ACTION COALITION ON ECONOMIC JUSTICE AND RIGHTS

INCREASE WOMEN’S ECONOMIC EMPOWERMENT BY TRANSFORMING THE CARE ECONOMY

REWARD AND REPRESENT CARE WORKERS

#ACTFOREQUAL
Acknowledgments

Generation Equality is a multi-stakeholder initiative convened by UN Women in partnership with civil society, youth, governments, the private sector and philanthropists to catalyse partners, increase investments, drive results and accelerate the full and effective implementation of the Beijing Platform for Action and the Sustainable Development Goals. The Action Coalition on Economic Justice and Rights is one of the six Action Coalitions of Generation Equality.

It has been a great imperative for the Leadership Structure of the Economic Justice and Rights Action Coalition to share with the world the conceptual architecture underpinning the development of its Global Acceleration Plan. The Leadership Structure understands the enormous effort required to address the critical barriers to gender equality the current state of the care economy imposes. So, while guided by the understanding that this Blueprint on the Care Economy will not capture everything we need to do to realise dramatic, irreversible positive change, the analysis and suggested solutions outlined in this document are considered most critical to unlock care economy solutions in countries and contexts around the world where the care and domestic work drive economic success and wellbeing.

This work could not have been accomplished without the dedication of the seventeen entities that comprise the Economic Justice and Rights Action Coalition’s Leadership Structure. Led by the Action Coalition’s Subgroup on the Care Economy Action, this paper represents the diverse perspectives and experiences from various stakeholder constituencies including youth-led organisations, civil society organisation, governments, philanthropy and private sector institutions, and international and United Nations entities.

The Action Coalition is indebted to Dr. Elissa Braunstein who is Professor at and Chair of the Colorado State University’s Department of Economics and Editor of Feminist Economics, whose extensive expertise and global experience on women’s economic rights helped strengthen the perspectives that have shaped the narrative and call to action contained in this paper. UN Women’s Economic Empowerment Section coordinated the research, outline and general oversight of the development and publication of this document, led by Venge Nyirongo (Action Coalition Thematic Lead) and Layla Mohseni (Action Coalition Programme Analyst).

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BY TRANSFORMING THE CARE ECONOMY

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ACTION

INCREASE WOMEN’S ECONOMIC EMPOWERMENT BY TRANSFORMING THE CARE ECONOMY

RECOGNIZE
REDUCE
REPRESENT
REDISTRIBUTE

REWARD CARE WORKERS
ABOUT THE ACTION COALITION ON ECONOMIC JUSTICE AND RIGHTS

Generation Equality is the world’s leading initiative to accelerate investment and implementation on gender equality. It brings together organisations from every part of society to catalyse progress, advocate for change and take bold actions together.

Convened by UN Women, the initiative aims to ensure that the bold ambitions of the 1995 Beijing Platform for Action on women’s rights are finally implemented, and that the Sustainable Development Goals are achieved. Generation Equality was launched in 2021 at the Generation Equality Forums hosted in Mexico City and Paris. The Forums launched the Generation Equality Action Coalitions, which take on six critical issues that underpin gender equality: i) Gender-Based Violence; ii) Economic Justice and Rights; iii) Bodily Autonomy and Sexual and Reproductive Health and Rights (BA-SRHR); iv) Feminist Action for Climate Justice; v) Technology and Innovation for Gender Equality; and vi) Feminist Movements and Leadership. The Action Coalitions are bringing together these multi-stakeholder partnerships through blueprints for action co-created by Action Coalition Leaders, catalysing collective commitments, sparking global and local conversations between generations and across communities, and driving substantial increases in public and private funding.

As part of the collective work of the Generation Equality Action Coalition on Economic Justice and Rights (the ‘Action Coalition’), the 17 entities leading the work (the ‘Leadership Structure’) co-developed Blueprints on four prioritized Action Areas:

**ACTION 1**
INCREASE WOMEN’S ECONOMIC EMPOWERMENT BY TRANSFORMING THE CARE ECONOMY

**ACTION 2**
EXPAND DECENT WORK AND EMPLOYMENT IN FORMAL AND INFORMAL ECONOMIES

**ACTION 3**
INCREASE WOMEN’S ACCESS TO AND CONTROL OVER PRODUCTIVE RESOURCES

**ACTION 4**
PROMOTE GENDER-TRANSFORMATIVE ECONOMIES AND ECONOMIC STIMULUS

Each Blueprint lays out a rationale, presents important data and statistics and defines a powerful vision for success, as well as proposed strategies and tactics that are grounded in collaborative action through bold and, as much as possible, collective stakeholder commitments. Consequently, the Blueprints are meant to serve as guidance and inspiration for new and existing commitment makers to the Action Coalition, the other Generation Equality Action Coalitions, and the global community.

