



Policy brief

# Building caring societies: how states can shift the gendered norms of care

Aatif Somji  
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## Key messages

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Care work – paid and unpaid – remains deeply gendered, with negative financial impacts for women. Governments can take concerted action to shift wider social norms through: individual care policies, holistic care policy packages, and working with global alliances.

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Narratives around care work must shift away from the idea of a private ‘burden’ to a shared responsibility. Care is a social good that is critical to well-being, providing the foundations upon which economies function, and so responsibility should be shared between the state, community, family and individuals.

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Policymakers are encouraged to take concrete actions to shift discriminatory gender norms relating to care by building caring societies through public care systems. This will distribute caring responsibilities more equally among all genders and ensure everyone has the opportunity to fulfil their economic potential.

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# Introduction

The inaugural International Day of Care and Support is a welcome recognition from the international community of the invaluable contribution of care work to our societies and economies. It builds upon the tireless efforts of civil society and trade unions to give visibility to the importance of care and of public investment in a resilient and inclusive care economy: **recognising, reducing and redistributing unpaid care work**, and **rewarding and supporting the representation of paid care and domestic workers**.

The distribution of care work – paid and unpaid – remains deeply gendered. Globally, women and girls carry out on average more than three times as much **unpaid care work** as men and boys, which equates to roughly 12.5 billion hours of unpaid care work performed by women and girls every single day. Even before joining the world of work, care responsibilities can limit girls' opportunities for education. This time constraint is why unpaid care work constitutes the main barrier to women's participation in the labour force.<sup>1</sup> Meanwhile, many women who join the labour force face a 'double shift': when combining paid and unpaid work, women work, on average, longer hours than men across all regions of the world.<sup>2</sup> Women's disproportionate unpaid care responsibilities perpetuate gender inequalities in labour markets, limiting their economic rights and freedoms.

Just as women shoulder greater responsibility for unpaid care work, so the majority of **paid care work** is done by women. Approximately two-thirds of the global care workforce – which includes those in education and health sectors as well as domestic workers – are women. Many of these jobs are typically characterised by low status, low pay, poor working conditions and – particularly in the case of domestic work – high rates of informality and risks of abuse, exploitation and harassment.<sup>3</sup> Migrant and ethnic minority women are often overwhelmingly over-represented in the lowest paid and most undervalued care jobs.<sup>4</sup>

