

Family Responsibilities and Care



COURSE AUTHORS

Dr. Eleanor Gordon and Lauren Lowe

PRODUCED IN COLLABORATION WITH

Monash Global Peace and Security Centre

SERIES EDITOR

Ramona Taheri



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Family Responsibilities and Care



Nigerian peacekeepers serving with the United Nations Mission in Liberia (UNMIL) queue to board a plane at Roberts International Airport at the end of their deployment. Two hundred Nigerian peacekeepers, the last military protection force in UNMIL, left Liberia as part of the termination of the Mission's mandate. The Nigerian contingent has been deployed in Liberia since 2003. 08 February 2018. UN Photo by Albert Gonzalez Farran.

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CONTRIBUTORS

Robin Lang • Elisabeth Rosenbaum Maurer • Ivan Moore



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Peace Operations Training Institute
9609 Gayton Rd, Suite 201
Richmond, VA 23238
www.peaceopstraining.org

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Foreword

Welcome to the *Family Responsibilities and Care* course. Whether you are a serving member of your country's armed forces or police, preparing for deployment to a United Nations peace operation, already serving on mission, or working in a role that supports peacekeeping and the security sector, this course is designed for you.

At its heart, this course is about something that connects all of us: care. Most of us have people we care for — children, parents, partners, siblings, extended family members — and most of us, at some point in our lives, will need to balance that care with the demands of our professional work. In the security sector, where long hours, unpredictable schedules, frequent travel, and extended deployments are the norm, managing caring responsibilities alongside service can be especially challenging.

Yet despite how widespread and significant caring responsibilities are, they remain largely invisible within security institutions and peace operations. Care is too often treated as a private matter, something to be managed quietly and kept separate from work. The stigma around care — and around asking for help — can prevent personnel from seeking the support they need, with real consequences for their well-being, their families, and their careers.

This course brings caring responsibilities into the open. It explores who provides care; why care work is so deeply shaped by gender norms; and how the challenges arising from managing caring responsibilities affect personnel across all ranks, roles, and life stages. It examines how these challenges drive women's underrepresentation in the security sector and in UN peace operations, as well as what this means for organizational effectiveness; mission outcomes; and the Women, Peace, and Security agenda. It also addresses the often-overlooked stressor of family separation during deployment and provides practical guidance for managing caring responsibilities before, during, and after deployment.

Importantly, this course recognizes that caring responsibilities are not a weakness or a hindrance. Personnel who care for others can bring distinctive qualities — empathy, resilience, adaptability, and sound judgement — that are invaluable in peacekeeping and security work. They also broaden the diversity of skillsets, knowledge, and networks that organizations can draw upon to address increasingly complex threats and challenges. When organizations support their personnel who manage caring responsibilities, they do not compromise operational capabilities or readiness; they strengthen them.

This course is informed by the research project *Advancing the Meaningful Participation of Women by Supporting Personnel with Caring Responsibilities*, led by Monash University's Gender, Peace and Security Centre and funded by Global Affairs Canada under the Elsie Initiative for Women in Peace Operations. The research involved extensive interviews and a global survey with hundreds of peacekeepers, uniformed personnel, and stakeholders across multiple countries and UN missions. Their voices and experiences are woven throughout these lessons. We are deeply grateful to all who shared their stories, insights, and recommendations.

As you work through this course, we encourage you to reflect on your own experiences — as a caregiver, a colleague, a leader, or someone who may one day take on caring responsibilities. Consider how the issues raised here relate to your own context, your organization, and the people you serve alongside. The goal is not only to build knowledge but to inspire practical action: small changes in how we talk about care, support one another, and lead our teams can make a meaningful difference.

Acknowledgements

The authors would like to thank Global Affairs Canada for funding the development of this training course and the research project that has informed the training, as part of the Elsie Initiative for Women in Peace Operations — Advancing the Meaningful Participation of Women by Supporting Personnel with Caring Responsibilities (2023–26), led by Monash University’s Global Peace and Security research hub (project lead Dr. Eleanor Gordon).

We wish to thank the hundreds of peacekeepers and other uniformed personnel, as well as other stakeholders who work in or with peace operations or live in places where they occur, whom we interviewed or who participated in the global survey for this project, sharing their insights, experiences, and recommendations.

We also thank the project team and partners who have contributed so much time, energy and commitment to the project since its inception, including Professor Katrina Lee-Koo, Dr. Richard Fosu, Jane Townsley, Dr. Irine Gayatri, Llani Kennealy, Tishya Khillare, Anushka Chavan, Jennifer Grover, and particularly Joana Osei-Tutu who reviewed this course, as well as the International Association of Women Police (IAWP); National Research and Innovation Agency (BRIN), Indonesia; Council for Strategic and Defence Research (CSDR), India; and the Kofi Annan International Peacekeeping Training Centre (KAIPTC). We are also grateful to the many other people who supported this project, including by facilitating access for field visits or interviews, contributing to the validation of findings, and circulating outputs.