Together, the four Blueprints make up a Global Acceleration Plan to set a new, ambitious pace for the realization of economic justice and rights for women and girls in all their diversity, everywhere, propelled by an approach that inculcates equality, inclusion, intersectionality, feminist leadership, cultural relevance and transformative action and systems change, which have enabled the creation of grounds for measuring and monitoring the accountability of actors pledging to contribute to a complex web of collective efforts.

By embodying feminist lens in their creation, these documents have materialized from an intense, co-creation and collaborative process underpinned by the inclusivity of all stakeholder constituencies in the Leadership Structure. They represent diverse voices from around the world seen as equals in recognizing the need for shared responsibility to identify and suggest a revitalized global agenda for economic justice and rights that responds to both visible and unapparent structural constraints women and girls face in the economic system.

The Blueprints capture the most important aspects of intensive input and discussions on issues and strategies within the global Leadership Structure of the Action Coalitions. It is vital to note that they do not create obligations for the Leaders of the Action Coalitions beyond the individual and collective commitments pledged by each entity (available here). The diversity of the 17 Leaders of the Action Coalition means that not all strategies highlighted in the Blueprints must be pursued and supported by every Leader or Commitment Maker, with each able to address the recommendations in accordance with their attributions, functions and possibilities. At the same time, Leaders and Commitment Makers may go beyond the approaches captured within this framework in pursuit of economic justice and rights for women and girls.
WHY ECONOMIC JUSTICE AND RIGHTS?

Economic justice and rights (EJR) refers to how economic and political systems are designed, how their benefits or costs are distributed, and how institutions are held accountable for the economic outcomes they generate. This theme encompasses the full spectrum of women’s access to and control over productive resources and economic opportunities, including within the world of work. It encompasses subthemes such as tackling systemic barriers in unpaid care and domestic work, time poverty and wage inequity, unsafe and unhealthy working conditions, including sexual and gender-based violence and harassment; addressing discriminatory public policy and laws (e.g., land rights and barriers to access finance or other productive inputs); and fostering accelerators to EJR such as digital and financial inclusion. EJR requires working towards more equitable structures to ensure women and girls, especially those facing intersecting forms of discrimination and disadvantage, can navigate and manage future crises with security and resilience—including through universal social protection. EJR addresses macroeconomic and microeconomic factors, e.g., how the economic system reinforces gender and intersecting inequalities; how much of the care work, mostly done by women, is systemically undervalued, unpaid/underpaid and marginalized; and how women and girls often lack the rights and access to resources and opportunities in order to fully realise their economic potential and rights.

The COVID-19 pandemic has further exacerbated structural inequalities and rolled back progress on gender equality by a generation. This has been particularly pronounced for women and girls in developing countries, where there has been more limited fiscal capacity, access to healthcare, education and social protection, and a slower economic recovery. The pandemic has increased levels of paid and unpaid care work and highlighted its importance. That a health crisis could cause an economic crisis has exposed the central importance of the care economy, which is built on the unpaid and underpaid labour of mostly women and girls. Women’s care responsibilities and roles as shock absorbers for their families and communities drew them out of paid employment and intensified their workdays. Sustainable economic development and gender-just recovery from COVID-19 depend on the theme of economic justice and rights. More broadly, progress in women’s economic justice and rights accelerates progress for sustainable development in all its dimensions—economic, social and environmental—as well as for all the other Action Coalitions.
WHY THE CARE ECONOMY?

DEFINING CARE WORK AND THE CARE ECONOMY

Care is a social good which is fundamental for the sustainability of life. Care describes both a type of work and the emotional attachment associated with it. Care work includes both direct, personal and relational care activities, as well as indirect care activities that provide support for direct care, such as cooking, cleaning or collecting water, sometimes referred to as ‘domestic work’. Care work can be either paid or unpaid, with paid care work or employment including a range of personal services such as nurses, teachers and care assistants. Globally, women and girls perform more than three quarters of unpaid care work, and women constitute two thirds of paid care workers, many of them migrants and working in the informal sector for very low pay.

