Global Accelerator on Jobs and Social Protection for Just Transitions

THEME:
Care Economy and Health Workers

Participating Agencies:
ILO
UNICEF
UNDP
WHO
Background

Key policy messages:

**Health and care work, both paid and unpaid, is crucial** to decent work, well-being, and sustainable development. Most health and care work across the world, paid and unpaid, is performed by women. The correlation between compounded and persistent gender inequalities and societal attribution of care responsibilities is well evidenced. Unpaid care and domestic work contribute to human well-being, build stronger social ties, and enable economic dynamism and growth, but are currently not counted as “economic activity” nor incorporated in calculations of gross domestic product (GDP). **Care needs are persisting and increasing** across the world due to demographic and labour market trends compounded by health, humanitarian, economic, and environmental crises. The COVID-19 pandemic – and its resulting economic and social crises – have exposed the weaknesses in health and care systems and poor working conditions of health and care workers. It intensified the amount of unpaid care and domestic work performed, particularly by women and girls. In this context, rising demands for health and care are likely to **deepen already existing inequalities** based on the gendered division of labour and unmet needs for health and care, perpetuating cycles of poverty and social exclusion.

The pandemic had also a devastating impact on the **global care workforce** – here defined as all persons employed in the education, health and social work sectors, and all domestic workers, which for years has been depleted by austerity measures and low public investment in rights-based social protection and social infrastructure including public care and health services, and characterized by low pay, poor working conditions, and severe labour shortages – and therefore poorer quality care. International migrant care workers, including domestic workers, supplement both unpaid and paid care labour in destination countries. Their numbers are growing and the conditions under which they work are often more precarious than those of nationals. Business as usual is no longer an option. Closing care gaps and addressing increasing health and care needs require urgent and large-scale **investments in the care economy**, including care policies, services, and decent care jobs – that are integrated and transformative and promote people’s well-being, gender equality, inclusion, decent work, and social cohesion, as well as sustainable development. **Investment in care policies and jobs in education, health and care, and domestic work drive shared dividends** in health, education, decent job generation, economic and employment opportunity, equality, equity, and well-being for societies, and sustainability and resilience for economies, societies, and the planet.

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1 Gender norms tend to ascribe women to (often unpaid) reproductive or caregiving duties and men to productive duties. Unpaid caregiving is a leading barrier to gender equality and women’s participation in the workforce.
Challenges : Key Facts:

- By 2030, the number of care recipients (children under the age of 15 and persons above 60 years old) is predicted to reach **2.3 billion people out of 8.5 billion people**.

- Unpaid care work would amount to **9 per cent of global GDP** were a monetary value given to the hours devoted to its provision, based on the hourly minimum wage. This represents a total of **US$ 11 trillion** in purchasing power parity (PPP) in 2011.

- Women perform **76.2 per cent** of the total amount of unpaid care work (**16 billion hours per day**), **3.2 times** more time than men.

- Unpaid care work is the main reason women are outside the labour force. In 2018, **606 million women** were unavailable for employment due to unpaid care work compared to only 41 million men. This strongly impacts on their ability and opportunities for accessing social protection in many contexts and an adequate pension in old age.

- In 2018, mothers of children aged 0–5 years accounted for the lowest employment rates (**47.6 per cent**) compared to men and women without young children.

- In 2020, **2 million mothers** left the labour force due to the pandemic.

- **649 million women** (34 per cent of potential mothers) still lack adequate maternity protection, including income security during maternity leave and access to maternal health care. At the current pace of policy reforms, it will take at least 46 years to achieve minimum maternity leave rights in all countries.

- Over **1.2 billion men** between 15-49 years (63.3 per cent) live in countries with no right to paternity leave.

- Only **21 countries** grant universal childcare services for children aged 0-2 years.

- In 91 out of 175 countries, the “childcare legal gap” between the end of paid parental leave and availability of childcare services or universal education exceeds **five years**. It means that **1.9 billion potential parents (51.1 per cent)** are left without adequate protection and care support.

- The need for long-term care – both medical and non-medical services – not only for older persons but also for people living with chronic illness or disability, is growing. With no social protection entitlements to long-term care and in the absence or due to the inadequacy of old-age pensions in the vast majority of countries, older persons in need of long-term care are left to pay for services out-of-pocket, if and when those services exist, or to rely on relatives to perform the most basic activities of daily living.