We are especially grateful to the Peace Operations Training Institute (POTI) for supporting the development and delivery of this training course.

We also wish to honour and acknowledge the many thousands of people who have dedicated and risked their lives to work in peace operations, and the very many more people who have suffered — and continue to suffer — from the effects of armed conflict.

About the Authors

Dr. Eleanor Gordon (Lead Author) is the Director of Monash University's Global Peace and Security Centre (Monash GPS) — a research hub connecting global scholars, practitioners, and policymakers to advance innovative and transformative approaches to global peace and security challenges. She has 25 years of professional experience as a scholar and practitioner addressing challenges to building security and justice after conflict, including over a decade working in UN peace operations. Her research has investigated how to improve the success rates of peacebuilding and peacekeeping, with a specific focus on addressing barriers to women's meaningful participation and, especially, caring responsibilities as a driver of women's underrepresentation. She has led many multi-stakeholder, multi-country research projects, funded by various governments and international organizations, including the research project that informed this training course — "Advancing the Meaningful Participation of Women by Supporting Personnel with Caring Responsibilities" — funded by Global Affairs Canada, as part of the Elsie Initiative for Women in Peace Operations (2023–26).

Lauren Lowe is a PhD researcher in the School of Social Sciences at Monash University, Australia, examining gender and Kosovo's peace process. She is also a research officer at Monash University's Global Peace and Security (Monash GPS) research hub, working with Dr. Eleanor Gordon researching women's participation in peacebuilding and peacekeeping, including the research project that informed this training course — "Advancing the Meaningful Participation of Women by Supporting Personnel with Caring Responsibilities" — funded by Global Affairs Canada, as part of the Elsie Initiative for Women in Peace Operations (2023–2026).

Method of Study

This self-paced course aims to give students flexibility in their approach to learning. The following steps are meant to provide motivation and guidance about some possible strategies and minimum expectations for completing this course successfully:

- Before you begin studying, first browse through the entire course. Notice the lesson and section titles to get an overall idea of what will be involved as you proceed.
 - The material is meant to be relevant and practical. Instead of memorizing individual details, strive to understand concepts and overall perspectives in regard to the United Nations system.
 - Set personal guidelines and benchmarks regarding how you want to schedule your time.
 - Study the lesson content and the learning objectives. At the beginning of each lesson, orient yourself to the main points. If possible, read the material twice to ensure maximum understanding and retention, and let time elapse between readings.
 - At the end of each lesson, take the End-of-Lesson Quiz. Clarify any missed questions by rereading the appropriate sections, and focus on retaining the correct information.
 - After you complete all of the lessons, prepare for the End-of-Course Examination by taking time to review the main points of each lesson. Then, when ready, log into your online student classroom and take the End-of-Course Examination in one sitting.
- » ***Access your online classroom at***
<www.peaceopstraining.org/users/user_login>
from virtually anywhere in the world.
- Your exam will be scored electronically. If you achieve a passing grade of 75 per cent or higher on the exam, you will be awarded a Certificate of Completion. If you score below 75 per cent, you will be given one opportunity to take a second version of the End-of-Course Examination.
 - A note about language: This course uses English spelling according to the standards of the *Oxford English Dictionary* (United Kingdom) and the *United Nations Editorial Manual*.

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LESSON

1

Defining Care



Care is a critical issue for organizations engaged in peacekeeping.

MONUSCO Photo by Kevin Jordan.

In This Lesson »

Section 1.1 Caring Responsibilities

Section 1.2 Destigmatizing Care

Lesson Objectives »

By the end of this lesson, you will be able to:

- Define caring responsibilities and unpaid care work
- Explain the gendered nature of unpaid care work
- Recognize how culture and intersectionality shape experiences of unpaid care work
- Explain the societal and organizational value of care work
- Recognize how destigmatizing care can improve well-being and performance, with implications for retention, safeguarding, and operational effectiveness
- Understand how recognizing men's caring responsibilities benefits both men and women



An Australian peacekeeper visits a school in South Sudan. 12 November 2020. UN Photo by Isaac Billy.

Overview

This lesson introduces the concept of caring responsibilities and explains why care is a critical issue for organizations engaged in peacekeeping and the broader security sector. It explores who undertakes care work, how caring responsibilities are shaped by gender norms, and how culture and intersecting identities influence caring roles.

Understanding care and the impact of caring responsibilities is essential for developing fair policies, inclusive leadership practices, and organizational cultures that enable personnel to perform effectively across different stages of their lives.