Economies rely heavily on unpaid care and domestic work, which is worth an estimated US$11 trillion each year, equivalent to 9 percent of the global GDP. Although critical to our social and economic wellbeing and prosperity, unpaid care work has been largely ignored in economic and social policy, as reflected in its absence from monetary valuations of national income and production like GDP. The concept of the ‘care economy’ provides an inclusive alternative to this traditional, narrow, market-based view of the economic. The care economy is a broad-based concept that encompasses both non-market and market care provisioning, including public investments in social infrastructure and social protection. The care economy is built on a continuum of care that includes care services, infrastructure and policy. Care economy stakeholders thus encompass all those who produce and distribute care, as well as those that facilitate care through infrastructure and policy, including families and households, the State, the market and the private sector, and community organizations and civil society. As such, the care economy is vital to the functioning of the broader economic system, and its organization reflects the norms, values, rules, assets and structural inequalities of the social system on which it is based.

CARE WORK AND GENDER INEQUALITY

Women’s and girls’ disproportionate responsibility for unpaid care work is a key driver of gender inequality in both the labour market and the household. Girls between age 5 and 14 spend 40 percent more time than boys on unpaid household work, including collecting water and fuelwood. These responsibilities greatly limit girls’ opportunities for education, particularly during times of economic crisis when they are often called upon to help lighten the economic stress of their families. Globally, women spend an average of 3.2 times more time on unpaid care work than men (or between 2 to 10 times more than men). Even as women’s market labour force participation has increased and men’s has declined across almost all countries over the past few decades, gender gaps in unpaid care work have been slow to change. Among 23 mostly higher income countries with available time series data between 1997 and 2012, the gender gap in time spent on unpaid care declined by only 7 minutes (from 1 hour and 49 minutes to 1 hour and 42 minutes). This disproportionate responsibility results in a ‘double day’ for women who also undertake paid work. Adding together the hours spent in paid and unpaid work, across all regions of the world, women work longer hours than men. Gaps in work hours vary by country, but the average gender gaps are larger in lower-income than higher-income countries, as well as in regions where stronger patriarchal gender norms and stereotypes regarding the gender division of labour prevail.

The inequitable distribution and the time and opportunity costs of unpaid care work are key factors in determining whether women prepare for, enter, remain and advance in employment, with negative consequences for women’s economic empowerment and gender equality. Having children is associated with declines in women’s labour force participation and earnings, but increases in both for men. Responsibilities for care also limit the earnings and job quality that women can attain: these responsibilities are associated with working fewer hours, lower status and pay in employment, and poorer working conditions. Women with care responsibilities are also more likely to be self-employed or work in the informal sector, and thus are less likely to have access to social insurance and protection.

Gender norms and stereotypes, and the underlying gender discrimination that they reflect and perpetuate, lead to a consistent undervaluation of both paid and unpaid care work. They also contribute to occupational segregation and the undervaluing of work women generally perform in the labour market, both within and outside the care sector. The concentration of women’s employment in occupations and industries associated with women’s traditional roles, and the low pay and job quality typically associated with women’s work, thus reflect prevailing gender systems.

These systems intersect with other forms of stratification such as those based on race, ethnicity, migration or refugee status, creating markets for care that are stratified in multiple ways. Migration has become increasingly significant in global health labour markets, driven by worker shortages in higher-income countries and increasing global inequality. Domestic workers, of whom 76.2 percent are women, face some of the highest rates of informality, and the most difficult and low-paying working conditions. Many are migrant workers from racialized, indigenous and rural communities, which make them particularly vulnerable to exploitation, violence and restrictions on freedom of movement.
In light of these gendered dynamics, it is clear that reducing the amount of unpaid care work performed by women and girls through transformative care policies, and investing in and building the care economy, will help women and girls realize their economic rights and opportunities, increase their labour force participation and access decent jobs. It can yield positive health, economic and gender equality outcomes, leading to better outcomes for children, older persons and people with disabilities, as well as increased employment opportunities for women and the redistribution of caregiving responsibilities in households. Data on public expenditure on selected care policies show that in countries that tend to invest more in a combination of care policies, the employment rates for unpaid women carers aged 18 to 54 tend to be higher than those in countries which invest less. In particular, regions affording comprehensive maternity protection and parental leave, in conjunction with a relatively generous provision of early childhood care and education services, generally have on average higher maternal employment rates.