- In 2018, the **global care workforce** (including all persons employed in the education, and health and social work sectors, and all domestic workers) comprised 249 million women and 132 million men. It is affected by significant shortages of workers and dire decent work deficits: i.e., low wages, long hours of work, stress and violence at the workplace, low status, poor working conditions, insecure or no formal contracts, and limited or no social protection and other labour protections.
There is a projected global shortage of 10 million health workers by 2030.

Health and education workers make up the largest part of the care economy and represent 6.5 per cent of total global employment. They are at high risk of frequent exposure to the COVID-19 virus, which could lead to a high number of occupational injuries, illnesses, and deaths. An estimated 115,000 health workers lost their lives to COVID-19 between January 2020 and May 2021. The COVID-19 pandemic revealed that many health and care workers do not benefit from adequate social protection themselves, including healthcare and sickness benefits.

Women migrant and domestic workers constitute a significant portion of the care workforce in many countries of the world. For example, within OECD countries, 90 per cent of care workers are women, and 20 per cent are foreign-born.

Migrant care workers in high-income countries (the majority of whom are women) face a double wage penalty for being migrants and care workers. A migrant care worker is likely to earn 19.6 per cent less than a non-migrant worker. This is over and above a 12.6 per cent pay gap for being a migrant.

Closing care gaps through large-scale investments in inclusive care policies, services, and decent employment could generate almost 300 million jobs by 2035².

Against this backdrop, why has so little progress been made to close gender gaps? There are many reasons, but one is particularly important: employment, economic, labour, and social protection policies as well as migration policies, the institutions and structures that support or develop them, have lacked, and continue to lack, gender transformation, entrenching major structural barriers. The consequence is that labour market and social protection gaps are increasing, and women, especially those more vulnerable to exclusion and discrimination, are left further behind. Comprehensive and gender-transformative legal, institutional, and policy frameworks, including social protection, and macroeconomic and sectoral policies, matter for equality and for the care economy. Similarly, it will not be possible to achieve universal social protection without additional efforts to guarantee adequate benefits for the ones in need of care and the ones providing it in the care economy. This requires adopting an approach based on rights and entitlements enshrined in labour law.

Opportunities

In the aftermath of an unprecedented crisis, we have the unparalleled opportunity to transform the care economy and advance gender equality and equity by investing in quality, affordable, and accessible care policies, services, jobs, and infrastructure that recognize, reduce, and redistribute women’s and girls’ unpaid care and domestic work, and represent and reward paid health and care workers (see the 5R Framework below). This means transforming whole economic systems, by placing the care economy at the center of

economic policies to build forward better with more resilient economies and societies for now and the future. Coherence between equality, care, employment, macroeconomic, social protection, and migration policies and strategies are also needed to ensure effective improvements for all workers in the care economy, including migrant workers and care workers from racialized and indigenous populations who constitute the majority of the worst paid and least protected workers of the care economy.

Investing in care can have major economic and social returns for families, individuals, and societies through what is called the **quadruple dividend**: one, investing in care contributes to enhancing individuals' good health and well-being, capabilities and rights, particularly for the most disadvantaged; **two**, investing in care facilitates women's labour force participation, better income and hence helps achieve gender equality and empower women and girls; **three**, investment in health and social care service expansion has the potential to generate millions of decent jobs both in care sectors as well as in other sectors through backward linkages; and **four**, direct, indirect, and induced employment generation in care sectors creates jobs that have a relatively low carbon footprint, contribute to the overall health and well-being of societies and the planet, and support just transitions.

Gender equality has overall positive development aspects, so advancing gender equality through investments in the care economy and the above-mentioned policies has long-term positive effects on development and societal prosperity and stability. Women are key actors of sustainable development. Empowering women and girls is fundamental to addressing different dimensions of poverty and exclusion, including reduced fertility, better health and nutritional status of children, stronger decision-making power in households, the greater likelihood of labour force participation in decent work, and increases in household and national income.

