

PILOT PROGRAMMES: THE CASE OF PERU

AECID implements three lines of work, supporting the Ministry of Women and Vulnerable Populations in building the National Care System in Peru.

Although care has been a pending issue in Peru for years, it's the COVID-19 pandemic that highlights the serious consequences of the traditional gendered division of labor, care gaps in certain groups and geographical areas, and their significant impact in terms of discrimination and the violation of the rights of women and vulnerable individuals.

In Peru, in 2021, over 5.5 million people engaged in full-time or primary caregiving. 72% of these people did so unpaid, and one and a half million did it as paid work. 81% of caregivers are women. On average, women work 23 and a half hours more per week than men in domestic chores, and the labor costs of maternity are high. In households with three or more children under 6 years old, the women's employment rate is 56% compared to men's 89%.

Care is a public concern that goes beyond the private sphere and affects society as a whole, requiring a perspective of shared responsibility involving the State, private sector, families, and communities.

In this context, the Ministry of Women and Vulnerable Populations of Peru is taking steps towards building a National Care System, placing the right to receive care, equal care, and self-care at the core. The aim is to establish a public policy that recognizes the contribution of care to social well-being and helps close the significant service gap that currently affects 3 million dependent individuals who are not being attended to in any care center or program, including comprehensive care for children, people with disabilities, the elderly, and other dependent individuals. Furthermore, it seeks to promote the equitable distribution of these tasks, crucial for sustaining the social and economic system, while overcoming the stereotypical idea that it is solely the responsibility of women and families.

In response to this situation, AECID in Peru has incorporated care into its current strategic priorities, expanding its post-pandemic work agenda on equality, non-discrimination, and gender-based violence, all of which are part of a feminist cooperation agenda.

This priority is reflected in three lines of work. The first line involves the execution of the project 'Communities for Care: Promoting Equality and Shared Responsibility in Care'. This intervention supports the Ministry of Women and Vulnerable Populations in their goal to advance the construction of the national care system and aims to generate evidence to design a replicable and scalable service model nationwide. It starts with the existing network of Family Integral Development Centers (CEDIF) to redesign and expand care coverage. It also seeks to enhance the capacity, professionalization, and certification of caregivers, along with their social recognition and the promotion of civil society organizations focused on the right to care. All of this is complemented by actions aimed at promoting social change by raising awareness among citizens and communities about the importance of care and social, family, and community shared responsibility. The project is piloting two experiences in very different contexts, one in Lima (Comas and Villa el Salvador) and the other in Tambopata, a province in the Madre de Dios region.

The second line of work for AECID in Peru involves coordination with other cooperations through the Gender Table of International Cooperation in Peru (MESAGEN), composed of 32 embassies and international organizations prioritizing gender equality in their cooperation agenda. Spain holds the Technical Secretariat of MESAGEN until May 2024, and one of its major initiatives has been the establishment of a Care Commission. This Commission is responsible for defining a strategy to coordinate the work of different interested cooperations and maintain structured dialogue with the state and non-state actors to contribute to care public policy. The Commission also aims to harmonize cooperation actions, identifying opportunities for complementarity and division of labor in the process of building the National Care System in the country.

The third line of action is the necessary coordination of Spanish Cooperation actors, primarily Spanish NGOs, as well as the Official Chamber of Commerce of Spain in Peru and Peruvian state and non-state partners. This coordination takes place through a structured mechanism created in 2018 called the Working Group of Spanish Cooperation and National Partners in Equality and the Fight Against Discrimination and Gender-Based Violence, also known as R3, associated with Outcome 3 of the current Strategic Action Plan. Comprising 60 institutions (21 Spanish and 39 Peruvian) and more than 150 professionals, R3 has included activities in its annual work plan to promote the joint analysis and dissemination of the right to care in Spanish cooperation projects in Peru. Two seminars have been conducted so far to disseminate and discuss the care agenda. Additionally, the incorporation of care components is observed in the projects of Spanish NGOs.

The advancement of care in the international cooperation agenda in Peru is already a reality, particularly visible in the case of cooperations that have declared themselves feminist, such as the Spanish cooperation. In our Spanish cooperation agenda for gender equality, care has been included as a priority and occupies a significant and structural place within the broader objective of combating gender discrimination and violence, especially in relation to the prevention of these two phenomena.

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