Gender-responsive and human rights–based care policies can also help transform the gender division of labour in households and thus change individuals’ attitudes towards care work. When fathers take on a share of the care work, it helps to not only accelerate progress for this generation, but impacts the next as well, challenging stereotypes and setting new precedents. For example, there is a positive correlation between national parental leave arrangements and men’s time spent on childcare. Those countries where men spend on average at least 60 percent of the time that women spend on unpaid care are also those where men have access to the longest duration of paid leave. These benefits are made possible by shifting part of care work from the family and women to the State and public provisioning.

Shaping a publicly funded and well-structured care economy to build more inclusive, resilient economies and societies requires the realization of decent work for all care workers, including domestic and migrant care workers and groups facing intersecting discrimination. Investments in quality public care services and the adoption of laws and policies that protect fundamental labour rights, including the right to organise and the right to collective bargaining, will make a difference in improving working conditions for all care workers and tackle structural inequalities with a view to fostering women’s and girls’ economic justice and rights. It will also improve the quality of the services they deliver, as poor working conditions risk poor-quality care services. These rights must be universal for all workers, including migrant workers and workers in the informal economy. Such investments in social infrastructure and care provisioning will not only strengthen economic justice and rights for women and girls, they will also improve prospects for inclusive growth and development.

The impacts of the COVID-19 pandemic as well as increased demand for care underpin the urgent need for public investments in quality public care jobs and services, combined with inclusive and universal social protection systems. According to the International Labour Organization (ILO), 2.1 billion people were in need of care in 2015, including 1.9 billion children under the age of 15, 200 million older persons, and an estimated 110 to 190 million people with disabilities. By 2030, this number is expected to reach 2.3 billion, driven by an additional 200 million older persons and children. In order to achieve the Sustainable Development Goals (SDGs), 269 million jobs in the care economy will need to be created by 2030. The World Health Organization predicts that economic and demographic trends will create around 40 million new jobs in the health and social sector, mostly in middle- and high-income countries, by 2030. But despite the anticipated growth in jobs, there will be a projected shortfall of 18 million health workers, mainly in low- and lower-middle-income countries. The ILO estimates that investing in childcare and long-term care services could generate almost 300 million jobs by 2035, with 78 percent going to women, and 84 percent in the formal sector. Research commissioned by the International Trade Union Confederation (ITUC) shows how investing 2 percent of GDP in public care services can create millions of quality jobs, narrow the gender pay gap, reduce overall inequalities, help redress the exclusion of women from decent jobs and contribute to inclusive economic growth.
CONSTRAINTS TO PROGRESS

Unpaid care and domestic work are a disproportionate burden on women and girls. The unequal division of unpaid care work prevents women from investing time in themselves; constricts access to social protection, healthcare, education and decent, paid work; reduces their ability to take part in social or political life; and increases their vulnerability to, and inability to leave, situations of gender-based violence or abuse.

Progress on the care economy agenda is constrained by gender norms and stereotypes that task women and girls with providing care for free, dictating what types of work (paid and unpaid) are appropriate for women and men, and systematically undervaluing women’s work in both the market and the home. This gendered undervaluation intersects with multiple systems of stratification, making groups which are more marginalized based on race, ethnicity, age, migration or refugee status among others face compounded and costly effects.

Gender norms also underlie the legacy of the exclusion of unpaid care from market-based definitions of economic output or GDP, which is used as a central metric for assessing policy and tracking economic growth and development. The UN’s System of National Accounts (SNA), which specifies accounting standards for recording GDP, does include production for own use, such as growing food for one’s own consumption or collecting fuelwood, within the SNA production boundary. But unpaid direct care services and the majority of unpaid domestic work or indirect care are still excluded. With the 2008 SNA revision, national statistical offices are now encouraged to produce satellite accounts that include unpaid care work, but national standards for doing so are not uniform, and systematic data collection on time use is still quite limited.