**Key lessons learned and key innovations:**

- Social dialogue, especially interest-based collective bargaining, between social partners and governments has been shown to play a key role. Social dialogue can cover working conditions and wider health and education policy to ensure technical expertise and buy-in by the workers who will need to deliver care services.

- Workplace-based occupational safety and health policies need to be a fundamental component of decent work in the care economy.

- Universal social protection is gender-transformative when it comprises at minimum access to healthcare and support for care needs without hardship and income insecurity along the lifecycle, including adequate maternity, paternity, and parental benefits, and support for workers with family responsibilities (e.g., through sickness benefits that extend to the care of a family member).

- Complementing cash benefits with quality services, such as good-quality childcare and long-term care services, school meal programmes, or other after-school services, that are adapted to the needs of working parents can be a real game-changer for child development, reduction of unpaid care work, promotion of women's employment and earnings, and decent employment generation.

- To recruit, train, develop, and retain workers in the care economy, promoting decent work for workers in the health and care and education sectors, as well as domestic workers is a key strategy.
- Identifying skills needs and formulating skills strategies to develop workforces in the education and health and care sectors and devise flexible and appropriate skills recognition systems and qualification frameworks to allow for diverse paths into related professions including for migrant workers.

- Addressing differential treatment between nationals and non-nationals when it comes to social protection entitlements in many countries that are highly reliant on migrant workers has proven essential. Ensuring that migration policies and pathways to address labour shortages in health, care, and education are fair and transparent, benefit both countries of origin and destination and are aligned to employment and gender promotion policies.

- Fostering coherence between labour migration, employment, and gender equality policies and institutional mechanisms to enhance migrant women care workers’ access to decent work and equality of treatment and access to quality care for those in need.

- Developing strategies and narratives to promote investments in education and health as social development, employment, and growth strategies which can justify larger public spending and loosening of wage bill constraints.

- The ILO supports such strategies based on international labour standards, with a particular emphasis on fundamental principles and rights at work, care, and social protection, domestic workers, nursing personnel, and migrant workers. The ILO supports this work through sector specific standards, codes of practice and guidelines, and several tools (see below).

- Comprehensive employment frameworks that include gender transformative macroeconomic frameworks, sectoral policies, social protection policies, skills policies, and active labour market policies that are linked with migration policies where appropriate can make a difference for women and can help to close gender gaps.

- Comprehensive legal and policy frameworks related to care work should further aim at the prevention and elimination of violence and harassment as well as gender discrimination in recruitment, retention, and promotion, expanding access to gender-responsive social protection, ensuring equal pay for work of equal value, and removing occupational segregation.

- Investing in the care economy requires a rights-based approach and requires anchors in law and in practice clear and universal social protection entitlements (with corresponding adequate financing) to channel sufficient investments, bridge unmet care needs, and secure decent work for care workers.

**Relevant normative frameworks: A high road to care work:**

A number of international labour, health, and human rights standards and guidelines are particularly relevant to building a high road to care work. They comprise those that focus on **gender equality, care policies, and decent work for care workers, including domestic workers and migrant workers**, and those promoting **gender-transformative employment policy frameworks** (see list of standards and guidelines below). A high road to care work is also supported by the commitment of **ILO constituents**—governments, employers’...
organizations, and workers’ organizations – in the ILO Declaration for the Future of Work and the ILO’s Global call to action for a human-centred recovery from the COVID-19 crisis that is inclusive, sustainable, and resilient, amongst others. By embedding these labour and human rights in national legislation and policies, and by supporting them through effective implementation, states stand a better chance of delivering on the Sustainable Development Agenda, in particular, SDGs 1, 3, 4, 5 and 8 and thus pursuing a high road to care work.

The UN Secretary General’s “Our Common Agenda” calls for the need to “rethink the care economy” by valuing unpaid care work in economic models, but also investing in quality paid care as part of essential public services and social protection arrangements. This also means improving pay and working conditions for care and health workers to help achieve the Sustainable Development Goals. In this context, the UN Global Accelerator on Jobs and Social Protection for Just Transitions also underscores the need to “facilitate women’s economic inclusion, including through large-scale investment in the care economy and equal pay, and more support for women entrepreneurs”. Investing in the care economy is also an important contribution to follow up on the High-Level Commission on Health, Employment and Economic Growth, endorsed by ILO and WHO, and the action tracks of the Transforming Education Summit (September 2022). Lastly, it is instrumental to meet the objectives of universal social protection and universal health coverage, adopting a rights-based approach, and, of course, the goal of achieving gender equality.