The second half of the lesson explores why care work — both caring for others and caring for oneself — must be recognized and destigmatized within organizations engaged in peacekeeping and the broader security sector. It examines the value of care to societal peace, security, and prosperity; the impacts of stigma around care and help-seeking; and how normalizing care supports well-being, performance, safeguarding, and retention. The lesson also highlights the importance of recognizing men's caring responsibilities as a critical pathway to gender equality and organizational effectiveness.

Section 1.1 Caring Responsibilities

What are family and caring responsibilities?

Caring responsibilities — sometimes referred to as family responsibilities — are the essential, usually unpaid activities that are provided to individuals who depend on support due to age, disability, illness, injury, or social circumstances. Care work is often informal, ongoing, and invisible, yet it is essential for the functioning of families, communities, and organizations.

Caring responsibilities can include, but are not limited to:

- Caring for children (including biological, adoptive, foster, and stepchildren)
- Providing elder care for parents, grandparents, or other older relatives
- Supporting family members or partners with disabilities, chronic illnesses, or mental health conditions
- Caring for injured family members
- Providing support within extended family or kinship networks

Activities can include cooking, housework, and providing physical and personal care for someone, such as helping someone get dressed, bathe, or eat. The term care work — or **unpaid care work** — is often used to refer to these activities and gives credence to the argument that care work is labour rather than simply “help”.

Caring responsibilities may be long-term, temporary, *ad hoc*, or crisis-driven. They do not follow predictable schedules and often require flexibility and responsiveness from those providing care.

Caring responsibilities and unpaid care work typically increase during times of crisis and conflict. This is due to increased need on the part of family members and others, as well as decreased external support (such as the closure of schools and childcare facilities during a pandemic, or the retraction of social security during times of economic crisis or conflict).

Who has family and caring responsibilities?

Caring responsibilities are widespread among people across all roles, ranks, and life stages. They are not limited to parents of young children and are not confined to any one gender, age group, or family structure. Personnel with caring responsibilities include, but are not limited to:

- Women and men
- Single parents and dual-income households
- Junior staff and senior leaders
- Personnel without children who care for elders or extended family members
- Personnel in same-sex partnerships
- Personnel supporting family members living in other regions or countries

Some carers remain largely invisible within organizations. These include men who provide care but do not disclose it (for any number of reasons), personnel caring for family members overseas, young carers supporting siblings or parents, and individuals whose caring roles fall outside traditional definitions of family. It can also include women who try to hide their caring responsibilities at work for fear that it will feed negative assumptions about their commitment and capabilities.

Assumptions about who has caring responsibilities can result in policies and practices that fail to meet the needs of large sections of the workforce.

The gendered nature of unpaid care work

Women and disproportionate caring responsibilities

Most people have caring responsibilities towards others, including uniformed personnel and peacekeepers. However, the work involved in fulfilling these caring responsibilities tends to fall disproportionately on women. This is due to **gender norms** and expectations about who can and does fulfil care work.

Gender norms are societal expectations dictating appropriate behaviours, appearances, and roles for women, men, and people of diverse gender identities. In most societies, there are rigid gender norms around care work and caring responsibilities, typically regarded as being within the female domain and the responsibility of women and often girls. Conversely, security sector work is widely constructed as a male domain, premised on assumptions that men are inherently better suited due to perceived strength, skills, and disposition. Because of these gender norms, women are often assumed to fulfil care work and be less capable of security work.

Globally, women shoulder a disproportionate share of caring responsibilities, spending an average of 2.5 times more hours on unpaid work than men,¹ or taking on approximately 76 per cent of unpaid care work.² While there has been a recent shift in expectations around who should and can undertake unpaid care work, alongside a greater appreciation of its value, women still typically carry a disproportionate share of care work, and this work is considerable.

This imbalance demonstrably affects women's participation in paid work and career progression. According to the International Labour Organization (ILO), caring responsibilities constitute the main barrier to women's participation in the labour force. In 2023, of the 748 million people globally outside the labour force due to caring responsibilities, 708 million were women. Additionally, 45 per cent of women outside the labour force cited caring responsibilities as the reason.³

The barrier to work arises in large part because of the depletion of time, energy, and other resources that fulfilling caring responsibilities requires. It also arises because of **maternal bias** (discussed in Lesson 2), as well as family and societal pressure and expectations, with women often expected to prioritize the home and family above their careers.

In male-dominated institutions such as security sector institutions, traditional gender norms often position care as incompatible with operational or leadership roles. Women — particularly mothers — may be perceived as less available, less committed, or less suitable for advancement. These perceptions frequently translate into indirect career penalties, such as reduced access to training, specialist roles, deployments, or promotion opportunities.

1) UN Women and Department of Economic and Social Affairs, "Progress on the Sustainable Development Goals: The Gender Snapshot 2025", UN Women and Department of Economic and Social Affairs, 2025. Available from: <<https://www.unwomen.org/sites/default/files/2025-09/progress-on-the-sustainable-development-goals-the-gender-snapshot-2025-en.pdf>>.

