Cambodia lags in women's political influence. Improving women's representation in senior management and ministerial positions that carry decision-making influence is critical.

5 A whole-of-government approach to policy implementation – Each ministry represents a powerful partnership opportunity for the Ministry of Women's Affairs to liaise with and further the unpaid care work agenda. Working across the line ministries, such as the Ministry of Education, the Ministry of Labour, the Ministry of Finance, the Ministry of Planning, the Ministry of Rural Development and the Ministry of Industries and Technology, are some examples of how a gender lens can be integrated and facilitated. Section 3.3 has shown how investments in the core sector of each of these ministries has reaped dividends for women's progress. Accountable and responsive public institutions are also critical for central legislation to filter down to the local level and change the lives of women. It is no longer sufficient to adopt a gender lens into existing policies and frameworks. An "add women and stir" approach will not suffice to lead a gender-transformative and rebuilding effort. Each ministry must actively reflect on the manner and extent to which it can address women's unpaid care and domestic work directly in their core sectoral policies. The Ministry of Rural Development is already leading the way in this and provides a good example for other line ministries to engage with the issue of unpaid care work more centrally in their policy and programming.

These levers of change represent a comprehensive way of creating the institutional and policy climate conducive for shifting the balance and attention to the care agenda. The next section recommends specific policy measures under each of the four care policy categories that Cambodia can consider.

6.2 Recommendations for care policies

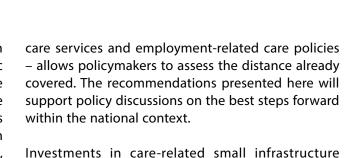
1 Care infrastructure – Concrete investments in rural infrastructure, especially clean piped water and safe transport connectivity between rural and urban areas, can have multiplier effects on women's economic participation. The evidence shows that investments in the care sectors, such as education and childcare, as opposed to big infrastructure, like roads or bridges, have positive effects on female employment, GDP growth and income improvement in other countries (De Henau and Himmelweit, 2021; Ilkkaracan and Kim, 2019). Similar investments for Cambodia must be carried out. Additionally, the availability of time- and energy-saving devices used for household chores and unpaid work can free up women's time. This time can be utilized by women for a range of other activities, including economic participation, rest or the better care of dependants. To become sustainable, all care interventions, be it in infrastructure or services, must be accompanied by a behaviour-change intervention and campaign for gains in the reorganization of care responsibilities.

- 2 Care-related social protections Shock-responsive social protection systems for the near-poor and catering to the insurance of informal worker groups where women are overrepresented are needed. Gender-responsive cash transfer programmes linked to maternity benefits, childcare allowances, disability allowances and the care of older persons are all forms that reduce or redistribute the care work performed by women within families to other societal stakeholders. More needs to be done for social protection transfers and benefits to reach households having persons with disabilities. Investing in social protection for persons with disabilities to encourage their employment prospects can also add to overall economic growth (ILO, 2017).
- **3 Care services** Affordable and accessible care services to address the care needs of dependants, such as children (especially aged 6 months to 6 years), older persons and persons with disabilities, must be universally available. Women have differentiated care needs based on the intersections of location, class, ethnicity, religion and household structure. These must be taken into account in policy design.

Lower-income households often are not able to buy care services from the market and need to be supported with publicly funded institutional care. In addition to affordability and accessibility, the quality of care provided is an important factor in uptake. Decent work and training to caregivers along with quality standards, guidelines and equipment must be provided. Regulation and monitoring of decent work conditions in paid care sectors to guard against malpractices or exploitation of caregivers who are predominantly women does not take place – but needs to.

4 Employment-related care policies – Employment laws must recognize the care responsibilities of all workers by extending benefits, such as flexible work and carer leave time, to men and women. Paternity leave is a notable measure that levels the playing field in the labour market by sharing the onus of childcare with fathers as well as ensuring that the costs of childcare do not discourage employers from hiring female labour disproportionately. Maternity and paternity leave length is another important factor in determining the effectiveness of this policy in supporting new fathers and mothers to return to work after birth and nursing. While the pandemic has encouraged work-from-home practices, onsite creches remain an important workplace policy measure that allows parents of very young children to combine childcare with their paid work. Given the large proportion of informal workers in Cambodia, greater standardization of employment contracts and access to care policies must be made available to them as well instead of limiting the practice to formal workers. Grievance redressal and complaints mechanisms against non-compliance of employers with care policies is an important mechanism to ensure implementation.

Conclusion



Even as COVID-19 has ravaged many countries in terms of the cost to life, public health and economic growth, it has highlighted the need to prioritize care in national development discourses. The unpaid care and domestic work provided by women and girls within households form the backbone on which much of society's progress is built. Sustainable, inclusive and gender-transformative recovery from the pandemic will be possible only when this disproportionate care burden will be addressed by policymakers. The recent ESCAP reports, COVID-19 and the Unpaid Care Economy in Asia and the Pacific and Addressing Unpaid Care Work in ASEAN, take a first step in this direction by calling attention to the size, scope and importance of the unpaid care economy among countries of the region. This effort dovetails into the ASEAN Comprehensive Framework on Care Economy that lays out six strategic priority areas to drive efforts to address the care economy more broadly: promoting healthy ageing societies, enhancing the role of the care economy in disaster resilience, accelerating the digital transformation of the care economy in ASEAN, building stronger and resilient families, enhancing social protection and increasing care for the environment (ASEAN, 2021).

and financing of universal care services and health coverage can meet the twin objectives of enhancing economic recovery post-pandemic while also ensuring a gender-differentiated and care-sensitive approach. Shock-responsive, resilient and inclusive social protection systems for poor households need to take into account their care burdens and make provisions for supporting them without conditionalities. Decent work for caregivers as well as informal and migrant workers through care-responsive social security benefits and workplace policies is another device that policymakers can tap in their efforts to engage the labour market.

Cambodia can progress towards its agenda of achieving the SDGs if it pays attention to the care economy, including both paid care and unpaid care. To achieve gender equality and women's empowerment, it is imperative for Cambodia to build on the positive political economy and institutional climate in the country by mobilizing a whole-of-government and whole-of-society approach to care. Redistributing the gendered household division of labour is imperative to correct imbalances in how unpaid care work is performed.

And finally, all interventions are futile without appropriate cultural messaging aimed at normative shifts in patriarchal attitudes. Women's needs and voices must be adequately represented with the aid of care- and sex-disaggregated data on care activities. The MOWA must be ably supported by interministerial collaboration and gender-responsive budgetary outlays to bring about the effective translation of policy vision into action.

This case study spotlights Cambodia's unpaid care economy. Examining programmes and initiatives taken under each of the four care policy categories – care infrastructure, care-related social protections,

Care work is a fundamental life skill, and sharing these responsibilities across the family, the community, the State and the market allows all individuals to enjoy the benefits of development. Policymakers must account for the care economy in their calculations of economic growth and productive market activity. The pandemic has offered an enormous opening for directing efforts to the care economy, and Cambodia is adequately poised to move the needle towards women's rights and gender equality through its commitment to care.



Staff of UN Women in Cambodia support the HeforShe campaign. Photo © UN Women

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