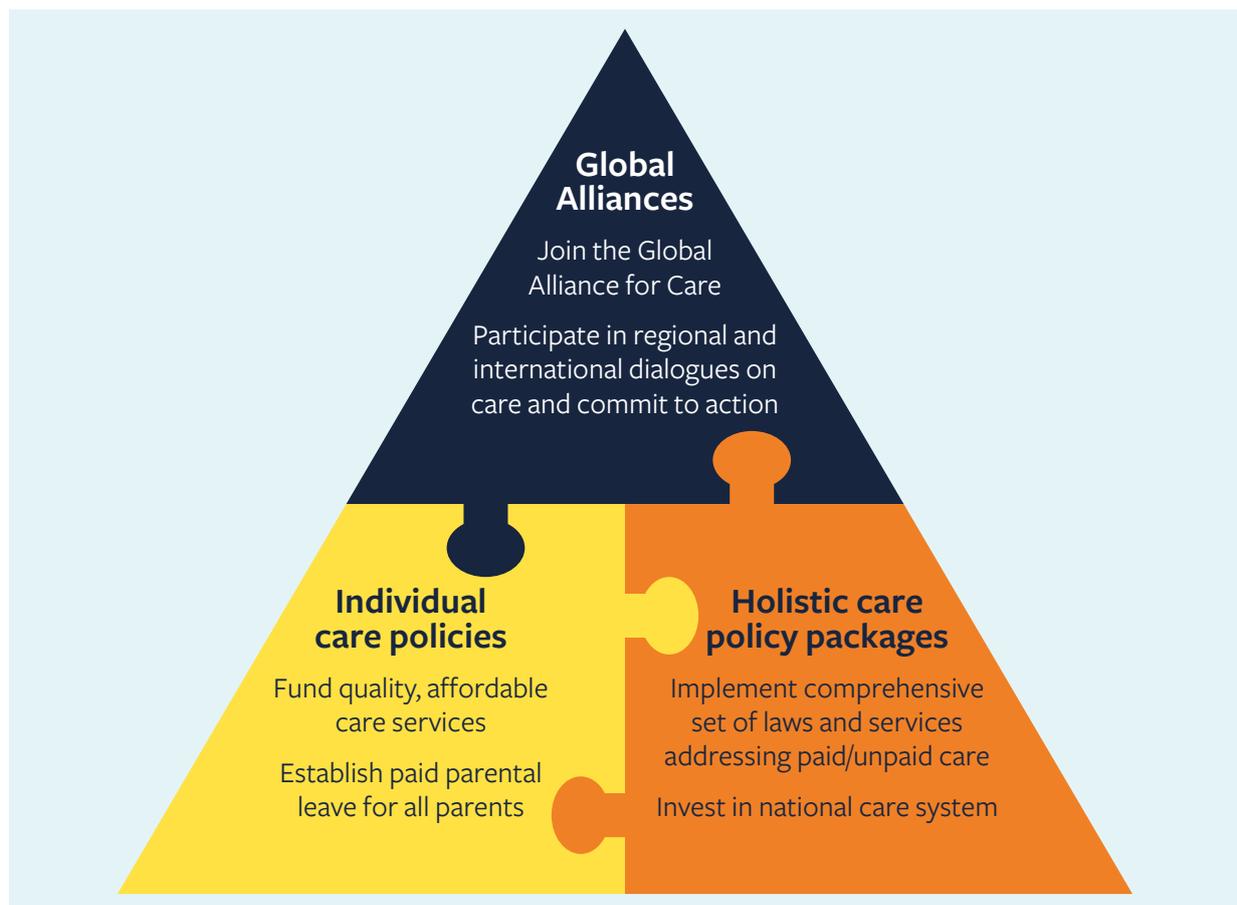
Underlying these patterns of labour distribution are norms: the implicit, informal rules that most people accept and follow.<sup>5</sup> In much of the world, **gender norms** assign women the role of primary caregiver while men's role is typically that of breadwinner, or primary income earner. Paid care work is then often seen as a 'natural' extension of women's unpaid care responsibilities.<sup>6</sup> These norms also underlie the exclusion of unpaid care work from market-based definitions of economic output.<sup>7</sup> Overall, gender norms reinforce the gendered distribution of care work and its devaluation across societies and economies.

Governments serious about achieving gender equality in labour markets and inclusive economic growth must meaningfully address gender norms through public policy. The narrative around care work needs to be shifted away from the idea of a private 'burden' borne largely by individual women at home. Instead, care should be reframed as a **social good**: critical to our well-being, essential for the provisioning of societies and providing the foundations upon which our economies function. Equally, care should be understood as a **shared responsibility**: between states and families, individuals and communities, women, men and people of all genders.

Policymakers can foster more gender-equal norms relating to care by taking the following actions (see Figure 1), each of which is outlined in more detail in this policy brief:<sup>i</sup>

- **Individual care policies**
  - Fund quality, affordable care services
  - Establish paid parental leave for all parents
- **Holistic care policy packages**
  - Implement a comprehensive set of laws and services addressing paid and unpaid care
  - Invest in a national care system
- **Global alliances**
  - Join the Global Alliance for Care
  - Actively participate in regional and international dialogues on care

**Figure 1** Policy options to foster more gender-equal norms relating to care



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i Gender norms relating to care, as well as care policies and services, apply across a continuum of care: spanning the life course from birth and infancy through to old age and death. This brief explores childcare in relatively greater detail, while still acknowledging the multitude of care needs across societies.

# Individual care policy recommendations

## Fund quality, affordable care services

A lack of quality, affordable care prevents women from entering or re-entering the workforce, or confines them to more flexible, part-time and often lower paid work. Governments that fund care services allow all caregivers the opportunity to participate meaningfully in the paid economy: benefiting national finances, and – importantly – demonstrating shared responsibility of the state for nurturing healthy economies and societies.