In parallel with this exclusion, the increasing commodification or marketization of care work—and growing calls for advancing gender equality and the human rights of women and girls from global institutions and civil society—have brought care work into the sphere of traditional economic policy and analysis. But markets may not be effective producers of high-quality care. This is partly because care is a public good: the wider society benefits when care is high quality, when care jobs are good jobs and when care recipients are well taken care of. The social externalities associated with care are similar to those that come from the natural environment: despite these services being essential for both well-being and economic production, market pricing assigns them little to no value, leading to (over)exploitation and depletion.

Beyond the SNA, the undervaluation of care also constrains fiscal capacities to finance social infrastructure investment. Conventional economic analysis treats most public spending on health and education as current consumption rather than investment. Because investments entail a future stream of economic returns, governments are able to borrow to finance it. This is not the case for most aspects of public spending on care, which are largely financed by current revenues. Cast in the current global economic context, where developing country governments have had to largely maintain fiscally austere stances to manage globalization and conform to prevailing macroeconomic policy orthodoxies, public investment in the care economy is severely limited. This is despite mounting evidence that increasing public spending on creating high-quality care jobs is an employment-intensive instrument for expansionary and inclusive fiscal policy, more than paying for itself through increased tax revenues over time. Ongoing structural public underinvestment in the care economy constrains access to equitable, quality public health and care services and decent work for care workers, as well as prospects for inclusive growth.
IMPACTS OF COVID-19

The COVID-19 pandemic has laid bare the devastating effects of decades of underinvestment in quality public health and care systems and has further exacerbated women’s and girls’ caregiving burdens. Many countries were ill-prepared to deal with the scale and rapidly evolving nature of the pandemic. This global crisis has made starkly visible the fact that the world’s market economies and the maintenance of our daily lives are built on invisible and unpaid labour, mostly done by women and girls. With children out of school, intensified care needs of older persons and ill family members, as well as health services being overwhelmed, demands for care work during COVID-19 intensified exponentially.

Strained care systems and the accompanying health and safety risks to care workers due to insufficient resources are being felt most acutely by women, who comprise roughly 70 percent of the healthcare sector workforce, according to the World Health Organization.33 The health crisis highlights and exacerbates pre-existing structural inequalities within paid care sectors. For instance, given the risks of COVID-19 for the elderly and those with underlying health conditions, the long-term care (LTC) sector became an important tool for managing the crisis and protecting the most vulnerable.34 Among OECD countries, 90 percent of the LTC workforce are women, and 20 percent are migrants. Wages are low, stress is high, and almost half of LTC workers are part-time.35 Despite their being at the front lines of the pandemic, LTC and other types of essential paid care service work are poorly rewarded and recognized, even though LTC services are essential for ensuring the right to healthy aging and independent living.36 This pattern reflects the larger finding that care jobs often incur a ‘care penalty’, that is, relative to other types of employment with similar job and personal characteristics, jobs with a care component tend to pay less.37 Added to the challenges of paid care work, health services not related to COVID-19 may be reduced, leaving families to care for sick members—a role typically filled by women and girls.

At the same time, women have been negatively impacted by reduced access to sexual and reproductive health services and essential services for survivors of violence. This is particularly pressing given emerging evidence that the pandemic has led to more violence against women, including physical and verbal abuse, denial of basic needs, and sexual harassment.38 Rapid Gender Assessments conducted by UN Women in the second and third quarters of 2021 show 45 percent of women reporting that either they or another woman they knew experienced violence since the start of the pandemic, with unemployed women more likely to report experiencing violence.39 As the world moves into the third year of the pandemic, signs of a global economic recovery in late 2021, largely concentrated among higher-income countries, have been set back by war in Ukraine. Inflation spurred by ongoing supply chain bottlenecks, and then price increases for energy and food, have induced a turn towards tighter monetary policies across most countries. Financial fragility is increasing among developing countries, as capital outflows have put downward pressure on their currencies, exacerbating inflationary pressures. And calls for fiscal austerity are on the horizon, as the combination of pandemic spending, public debt and inflation (especially for developing countries that are also net food importers) evoke worries of an intensifying economic crisis.40