2) Kelsey Harris et al., "The Global Roadmap for Action on the Care Economy", Center for Global Development, 19 September 2024. Available from: <<https://www.cgdev.org/publication/global-roadmap-action-care-economy/>>.

3) International Labour Organization, 2024. Available from: <https://www.ilo.org/sites/default/files/2024-10/GEDI-STAT%20brief_formatted_28.10.24_final.pdf>.

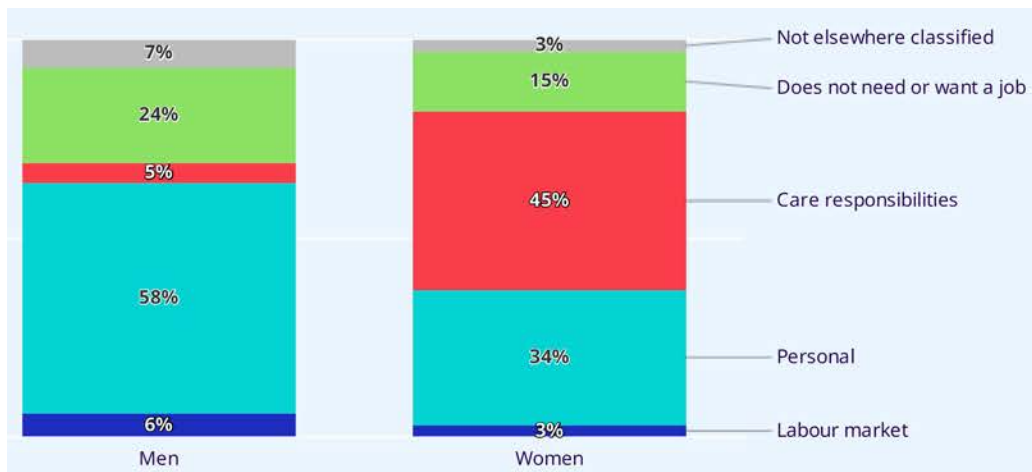


Figure 1-1: Global distribution of men and women outside the labour force by reason for inactivity, 2023

Source: ILO, "The Impact of Care Responsibilities on Women's Labour Force Participation".

Men's caring responsibilities and organizational invisibility

Although many men are sole or primary carers and men increasingly undertake the work involved in caring responsibilities, their roles as carers are often overlooked or minimized. Organizational cultures may assume that men do not have caring responsibilities or that they have a partner at home who fulfils these responsibilities, reinforcing expectations of constant availability and uninterrupted service.

Men who seek flexibility or parental leave may face **stigma**, be concerned about career consequences, or lack visible role models. When men's caring responsibilities are overlooked, care continues to be framed as a "women's issue", limiting broader cultural change. Subsequently, both women and men can suffer. Women are expected to shoulder disproportionate care work, impacting career progression and their ability to utilize deployment, training, and other opportunities. Meanwhile, men's well-being can suffer when their caring responsibilities are unrecognized and unsupported, and they are expected to spend extended periods of time away from families without sufficient support to remain connected.

"I've heard from individuals who, you know, who get notification to deploy, and who, if they are women as mothers, who then get asked the question of, but you know, 'Won't you miss your children?' Or 'How are your children going to respond to that?' and which they might not necessarily be asking of a man who is a father... I've heard both men and also women ask those questions of other women that they might not necessarily ask of other men."

— Anonymous male military officer⁴

Recognizing and supporting men's caring responsibilities is a critical element of supporting the **meaningful participation** of women and advancing the well-being of all personnel. When men are encouraged and enabled to take on care roles:

4) Male military officer, online, interviewed 10 March 2024 for the project "Advancing the Meaningful Participation of Women by Supporting Personnel with Caring Responsibilities", led by Global Peace and Security (Monash GPS), Monash University, and funded by Global Affairs Canada (2023-26) (hereafter, Monash GPS project).

- Stigma around care is reduced for everyone
- Care is no longer positioned as a “women’s issue”
- Men’s well-being and work-life balance improve
- Women face less pressure to absorb disproportionate caring burdens

This shift supports women’s retention and progression in their jobs by reducing the expectation that they will shoulder primary responsibility for care work.

Supporting men as carers is therefore not only a well-being issue, but a structural strategy for advancing gender equality and organizational sustainability.

Good Practice: Norway

To address low utilization of parental leave among men, Norway introduced a father’s quota, which, since 2018, provides 15 weeks of paid non-transferable leave. This has seen an increase in men accessing parental leave and has since been adopted in other Nordic countries, including Sweden and Iceland. The father’s quota encourages greater sharing of caring responsibilities between men and women, with a Norwegian military officer explaining that the quota ensures “fathers [can] be with their kids” and making it “very natural for the male parent to stay home with the kids as [it is] for the female”.