Good practices and requirements for scaling up:

Satellite accounts; light time-use surveys in labour force surveys; gender budgeting; gender impact assessments; collection of gender and intersectional disaggregated data; social protection strategies to extend care policies to excluded categories of workers (such as self-employed, informal domestic workers, rural workers, and migrant workers) grounded in legal entitlements; adequately paid, non-transferable leave policies funded by compulsory social insurance or public funds; formalization strategies for care workers; tailor-made skills development programmes; advocacy and capacity building programmes for governments, workers’ and employers’ organizations; unionization of care workers, including migrant and informal economy care workers; dialogue with and regulation of the private sector; gender-transformative active labour market policies and institutions (including public employment services); care cooperatives; family-friendly policies as part of enterprises’ corporate social responsibilities; gender-responsive labour migration policies; bilateral labour (and social security) agreements; and fair recruitment laws and policies for migrant workers.

Outcomes

Linkages to other key policy areas:

The globally accepted and action-oriented ILO 5R Framework for Decent Care Work provides guidance for defining and advancing decent work for care workers through transformative care, macroeconomic, social protection, labour, (gender) equality, and migration policies. It promotes a high road to care work by recognizing, reducing, and redistributing unpaid housework and family care; rewarding care workers fairly, while
generating sufficient care jobs to meet care needs; and **representing** care workers with rights, voice and representation in decision-making, social dialogue, and collective bargaining. The 5R Framework implies that good-quality care requires decent work for care workers, which benefits both care providers and recipients and society as a whole. The 5R Framework is grounded in the SDGs, international labour standards, guidelines, and frameworks.

**FIGURE 1**
A high road to Decent Care Work: Analytical and policy framework and linkages to other policy

Accelerating quality employment creation in the care sector and protection of health workers are linked to all other thematic areas of Our Common Agenda, including the goal of gender equality, as well as those in the Global Accelerator. Many care workers – the majority of which are women – work in the informal economy, which makes the transition workstream of the Global Accelerator particularly important. The lack of social protection for women cuts across all categories of women, and therefore includes those in the care sector (especially those working informally and those unpaid caregivers looking after family members). Providing better social protection, remuneration, and working conditions would increase the attractiveness of men workers to entering care sectors, breaking occupational segregation, while more care workers with decent working conditions would decrease the number of women needing social assistance and widen the social insurance contribution base. Bridging the current labour force shortages in the care sectors and securing decent working conditions would in turn improve the availability, acceptability, and quality of such services that are part of the social protection floor guarantees in many countries. If the care sector becomes an attractive sector that provides decent jobs, more young people would enter the sector, which in turn could help decrease the disadvantages young people are faced with. Adequate social protection can help workers enter, remain, and progress into labour markets.
or within labour markets, making it possible for them to combine employment and care responsibilities and therefore making it more attractive to actually participate in labour markets. These examples show the interconnectivity of care sector development with the other workstreams and make it clear that investment in this sector will help solve the challenges identified in other roadmaps.

**Types of activities required:**

A number of activities are required and have been pioneered by UN agencies to promote the 5R Framework for Decent Care Work.

**A. Recognizing unpaid care work, reducing unpaid drudgery, and redistributing unpaid care work more equitably between women and men as well as from the household to the state and society**