These mounting pressures have significant implications for the care economy and gender equality, particularly for women and other marginalized groups in developing countries, where the scope of fiscal capacity to support care is much narrower. Although the lessons of the pandemic have led to calls from international financial institutions including the IMF for countries to maintain social and health spending despite rising fiscal pressures, a resource-sharing, multilateral approach to financing such spending is necessary to achieve these goals.41 This approach must also be gender-aware. Before the pandemic, 31 percent of the global population was covered by comprehensive social protection systems; women’s coverage was 8 percentage points lower than men’s. And though pandemic cash relief was less likely to be associated with employment, out of 1,700 global social protection and labour market measures taken in response to the pandemic, only 11 percent addressed unpaid care and only 13 percent prioritized women’s economic security. The balance of 86 percent was gender blind.42

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Examples of Good Practices

Good practices to achieve economic justice and rights need gender-aware care policies and the participation of multiple actors, including government, the private sector and civil society. Governments must enact laws and public policies which ensure decent work for care workers, regulate care providers and provide universal access to social protection, including care-related leave policies as well as childcare and long-term care services.43 An example is provided by Uruguay, where, in response to time use surveys showing women spent two thirds of their work weeks providing unpaid care, civil society and academia proposed the reconceptualization of care as a collective social responsibility. This research and collaboration supported the passage of the Care Act, which entitles all those in need of care the right to publicly provided care, as well as recognizes the right of caregivers to decent work. Uruguay’s Integrated National Care System provides a model for public provisioning in ways that also reduce gender inequality by recognizing, reducing and redistributing care responsibilities, and decently rewarding paid care work.44

The private sector must adhere to laws, regulations and policies—including collective bargaining agreements and corporate policies such as paid parental leave—and proactively create family-friendly policies that recognize, reduce and redistribute the burden of unpaid care. Such policies are not only good for women but good for business. As an example, if there is no national welfare system that provides affordable day care, businesses that encourage subcontractors in their supply chains to provide childcare for workers can help fortify supply chain resilience as well as gender equity.45 For instance, within a year of introducing childcare facilities at a floriculture business in Kenya serving clients in China and Japan, unplanned leave declined by 25 percent and productivity improved.46 And offering childcare benefits reduced staff turnover by 15 percent at Martur, a car component factory in Turkey.47

Community-based initiatives provide models for treating care as grounded in the ethics of social justice and centered in community provisioning. Examples include Piña Palmera in Mexico, which works with, for and in the interest of people with disabilities from a social and human rights perspective.48 Home-Start Worldwide in the United Kingdom coordinates trained community volunteers to support families with preschool-aged children through regular home visits; it also operates an international network of Home-Start organisations in 22 countries.49

Civil society and unions can organise care workers for effective and scalable action, bargaining for better pay and working conditions, occupational safety and health, education and training. International organizations can provide leadership in this area. The adoption of ILO’s Domestic Workers Convention, 2011 (No. 189) and Domestic Workers Recommendation, 2011 (No. 201), which call for ensuring the labour rights of paid domestic workers, most of whom are in the informal sector, has built momentum for positive change.40 The ILO estimates that, as a result of efforts spurred by the Convention, the number of domestic workers included under the scope of labour laws increased 15 percentage points between 2010 and 2020, from 46.6 percent to 63.9 percent of domestic workers.41 Such measures better enable civil society to organise and engage in collective efforts to better represent and reward care workers.

Policies and best practices can achieve greater reach through investment in decent care jobs; collective bargaining coverage; combining national and community tactics with advocacy; driving simplified government implementation; and leveraging existing initiatives, including the Unstereotype Alliance and the HeforShe Campaign. These initiatives help counter damaging gender stereotypes, including through efforts specifically aimed at norms surrounding unpaid care work, such as promoting more equal sharing of childcare at home and the sharing of parental leave between fathers and mothers.

Macroeconomic policies play a key role in advancing or hindering gender equality, as they shape the overall economic environment. Such policies can promote gender mainstreaming to boost both short-term and, crucially, long-term inclusive economic growth in ways that promote women’s economic empowerment. They require approaches, such as gender-responsive budgeting, that recognize and prioritize the creation of productive and decent jobs and support existing livelihoods in agriculture and the informal economy. This requires adequate, universal social protection over the life cycle, public investments in social and rural infrastructure, and maximizing and optimizing fiscal space through tax regimes that redress inequalities and provide sufficient public resources.