Cultural variation and intersectionality

Caring responsibilities are also shaped by cultural norms, family structures, and social expectations, as well as by gender norms. In many contexts, care extends beyond the immediate family to include extended kinship networks, community obligations, and transnational family responsibilities.

The challenges that personnel with caring responsibilities face in working in the security sector and deploying on missions are not uniform and vary significantly across different troop- and police-contributing countries (T/PCCs). A key differentiator is culture, which shapes expectations of women as caregivers and either supports or hinders their opportunities within security institutions. In some cultures, there may be strong expectations that a woman is primarily responsible for household and care duties. While this can compound deployment challenges, it can also discourage women from hiding their caring responsibilities or overworking to avoid maternal bias; it can potentially encourage them to ask for flexibility or support when needed.

However, such cultures can also frequently feature extensive family networks, which can provide support to uniformed women, with grandparents or (usually) other women within the extended family caring for children to allow mothers to work and deploy. Nonetheless, this can be a double-edged sword, as women are often expected to provide care for a wider circle of extended family, which can intensify their workload and make deployment more difficult.

Intersectionality recognizes that individuals experience care differently depending on overlapping factors such as gender, culture, migration status, disability, socio-economic background, and family structure. These intersecting factors can compound barriers or create distinct forms of disadvantage. For example, a single mother, a male officer caring for ageing parents, and a peacekeeper deployed to a remote mission and supporting an extended family back home may all experience challenges related to care, but in different ways and with different organizational implications.

Section 1.2 Destigmatizing Care

The value of care work to peace, security, and prosperity

Unpaid care work is critical to sustaining the well-being and survival of families, communities, and societies. It also underpins the functioning of societies, economies, and institutions. Without care — whether for children, elders, people with disabilities, or those affected by illness or injury — social stability, workforce participation, and institutional resilience are undermined.

In contexts of peace and security, care contributes to:

- Social cohesion and trust
- Community resilience during crises and conflict
- The long-term sustainability of security institutions
- The ability of personnel to perform effectively over the course of their careers

The importance of unpaid care work becomes more pronounced during times of conflict and crisis, as demonstrated during the COVID-19 pandemic. The pandemic significantly increased global awareness of the essential nature of care work. It highlighted both the scale of unpaid care and the consequences of undervaluing it, including workforce exhaustion, gender inequality, and institutional strain. This heightened awareness has reinforced the need for organizations to recognize care not as a personal inconvenience, but as a foundational component of security and prosperity.

The stigmatization of care

Despite its value, care work is often stigmatized within professional environments, particularly in security sector institutions, which tend to be male-dominated and expect constant availability and readiness. Caring responsibilities and self-care are frequently framed as:

- Signs of weakness
- Incompatible with operational readiness or leadership
- Private matters that should not be visible at work
- Women's issues, and thus issues of marginal concern to security institutions and operations

For many personnel with caring responsibilities, the stigma associated with care means they often feel they need to hide their personal lives, particularly any challenges or struggles they may be experiencing. This can influence help-seeking behaviours, as many fear that accessing support may be judged or they may be viewed as “weak” or a “hindrance”.

Yet juggling careers and family life can leave many feeling pressure, stress, anxiety, or guilt, which can impact their well-being and performance at work. Over time, it can lead to burnout, high rates of attrition, reliance on negative coping mechanisms, psychological strain, and safeguarding concerns.

Burnout

Exhaustion, stress, and lack of work-life balance can lead to burnout. A civilian working in the UN Mission in the Republic of South Sudan (UNMISS) explains how common burnout is in peace operations:

“... you already have a physically or emotionally demanding home, you know, personal environment, and then on top... a physically and emotionally demanding environment. At work, 100% of your life is filled with stress. And so, if you don’t find ways to decompress, you’re going to implode... the challenge is to look after yourself before, you know, constantly, and having the capacity and the support system to do that; otherwise, it’s very easy to just burn out.”

— Anonymous female civilian⁵

Attrition

Aside from burnout, it can also contribute to disengagement and attrition. Juggling caring responsibilities and paid work and, more broadly, a poor work-life balance is a known driver of attrition in the security sector. For instance, almost half of women (45 per cent) and over a third of men (34 per cent) said that they have had to leave or change their work in the security sector because of their caring responsibilities, according to the project *Advancing the Meaningful Participation of Women by Supporting Personnel with Caring Responsibilities*, led by Monash GPS and funded by Global Affairs Canada. Similarly, in the United Kingdom’s *Armed Forces Continuous Attitudes Survey*, the impact of service on family and personal life is consistently the top factor influencing intentions to leave.⁶ Likewise, the 2024 UN report *Towards Equal Opportunity for Women in the Defence Sector*⁷ highlights that among the 35 participating Member States, an ongoing “lack of support to parenting and family life” is the most highly cited barrier to women’s recruitment, retention, and promotion in the military.