- Support the ratification and effective implementation of relevant international and regional labour, health, and other human rights standards, frameworks, and guidelines.
- Measure all forms of care work through time-use and labour force surveys and take unpaid care work into account in policy decision-making.
- Awareness raising and capacity building on gender-responsive employment policy frameworks, including gender-responsive macroeconomic frameworks, sectoral policies, skills policies, social protection policies, and active labour market policies. Such frameworks are the precondition for sectoral policies (including in the care sector) to work. Gender budgeting would need to be part of such frameworks.
- Development of the institutional capacities of governments, workers' organizations, and employers' organizations to recognize and value unpaid and paid care work in gender transformative and comprehensive employment policy frameworks and social protection systems and address care needs in policymaking, including national development policy, and social dialogue mechanisms.
- Ensure universal and gender-responsive social protection, with a priority to urgently close coverage gaps for the benefits that directly impact the care economy – social health protection, maternity, paternity and sickness benefits, and long-term care. Support member states in building care-friendly and gender-responsive social protection systems, including floors.
- Invest in gender-responsive care policy packages including:
  - Paid care leave policies and quality health care for all women, men, and children; and
  - Universal access to quality and inclusive care services, with decent care jobs, especially education, healthcare, and social work, and with green infrastructure and technology
- Promote active labour market policies that support the attachment, reintegration, and progress of unpaid carers into the labour force.
Family-friendly workplace policies and practices in line with international labour standards are important and contribute to work-life balance. Such policies have also been successful in encouraging fathers to take on additional childcare and other household responsibilities, which in turn supports working mothers to (re-) enter, remain, and progress in paid employment.

Ensure decent working time for all and enact and implement family-friendly working arrangements for all workers.

Raise awareness to recognize “the right to care and be cared for” as a collective responsibility and without discrimination at the household, community, business, and national levels and in the media.

Women's position in labour markets and at home continues to reinforce gender norms of women as primary caregivers. In this context, supportive policies such as paternity and parental leave and benefits, especially if adequately paid, funded by social protection, available to all caregivers, and non-transferable, help to distribute unpaid childcare more evenly between parents while combating gender stereotyping.

Where labour markets are extensively informal and only a small proportion of the workforce benefits from social protection coverage, there need to be concerted efforts to expand access to rights, social protection benefits, and services for informal women workers, especially in COVID-19 recovery efforts.

Promote information and education for more gender-equal households, workplaces, and societies.

B. Rewarding health and care workers: More and decent work for health and care workers

Regulate and implement fair recruitment practices and regulations and decent terms and conditions of employment for care workers, with a focus on decent working conditions and remuneration, equal pay for work of equal value, effective social protection coverage, occupational safety and health, and prevention and elimination of violence and harassment, recognising the role of freedom of association and collective bargaining.

Ensure a safe, attractive, and stimulating work environment for both women and men care workers.

Enact laws and implement measures to protect migrant care workers, including enhancing policy coherence between care, gender, and international labour migration policies.

Develop and adopt effective regulation of recruitment agencies and monitor recruitment-related abuses of migrant care workers.

Strengthen specific efforts to support the inclusion in labour markets of youth and women from refugee and other forcibly displaced populations, including through access to education, life-long learning, childcare, and after-school programmes.
Support the professionalization of the paid care workforce through formalization, skills development, accreditation, and skill recognition across borders.

Development and dissemination of information, education, and communication materials on the rights of care workers, in particular migrant, domestic and other workers in vulnerable situations.

C. **Representing workers: Representation, social dialogue, and collective bargaining for all workers who are part of the care economy**

- Promote freedom of association for care workers, including migrant care workers, and employers and support their representation in workers’ and employers’ organizations and participation in social dialogue.

- Promote social dialogue and strengthen the right to collective bargaining in care sectors.

- Training on social dialogue for education and health unions, employers, and government counterparts, together with the ILO International Training Centre in Turin.

- Support and capacity building for women leaders and care agendas in trade union structures, priorities, and dialogue mechanisms.

- Promote the building of alliances between trade unions representing care workers and civil society organizations representing care recipients and unpaid carers.

- Support the organization of migrant care works and develop specific tools to foster their participation, considering the language and cultural diversity.

- Support advocacy and social mobilization of care workers and women’s, children’s and youth rights organizations, networks, and movements, including young feminists, to position care work issues onto national agendas.

**Responsible entities, key constituents and stakeholders who need to be consulted:**

**At the international level:** International Trade Union Confederation (ITUC), International Organization of Employers (IOE), UNIGLOBAL UNION (UNICARE), PSI, Education International (EI), International Domestic Workers Federation (IDWF), WIEGO; UN entities working on the care sector, such as ILO, UNESCO, UNICEF, UNFPA, UNHRC, UN Women, WHO; members of the Generation Equality Forum – Economic Justice and Rights Action Coalition and Global Alliance for Care; World Bank; G7 German Presidency; and ECDAN.