Domestic resource mobilization through taxation has become an increasingly important part of building fiscal capacity. The UN Secretary General’s establishment of Our Common Agenda, designed to speed up implementation of existing agreements including the SDGs, calls for renewing social contracts between governments and society, partly...
through tax reforms that can better support inclusive and expansionary fiscal policies and extending universal social protections. Recommended policies include taxing environmentally harmful activities rather than people or income, introducing fair royalty regimes for natural resources, and reforming the international tax system to more effectively and fairly tax cross-border trade and finance and reduce harmful tax competition. On the microeconomic side, domestic tax policies that tax individuals rather than jointly taxing partnered adults encourage female labour force participation, as combined incomes incur higher marginal tax rates on second earners in progressive tax systems.

GEOPHGRAPHICAL DIMENSIONS

Actions to address the care economy should recognize the universal nature of the barriers to progress for women and girls performing direct care and domestic work, whether paid or unpaid, and as such should engage countries in the Global North and Global South, and across all regions. However, binding constraints vary across regions and by levels of development. For instance, fiscal capacity to finance quality, gender-responsive public care services is greater in high-income countries, so efforts to make existing public spending gender-aware and care-aware might be most impactful in these contexts. Conversely, informal employment is the dominant form of employment in most developing countries, with women having especially high rates of informalization in sub-Saharan Africa and Latin America. And rural residents are more than twice as likely to work informally than urban residents. Regulatory reforms and financing social protection in ways that increase job quality and support care provisioning for those who provide it and those who need it would be more impactful in these contexts. Geographical dimensions also encompass the challenges posed by migration and refugee status. Women’s migration, both internationally and within countries, is increasingly connected to pursuing paid domestic work and jobs in healthcare. As noted above, these workers face some of the most difficult and low-paying working conditions, and are especially vulnerable to exploitation and violence. Special attention must be paid to care sector workers whose contexts span regions and may be left out of nationally based strategies.

STAKEHOLDERS AND POWERHOLDERS

The key stakeholders for the care economy are women and girls, who are disproportionately burdened with the responsibility for unpaid care and domestic work, concentrated in undervalued and underpaid market care sectors, and whose contributions to development and growth have been overlooked by conventional economic analysis and policy. Care economy stakeholders must better reflect the different situations in and priorities of the Global North and Global South. While care work is disproportionately and predominantly performed by women in both contexts, how the Action Coalition identifies the dimensions, realms and negative impacts of the gendered division of care work must be nuanced to forge a relevant, impactful action agenda. In both contexts, key stakeholders include direct care and domestic workers, many of whom labour in the informal sector or may be migrants; and in the North, parents (especially mothers) and others with significant care responsibilities who may prioritize establishing affordable, high-quality market care or a different or more sustainable work-life balance. Care providers in the public and private sectors, as well as institutionally based paid care workers (e.g., in nursing homes, special needs facilities), are also key stakeholders in the care and decent work agenda. Key constituencies also include women and grassroots groups in urban and rural poor communities who voluntarily contribute to the care and well-being of their communities; this work could be publicly financed and recognized as paraprofessional and/or social protection and as work that sustains human capabilities, reduces vulnerability and raises resiliency. Other stakeholders include women organized in settlement, housing and neighbourhood safety associations who are front-line workers remedying unsafe water and sanitation conditions and addressing food insecurity in their communities. While this work is an extension of their care work in the home to the public sphere, it can and must be recognized, validated and remunerated.

An intersectional approach is critical to inform the Action Coalition’s approach to identifying an inclusive and socially just spectrum of stakeholders. This is because women’s intersecting identities significantly shape the level of discrimination, disadvantage and oppression they face in accessing paid and decent work, markets and resources. Women’s experiences of economic inequality are deeply entrenched in factors including race, ethnicity, caste, class, religion, age, sexual orientation, gender identity, disability, migration status and more. These factors related to social and economic stratification impact those in need of care and those providing care, both within and outside the market.
The Action Coalition on Economic Justice and Rights will further work to accelerate progress on the care economy agenda through the “5Rs”, a global multi-stakeholder approach to design, finance and implement measures to recognize, reduce and redistribute unpaid care and domestic work, reward paid care work and ensure the representation of women care workers. More specifically, the Action Coalition will drive concerted action, by 2026, to increase the number of countries with a comprehensive set of measures in gender-responsive public quality care services, and law and policy reforms, including through investments of a recommended 3 to 10 percent of national income and the creation of up to 80 million decent care jobs to recognize, reduce and redistribute unpaid care work and reward paid care work and represent care workers, while guaranteeing care workers’ decent pay and labour rights, including in the private sector.