“A lack of support for the responsibilities of family life, combined with cultural norms that position women as primarily responsible for the home and for childcare and eldercare, make it hard for women to join the military; and women who do join find that they lack equal opportunities in accessing assignments and advancement.”

— Anonymous male military officer⁸

At the organizational level, high rates of attrition among women represent a significant loss of investment, skill, and experience, with implications for organizational capability and diversity. Security institutions invest considerable resources in recruitment, training, and professional development. When experienced personnel leave due to barriers and challenges from caring responsibilities, institutions lose:

- Skilled and trained personnel, often at mid-career and leadership-track stages
- Institutional knowledge and operational experience
- Return on investment in training and professional development

5) Female civilian working in UNMISS, interviewed 29 July 2024 (Monash GPS project).

6) Male military officer, online, interviewed 10 March 2024 (Monash GPS project).

7) UN, “Towards Equal Opportunity for Women in the Defence Sector”, 2024. Available from: <https://www.un.org/ssr/sites/www.un.org/ssr/files/general/dpo_women_in_defence_web.pdf>.

8) UN, “Towards Equal Opportunity”, 15.

Negative coping mechanisms

The stigma associated with care can also lead personnel to deprioritize their own well-being and sometimes rely on negative coping mechanisms. Negative coping mechanisms can include relying on alcohol or overworking to destress, for instance. Deprioritizing well-being and reliance on negative coping mechanisms can also contribute to high rates of burnout, disengagement, and attrition.

Psychological strain and safeguarding concerns

For women peacekeepers, feelings of guilt and the social stigma associated with expectations that women should be at home providing care for children or fulfilling other caring responsibilities can exacerbate the psychological strain that can arise in peacekeeping and other security work.

Women peacekeepers who are also mothers are often stigmatized and subjected to gossip and suspicion about their motivations to join security sector institutions and to deploy to peace operations. This stigma reflects broader societal discomfort with women occupying spaces that are traditionally male-dominated, compounded by social expectations that mothers should prioritize their families. Deployed women often face backlash or resistance from their families and communities, who question their commitment to their families. Some face accusations of infidelity or inappropriate relationships, while others are deemed not to be “good mothers”. This stigma harms professional reputations, causes personal distress, and can strain familial relationships.

For men, the stigma associated with care can also discourage them from accessing paternity or parental leave and other forms of care-related leave. Stigma can also discourage help-seeking or even just talking about their caring responsibilities and care needs. This is compounded by expectations that accessing care-related leave and seeking help might impact their careers. In turn, this can exacerbate the stress that arises in peacekeeping and security work.

In turn, for both women and men, the increased stress and psychological strain can adversely impact well-being and performance. This is intensified if they are reluctant to seek help because of the stigma associated with care and self-care. It may also increase the likelihood of safeguarding issues, including self-harm and harm to others.

Statistical data points to a higher rate of suicide among serving and former military personnel than among the general population in several countries, including Australia⁹ and the US.¹⁰ This underscores the critical importance of self-care, support networks, the availability of mental health and psychological support services (MHPSS), and stigma reduction to encourage personnel to seek help when needed.

Stress, exhaustion, and a reluctance to seek help for mental health concerns can also influence decision-making and behaviours. In extreme cases, it can contribute to harmful behaviours towards others, including fellow peacekeepers or people living in mission areas. This can be more likely in workplace cultures that denigrate care and reward risk-taking and overworking.

Destigmatizing care

Individuals and organizations can take steps to destigmatize care by:

- Talking about care and the challenges that can arise with managing caring responsibilities and self-care in the sector

9) Royal Commission into Defence and Veteran Suicide, *Final Report*, Australian Government, 9 September 2024. Available from: <<https://defenceveteransuicide.royalcommission.gov.au/publications/final-report>>.

10) Rajeev Ramchand and Tahina Montoya, “Suicide Among Veterans”, *RAND*, 22 May 2025. Available from: <<https://www.rand.org/pubs/perspectives/PEA1363-1-v2.html>>.

- Encouraging personnel to talk openly about care and seek help when needed
- Supporting others with caring responsibilities — including through informal support networks, formal structures, and policies

When individuals and organizations do this, it can shift the organizational work culture from one that rewards constant availability (which is at odds with being able to fulfil caring responsibilities) and silence around care, to one that recognizes care as a normal and legitimate aspect of working life.