A core example is childcare. Across the world, it is estimated that approximately 40% of all children below primary-school age – or close to 350 million children – need but do not have access to childcare services. This disproportionately affects families in low- and lower-middle income countries, where eight out of ten of these children live. Expanding the childcare workforce to meet current needs could create up to 43 million jobs globally.<sup>8</sup> Funding quality childcare services is therefore an investment in children, parents, society and economy.

Access to subsidised childcare tends to increase employment rates for women across low-, middle- and high-income countries.<sup>9</sup> For example, a review of 22 studies found that greater access to subsidised childcare increased women's employment rates in all of these cases bar one.<sup>10</sup> And analysis across 18 European countries found that expanding public childcare spending contributes to more gender-equitable attitudes towards maternal employment. Importantly, this trend is most pronounced where access to childcare is more equal for parents across different socioeconomic backgrounds, underlining the importance that such policies are designed with fairness and inclusion in mind.<sup>11</sup>

There are many different implementation models for childcare that governments can support:

- direct public provision
- market provision
- public-private partnerships
- cooperatives
- other home- and community-based services.

Certain design features can encourage greater take-up of childcare services. Principal among these are the affordability, quality and safety of childcare centres; operating hours that align to parents' working hours; and proximity of these services to the home or workplace.<sup>12</sup>

Considering the **continuum of care services across the life course**, other important care provisions include care for older persons, people with disabilities and those with chronic illness.

While the exact modalities of care services will vary according to different contexts, it is crucial that the **state maintains primary responsibility for care** through defining quality standards; funding care; assuring/regulating the quality of care services; and directly providing these services where feasible. The public provision of care services tends to improve working conditions and pay of care workers, across all country income levels, while unregulated private provision is associated with worsening job quality and pay.<sup>13</sup>

In some instances, particularly strong gender norms against women working or leaving dependents in the care of others may limit the transformative potential of care services. In these cases, some direct norm change interventions – such as media campaigns – may be required in tandem with quality and affordable care services to encourage greater take-up and accelerate shifts in gender norms.<sup>14</sup>

Overall, access to care provision improves women’s employment outcomes, which can directly influence the acceptability of women engaging in paid work: helping to overcome traditional gender norms that dictate that women should stay at home and look after those who require care. By funding affordable, quality care services, governments share this responsibility for nurturing healthy economies and societies.

### **Establish paid parental leave for all parents**

The amount of time women dedicate to unpaid care work increases significantly with the presence of young children in the household, much more so than for men.<sup>15</sup> This suggests that parenthood is a critical juncture where traditional gender norms around care can either be reinforced or transformed. Parenthood is not only about women becoming mothers; it is about people becoming parents. Therefore, it is essential that governments wanting to foster more gender-equal relations implement paid parental leave for all parents, including mothers, fathers, same-sex couples, those who identify as non-binary and adoptive parents.

While the majority of countries worldwide provide some form of paid maternity leave, 72 out of 190 economies globally still do not mandate at least 14 weeks of paid maternity leave in line with the ILO Maternity Protection Convention.<sup>16,17</sup> Beyond the well-documented benefits on maternal and child health and development, state-mandated maternity leave can be important for shifting gender norms. Increases in paid maternity leave are associated with more equitable attitudes towards working women, as well as women’s increased involvement in household decision-making.<sup>18</sup> But without similar leave policies for all parents, maternity leave risks reinforcing traditional gender norms around care.

Parental leave reforms, predominantly in European countries, provide a good indication of the gender-transformative potential of such policies. Many of these feature an allocation of leave that is exclusively reserved for each parent, often implemented on a ‘use it or lose it’ basis where families must ensure this reservation of leave is taken by each parent or give it up. This policy

design provides a strong incentive, or ‘nudge’, for all parents to increase their involvement in caregiving. Another important design feature is ensuring that this leave is adequately remunerated to encourage take-up.