The 5Rs present a major opportunity to make impact towards the recognition of the rights of billions of women and girls engaged in care work and of the contribution of care work towards economic growth and well-being. They align with SDG target 5.4, 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 family as nationally appropriate;” and SDG target 8.5, to “achieve full productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value.” They also align with the ILO’s Decent Work Agenda, the recommendations of the UN Secretary-General’s High-Level Panel on Women’s Economic Empowerment and the work of the OECD’s Policy Dialogue on Women’s Economic Empowerment.57
Suggested stakeholder commitments

1. Enforce and enact laws and policies to recognize, reduce and redistribute unpaid care and domestic work, including through equitable quality public care services, access to gender-responsive social protection systems, decent pay and working conditions for all care workers, mandating paid parental and family leave, and the ratification and effective implementation of ILO Conventions 156, 183 and 189.

2. Design and scale up comprehensive policies, testing and investments in social norm change and programmes seeking to promote women’s equal role in dignified paid work, including for grassroots women, alongside men’s equal sharing of unpaid care and domestic work.

3. Build the care economy by expanding decent work opportunities for care and domestic workers, including in the informal economy, by strengthening public policies and regulating private sector care services.

4. Leverage the right to collective bargaining and freedom of association to develop workplace policies that promote gender equality, address sexual exploitation, abuse and sexual harassment (SEAH), and enhance the sharing of unpaid care and domestic work.

5. Adopt policies that integrate climate mitigation and adaptation in care solutions to enable sustainable access to and use of clean water and sanitation and energy resources. This commitment is synergistic with the Action Coalition on Feminist Action for Climate Justice.

Suggested stakeholder commitments

1. Establish, conduct and institutionalize the regular collection, analysis and publication of data statistics disaggregated by gender, age, race, migration status and other variables on paid and unpaid care and domestic work, including through time-use surveys, household or labour force surveys and national accounts in at least 15 countries between 2021 and 2026.

2. Create normative and legislative frameworks to analyse and address the impacts of public policies on the recognition, reduction and redistribution of unpaid care work, while working towards building the care economy and equitable rewards for care and domestic workers and ensuring care and domestic workers are represented in policy design, implementation and evaluation.

3. Conduct care investment models and promote the generation of data, including costing and impact studies, focused on investment return to demonstrate the economic value of care in our society and economy, COVID-19 recovery plans and for monitoring and evaluating care services.

4. Invest in research on paid and unpaid care and domestic work to inform legal, policy and accountability frameworks associated with care work.

5. Create regulatory frameworks for accountability to establish the provision of quality public health and care as a public good.

6. Build on emerging policy guidance on gender equality and women’s empowerment which will cover more effective normative and diagnostic frameworks for supporting developing country efforts over 2021-22 in the OECD Development Assistance Committee of 30 bilateral donors.
ENDNOTES


7. UN Women. 2021a.


10. ILO. 2018b: 49.


32. ILO. 2018a.


34. ILO. 2022a.


36. ILO. 2022a.


39. Ibid. Rapid Gender Assessments were conducted in 13 countries spanning all regions.


41. Ibid.

42. UN Women. 2021b.

43. ILO. 2022a.


51. ILO. 2021.


54. ILO. 2018b.

55. UN. 2021.

56. United Nations Department of Economic and Social Affairs - Sustainable Development. 2022. “Make the SDGs a Reality”. https://sdgs.un.org. The indicators associated with these targets provide useful metrics for assessing progress. The indicator for target 5.4 is the proportion of time spent on unpaid domestic and care work, by sex, age and location. For target 8.5, indicators include: average hourly earnings of female and male employees, by occupation, age and persons with disabilities; and unemployment rate by sex, age and persons with disabilities.

ACTION COALITION ON ECONOMIC JUSTICE AND RIGHTS #ACTFOREQUAL

1 INCREASE WOMEN’S ECONOMIC EMPOWERMENT BY TRANSFORMING THE CARE ECONOMY