In other words, caring responsibilities and self-care are not a sign of weakness that need to be hidden, or just private or marginal matters of no consequence to peacekeepers and their work. Talking about care can reflect self-awareness and model leadership qualities. Organizational and workplace cultural change is often driven by visible examples. When leaders and peers share experiences of caring responsibilities, self-care, or accessing support, they challenge harmful norms and demonstrate that care and competence are not mutually exclusive. Normalizing conversations about care and self-care reduces the pressure to cope in silence and helps prevent escalation into more serious well-being or safeguarding concerns.



An UNPOL Officer from Sweden and a group of women prepare meat for cooking. 22 July 2021. UN Photo by Gregório Cunha.

Personnel who are supported to manage their caring responsibilities and well-being are better able to:

- Maintain focus and decision-making capacity
- Manage stress and fatigue
- Perform effectively under pressure
- Model healthy behaviours for others

Organizations also benefit when care is destigmatized because of:

- Improved personnel well-being and performance
- Greater retention of skilled and experienced personnel
- Reduced absenteeism and **presenteeism**
- Stronger safeguarding outcomes, as individuals are more likely to raise concerns early
- Enhanced team cohesion and trust

In short, when organizations are attentive to caring responsibilities and care needs of personnel, it can improve self-care and help-seeking, reduce stress and reliance on negative coping mechanisms, lower burnout and attrition rates, and help avoid safeguarding issues — including self-harm and harm to others. It can also reduce negative impacts on families. Subsequently, it can contribute positively to individual performance, workplace cultures, and operational outcomes.

Connecting and communicating: networks and support

Destigmatizing care is supported by strong communication and connection within organizations. Access to networks, platforms, and information-sharing mechanisms enables personnel to:

- Learn about available policies and support
- Share strategies for managing care alongside work
- Reduce isolation and normalize care experiences
- Build peer support and collective advocacy

Such networks may be formal or informal and can include carers' networks, peer support groups, mentoring programmes, or internal communication platforms. These vary between T/PCCs and between institutions. Examples are listed in the appendix "Support Networks, Apps, and Hotlines".

Where such support structures and networks do not exist or could be strengthened, informing the chain of command of the need for such supports can be helpful, as can relying on informal support networks, such as colleagues and families; speaking to trusted individuals, such as healthcare professionals or counsellors; or even creating networks of support. In some instances, informal networks have been established by serving or retired personnel or their families. These have often been especially effective in providing support and information, as they were developed by those directly impacted by the need for such support.

Stories of change and strength: examples of good practices

Where possible, it is important that personnel are open about any struggles they are facing with managing caring responsibilities and work or deployment, in order to get the support needed, as highlighted by a female peacekeeper in the UN Organization Stabilization Mission in the Democratic Republic of the Congo (MONUSCO):

"There have been times when I've had to step up caring for family members. And work has been able to support me, but they were only able to support me because they understood what I was going through, what my family was going through. So, there's the whole stoic keeping things bottled up...[it] doesn't work really, for anyone, in any circumstance. So, if, the team around you understands what your commitments are, because we in a working military environment, you come very close. You become like a family to each other, and you can support them if you understand what they're going through."

— Anonymous female military peacekeeper¹¹

While uniformed personnel have a responsibility to manage their home life and professional life, and while they have typically made informed decisions about their career path, it is still incumbent upon organizations to support them — as part of their duty of care and to ensure optimum performance and retention of talent. Sometimes, however, caring responsibilities are regarded as a private matter by institutions, thus abdicating responsibility to provide additional support. Nonetheless, there are many examples of good practice globally where institutions and independent welfare organizations and networks have provided support to uniformed personnel and peacekeepers to manage challenges, including balancing their caring responsibilities and professional work. At the global level, these examples include the International Association of Women Police (IAWP) and the UN Network for Uniformed Women Peacekeepers.¹²

11) Female military peacekeeper deployed to MONUSCO, interviewed 28 October 2024 (Monash GPS project).

12) For other examples and good practice see: Eleanor Gordon et al., *Advancing the Meaningful Participation of Women by Supporting Personnel with Caring Responsibilities*, Monash University, 2026. Available from: <<https://caringforpeacekeepers.org>>.

Good Practice: International Association of Women Police (IAWP)

The International Association of Women Police (IAWP) is a global organization established in 1915. It is dedicated to providing women police with a range of resources and opportunities for networking, training, collaboration, and mentoring to advance women in policing. Members represent more than 70 countries and 30 affiliate organizations. Through its international conferences, regional chapters, and online platforms, IAWP connects women across ranks and career stages, helping to reduce isolation, build capacity, and address challenges, including managing caring responsibilities alongside operational demands, deployments, and leadership roles. IAWP also plays an important role in advocacy and organizational change, promoting policies and practices that support women's engagement and advancement in policing. More about IAWP can be found on their website: <<https://www.iawp.org>>.