These reforms are effective in shifting men’s caregiving behaviour. Looking specifically at heterosexual couples, evidence from Norway,<sup>19</sup> Spain,<sup>20</sup> Germany<sup>21</sup> and Canada<sup>22</sup> suggests that reforms encouraging fathers to take parental leave have had long-term effects on the amount of childcare they do later on in life as their children get older. This is likely to have generational effects: boys who see their fathers doing care work are more likely to be involved in care work if they become parents.<sup>23</sup>

Parental leave reforms also positively impact women’s labour market outcomes. Evidence from Denmark,<sup>24</sup> Sweden<sup>25</sup> and Spain<sup>26</sup> suggests mothers’ earnings increase as a result of parental reservations, while similar studies from Germany<sup>27</sup> and Canada<sup>28</sup> suggest that eligible mothers significantly increase the number of hours they spend in paid employment.

Crucially, parental leave reforms can help shift gender norms. A study across nine European countries found that policies encouraging fathers to take leave increased the likelihood of women and men holding gender-equitable attitudes towards women working.<sup>29</sup> In Spain, paternity leave reforms led to more progressive gender norms among adolescents: those born after the reforms were more likely to find it appropriate for women with young children to work, and for fathers to work less than full-time.<sup>30</sup> And Australian fathers’ involvement in care work during childhood and adolescence played an important role in shaping children’s gender-equitable attitudes towards paid and unpaid work, being as relevant in shaping these attitudes as mother’s labour force participation.<sup>31</sup>

## **A continuum of care leave policies must exist across the life course**

Beyond parental leave, other forms of paid care leave policies that are important to consider include long-term leave to care for older persons and people with disabilities and chronic illness, as well as emergency, short-term leave for urgent care needs.<sup>32</sup>

Overall, while care leave policies primarily benefit formal sector workers, the evidence suggests that reforms can help to shift wider attitudes, behaviours and norms relating to women’s labour force participation and men’s involvement in caregiving.

# Holistic care policy package recommendations

## Implement a comprehensive set of laws and services addressing paid and unpaid care

While individual policies focused on paid or unpaid care work are important, policymakers should consider a more holistic approach to shifting norms around care work: implementing a comprehensive set of policies that target multiple aspects of paid and unpaid care work together.

Recent policy developments across different regions, discussed here, indicate a growing momentum for ambitious care policies that address a combination of paid and unpaid care work.

### South Africa

A number of care-focused policies have been implemented as part of South Africa's social protection programme, one of the largest on the African continent. For example, the Child Support Grant is a monthly cash transfer paid to the primary caregiver of children from low-income households, which provides financial assistance to help take care of children. Empirical evaluations suggest positive effects of the grant on reducing poverty, improving food security, and boosting school attendance and performance.<sup>33</sup> The Care Dependency Grant provides additional financial support for children with severe disabilities and in need of special care; the Disability Grant assists adults whose livelihood is severely limited due to ill health or disability; while the Old Persons Grant provides a substantial cash transfer to the over 60s that can be used to contribute to health and care costs.<sup>34</sup>

In addition, South Africa's Expanded Public Works Programme is one of the few public works schemes that invests in **social infrastructure**, including childcare and community-based care services (including for HIV-affected households). The programme creates employment in the care economy while helping to reduce unpaid care work largely done by women.<sup>35</sup> While significant gender gaps in unpaid care work remain,<sup>36</sup> a recent policy development shows promise: as part of its National Early Childhood Development Policy, South Africa is committing to providing universal early childhood care and education for children starting at age three. Implementation is expected in 2024.<sup>37</sup>

### Senegal

Since 2022, 13 municipalities in northern Senegal have begun integrating residents' holistic care needs into Local Development Plans. This entails collecting data on community care needs, such as childcare solutions and time-saving infrastructure and technology; mapping the community

care ecosystem; establishing how much time is spent on care in the community and by whom; and proposing action plans towards which resources can be allocated, investing in the infrastructure and services required to address local care needs. The participatory processes involved in the discussion of Local Development Plans ensure the increased visibility of care – and of those who do this work – while facilitated discussions on social norms and behaviour change encourage the redistribution of care.<sup>38</sup>