**At the national level:** ministries of labour, social affairs/social protection, health, education and training, and finance. Social partners include both apex workers’ and employers’ organizations and sectoral unions and employers’ organizations and other member-based organizations representing workers, employers, women’s and children’s rights movements, migrant workers, and informal workers, social and solidarity economy entities, the private sector, and investment authorities.
At the regional level: European Commission; United Nations Economic Commission for Europe (UNICE); United Nations Economic Commission for Latin America and the Caribbean; The Association of Southeast Asian Nations (ASEAN); Economic and Social Commission for Asia and the Pacific (ESCAP); African Union (AU); The East African Community (EAC); The Forum for African Women Educationalists (FAWE); Southern African Development Community (SADC); League of Arab States (LAS); Committee on Women of the Economic and Social Commission for Western Asia (ESCWA); among others.

**Principles of country-level action**

- Care policies and services must be **universal, equitable, and inclusive, based on solidarity, sustainable**, prioritize those **left behind**, aligned to **international standards**, and grounded on the **voice and representation** of those who provide and receive care.

- Care policy packages should be **nationally defined** and include a combination of **time** (leave policies), **income security** (social protection benefits), **rights** (including the right to care and be cared for, including through clear social protection entitlements), **services** and **green infrastructure** (all staffed with decent care jobs).

- **Urgent need for large public investment in more and decent care jobs to reward and represent paid care employment and as a precondition of quality care provision based on rights and entitlements.** Such investments are **affordable**.

- Employers also have a key role to play and a vested interest in helping fill the gap in access to quality and affordable childcare for their employees. When employers support childcare, punctuality is improved, absenteeism and stress are reduced, and productivity and motivation increase for women and men.

- Critical importance of investments in **education, training and professionalization** of care workers – including health, social care, education, and domestic workers – as well as in **quality working conditions** – i.e. adequate and fair remuneration and equal pay for work of equal value, effective social protection coverage, occupational safety and health – including protection and prevention of discrimination, violence and harassment – and respect of the **right to freedom of association and collective bargaining**.

- There is a need to work within comprehensive and coherent policy frameworks, including equality, employment, social protection, care, and migration policies.

- There is a need to embed interventions in strong social dialogue and tripartism.

- There is a need to respect international labour standards.

- There is a need to gender-sensitize all policy areas.
Supporting documents/publications

Key publications:

- ILO – Care at Work: Investing in Care Leave and Services for a more Gender- Equal World of Work (2022)
- ILO – Securing Decent Work for Nursing Personnel and Domestic Workers, Key Actors in the Care Economy (2022)
- ILO – Costs and Benefits of Investing in Transformative Care Policy Packages: A Macrosimulation Study in 82 Countries (2022)
- ILO – Decent Work and the Social and Solidarity Economy (2022)
- ILO – Responding to the Crisis and Fostering Inclusive and Sustainable Development with a New Generation of Comprehensive Employment Policies (2022)
- ILO – Partnerships between Trade Unions and the Social and Solidarity Economy to Support Informal Economy Workers (2022)
- ILO – Building the Future of Social Protection for a Human-Centred World of Work (2021)
- ILO – Making Decent Work a Reality for Domestic Workers: Progress and Prospects Ten Years after the Adoption of the Domestic Workers Convention, 2011 (No. 189) (2021)
- ILO – Impact of the COVID-19 Crisis on Loss of Jobs and Hours among Domestic Workers (2020)
- ILO – Maternity Income Protection in Southern and Eastern Africa, From Concept to Practice (2019)
- ILO – Care Work and Care Jobs for the Future of Decent Work (2018)
- ILO & WIEGO – *Cooperatives Meeting Informal Economy Workers’ Child Care Needs* (2018)
- WHO – *Closing the Leadership Gap* (2021)