Good Practice: Network for Uniformed Women Peacekeepers

The Network for Uniformed Women Peacekeepers is a UN initiative launched in 2023 to connect and empower women in military, police, justice, and corrections roles within peacekeeping missions. It aims to connect women peacekeepers to share experiences and provide a platform to elevate their unique challenges and contributions, thereby improving mission effectiveness and fostering a more inclusive, supportive environment for women peacekeepers. The Network also plays a key role in information-sharing and peer support, helping uniformed women peacekeepers address challenges they face, including those related to family separation, gender and maternal bias, and well-being. The Network is coordinated by the Department of Political and Peacebuilding Affairs (DPPA) and the Department of Peace Operations (DPO) Office for Coordination and Shared Services (OCSS), in partnership with the Office of Military Affairs (OMA), the Police Division, and the Justice and Corrections Service, with support from Germany. The Network can be reached via <dpo-womenpknetwork@un.org>.

Key Messages

- Caring responsibilities are universal, diverse, and unavoidable
- Unpaid care work is deeply gendered and shaped by organizational work cultures
- Recognizing men's caring responsibilities benefits individuals, women's retention, and organizations as a whole
- Culture and intersectionality significantly shape experiences of care
- Recognizing care is a leadership and organizational responsibility, not a private issue
- Stigma around care and self-care undermines well-being, performance, safeguarding, and retention
- Talking about care and help-seeking reflects self-awareness, models leadership qualities, and improves work cultures

Reflective Questions

- What support structures do you know of that can help you or other personnel with caring responsibilities?
- Do you have informal networks that help you or can help others?
- Do you have skills, knowledge, or time that can contribute to networks of support?

End-of-Lesson Quiz »

1. **According to the lesson material, what is the primary definition of caring responsibilities?**
 - A. Professional healthcare services provided by certified nursing staff in a clinical setting
 - B. Voluntary community service hours undertaken for charitable organizations outside of family networks
 - C. Essential, usually unpaid activities provided to individuals who depend on support due to age, disability, illness, injury, or social circumstances
 - D. Paid domestic labour performed by household employees to maintain the physical environment
2. **Global statistics cited in the text indicate that women undertake approximately what percentage of all unpaid care work?**
 - A. 76 per cent
 - B. 45 per cent
 - C. 55 per cent
 - D. 68 per cent
3. **The International Labour Organization (ILO) identifies which factor as the main barrier to women's participation in the global labour force?**
 - A. Lack of secondary education
 - B. Caring responsibilities
 - C. Rapid technological change
 - D. Inadequate transport infrastructure
4. **In 2018, Norway updated its father's quota to encourage a more equitable sharing of care work. How many weeks of paid, non-transferable leave does this policy currently provide?**
 - A. 5 weeks
 - B. 15 weeks
 - C. 25 weeks
 - D. 50 weeks
5. **Which concept is used to describe how overlapping factors — such as gender, culture, disability, and socio-economic background — uniquely shape an individual's experience of care?**
 - A. Intersectionality
 - B. Maternal bias
 - C. Organizational invisibility
 - D. Gendered division of labour
6. **In the context of male-dominated security institutions, how are caring responsibilities and self-care frequently (and incorrectly) framed?**
 - A. As essential components of operational readiness
 - B. As professional skills that enhance leadership capacity
 - C. As signs of emotional intelligence and maturity
 - D. As signs of weakness or private matters that should remain invisible
7. **Which of the following is identified as a direct organizational benefit of destigmatizing care within a professional environment?**
 - A. Increased reliance on negative coping mechanisms
 - B. A reduction in the need for professional training
 - C. Enhanced team cohesion and trust
 - D. Higher rates of personnel attrition in mid-career stages
8. **How does recognizing and supporting men's caring responsibilities specifically assist in advancing gender equality for women?**
 - A. It reduces the pressure on women to absorb disproportionate caring burdens.
 - B. It encourages women to leave the workforce to focus on domestic duties.
 - C. It provides men with higher salaries to compensate for childcare costs.
 - D. It ensures that only men are deployed to high-stress mission areas.

Answer Key provided on the next page.

End-of-Lesson Quiz »

9. According to the 2024 UN report *Towards Equal Opportunity for Women in the Defence Sector*, what is the most highly cited barrier to women's recruitment, retention, and promotion?
 - A. Insufficient physical strength requirements
 - B. A lack of support for parenting and family life
 - C. Lack of interest in security-related careers
 - D. Geographic location of military headquarters
10. What is a role played by the Network for Uniformed Women Peacekeepers launched by the UN in 2023?
 - A. To provide a platform to address unique challenges like family separation and maternal bias
 - B. To automate domestic care tasks through artificial intelligence
 - C. To provide financial loans to peacekeepers' extended families
 - D. To replace national police forces with international volunteers

Answer Key

1. C
2. A
3. B
4. B
5. A
6. D
7. C
8. A
9. B
10. A