**Key tools and guides:**

- ILO Quantitative Platform on Social Security (QPSS) (2022)
- ILO Social Protection Floors Cost Calculator (2022)
- ILO Intervention Model: For Extending Social Protection to Migrant Domestic Workers (2021)
- ILO’s How to Facilitate the Recognition of Skills of Migrant Workers (2020)
- ILO & UNHCR Handbook on Social Health Protection for Refugees: Approaches, Lessons Learned and Practical Tools to Assess Coverage Options (2020)
- ILO HealthWISE – Work Improvement in Health Services (2014)
- ILO & UN Women’s How to Assess Fiscal Stimulus Packages from a Gender Equality Perspective (2021)
- ILO & UN Women Guide to Public Investments in the Care Economy (2021)
- Empowering Women at Work Capacity Building Platform (ILO, EU, ITC & UN Women, 2021)
- OECD Toolkit for Mainstreaming and Implementing Gender Equality
- ILO Care Policy Platform (2023)
- ILO Online Care Policy Investment Simulator (2023)
Key labour, health, and human rights standards, frameworks, and guidelines:

**International level**

- UN Secretary-General’s Report on “Our Common Agenda” (2021)
- ILO Centenary Declaration for the Future of Work (2019)
- ILO’s Global Call to Action for a Human-Centred Recovery from the COVID-19 Crisis that is Inclusive, Sustainable and Resilient (2021)
- ILO Income Security Recommendation, 1944 (No. 67)
- ILO Medical Care Recommendation, 1944 (No. 69)
- ILO Migration for Employment Convention (Revised); 1949 (No. 97)
- ILO Social Security (Minimum Standards) Convention, 1952 (No. 102)
- ILO Employment Policy Convention, 1964 (No. 122)
- ILO Migrant Workers Convention, 1975 (No. 143)
- ILO Medical Care and Sickness Benefits Convention (No. 130) and Recommendation, 1969 (No. 134)
- ILO Nursing Personnel Convention, 1977 (No. 149)
- ILO Nursing Personnel Recommendation, 1977 (No. 157)
- ILO Working Environment (Air Pollution, Noise and Vibration) Recommendation, 1977 (No. 156)
- ILO Workers with Family Responsibilities Convention, 1981 (No. 156)
- ILO Workers with Family Responsibilities Recommendation, 1981 (No. 165)
- ILO Job Creation in Small and Medium-Sized Enterprises Recommendation, 1998 (No. 189)
- ILO Maternity Protection Convention, 2000 (No. 183)
- ILO Maternity Protection Recommendation, 2000 (No. 191)
- ILO Domestic Workers Convention, 2011 (No. 189)
- ILO Domestic Workers Recommendation, 2011 (No. 201)
- ILO Social Protection Floors Recommendation, 2012 (No. 202)
- ILO Transition from the Informal to the Formal Economy Recommendation, 2015 (No. 204)
- ILO Employment and Decent Work for Peace and Resilience Recommendation, 2017 (No. 205)
- ILO Violence and Harassment Convention, 2019 (No. 190)
- ILO Violence and Harassment Recommendation, 2019 (No. 206)
- ILO Committee of Experts on the Application of the Recommendations concerning Teaching Personnel
- ILO Resolution concerning the Second Recurrent Discussion on Social Protection (Social Security) (2021)
- ILO Resolution concerning Inequalities and the World of Work (2021)
- ILO Conclusions concerning the General Discussion on Skills and Lifelong Learning (2021)
- ILO/UNESCO Recommendation on the Status of Teachers (1966)
- WHO Human Resources for Health – Draft Resolution proposed by Croatia, Eswatini, Ethiopia, Jamaica and Norway (2022)
Regional level

- Declaration Adopted by Ministers and High-level Authorities of The National Machineries for the Advancement of Women in Latin America and the Caribbean for the Sixty-sixth Session of the Commission on the Status of Women (CSW66) (2022)
- The ASEAN Comprehensive Framework on Care Economy (2020)
- The Bali Declaration (2016)
- Cairo Declaration for Arab Women and the Strategic Plan for Women Empowerment in the Arab Region – 2030 Development Agenda (2016)
- The East African Community Gender Equality and Development Bill (2016)
- The Muscat Declaration: Towards the Achievement of Gender Justice in the Arab Region (2016)
- The Supplementary Act on Equality of Rights between Women and Men for Sustainable Development in the ECOWAS Region (2015)
- Tunis Declaration on Social Justice in the Arab Region (2014)
- Southern African Development Community’s Protocol on Gender and Development (2008)
- Declaration on Gender Equality in Africa (2004)
- Southern African Development Community’s Declaration on Gender and Development (1997)