A national policy dialogue on local solutions to care was held in November 2022 – involving mayors, local officials, regional institutions and representatives from the Ministry of Family, Social Protection and Children – where opportunities were explored to scale up this approach to the national level. The Government of Senegal, with support from UN Women, is currently in the process of designing and implementing a national roadmap for reform related to care.<sup>39</sup>

## Bangladesh

The Ministry of Women and Children's Affairs is currently implementing a system of childcare centres, with the ambition to set up 8,000 centres in 16 districts across Bangladesh by 2025. These could serve up to 200,000 children and generate 40,000 skilled jobs. The plan follows the 2021 Child Daycare Centre Act, aimed at supporting professional and working women in Bangladesh through the provision of childcare services. Childcare centres are required by law to be registered and must maintain minimum quality and safety standards to keep their registered status, monitored through periodic inspection from government authorities. Under the new plan, specific attention is also given to care workers: requiring skills training and certification for caregivers, supervisors and managers; having a predetermined set of pay scales according to responsibilities; and including these workers as part of the government payroll system.<sup>40</sup>

## India

The National Creche Scheme for Working Mothers was launched in 2017, implemented by the Ministry of Women and Child Development. The core focus of the scheme is on increasing employment opportunities for women by providing support to mothers and their young children. The plan includes stipulations on minimum ratios of workers to children and operating hours that align with mothers' work schedules; guidelines on affordable user charges; training for childcare workers; cost norms for childcare workers' remuneration; and guidance on food and nutrition, growth monitoring, health check-ups and immunisation.<sup>41</sup> Following an independent evaluation of the scheme in 2020, the Ministry is introducing a revision of cost norms: increasing the recommended remuneration of childcare workers up from 3,000 to 5,000 rupees per month – demonstrating the increased value of these care workers to the economy and society.<sup>42</sup>

## Australia

In May 2023, the Australian Government released a draft National Care and Support Economy Strategy. Its focus on paid care and support services include childcare, elder care, veteran's care and care for people with disabilities. Funding high-quality care provision is a strategic decision by the Australian Government to relieve women from unpaid care work, drive economic prosperity through decent jobs for care workers and provide a better quality of life for Australians.

Key tenets of the strategy include ensuring that paid workers have the right skills and training to deliver quality care; that their pay and working conditions reflect the value of this quality care and support work; and that government investment in the paid care economy is effective and sustainable – as part of a wider commitment to funding social infrastructure that contributes to quality of life and well-being.<sup>43</sup>

### Invest in a national care system

The most ambitious and comprehensive policy reforms relating to care have been the creation of national care systems, spearheaded by governments in several South and Central American countries. These aim to implement a new social organisation of care, encouraging gender norm change so that caregiving responsibilities are valued and shared more equitably between the state and people of all genders in society.<sup>44</sup>

National care systems should:

- establish an integrated and **rights-based approach** to care policies
- promote values of **universality** and **co-responsibility**
- **provide care**, assistance and support for people who require it
- assure that those providing care have **quality jobs** with **decent working conditions**
- **professionalise care**, making available opportunities for training and certification.

Uruguay set up its National Integrated Care System, or *Sistema Nacional Integrado de Cuidados* (SNIC), in 2015, which established care as a fourth pillar of social protection alongside education, health and social security.<sup>45</sup> Grounded in a human rights-based approach, the system is enshrined in a law called the '**legal right to care and be cared for**'.<sup>46</sup> A core principle of the SNIC is the co-responsibility of the state, community, market and families – including men and women – to provide care.

The National Care Plan 2016–2020 that was approved to implement and coordinate care policies had three core dimensions:<sup>47</sup>

- the provision of care for children aged three and under
- the provision of care for elderly persons and those with disabilities
- the professionalisation of the paid care workforce through training and certification, to ensure high quality care provision.

The annual spending of services provided under the SNIC was US\$206 million in 2019, which represented 0.36% of GDP.<sup>48</sup> Official government statistics suggest that in the five-year period from 2015 to 2020, nearly 17,000 additional children under three attended public childcare; over 6,000 dependent adults received personal assistance from a professional carer; and close to 6,000 people completed training courses on early childhood care and education or caring for dependents.<sup>49</sup>

Uruguay's National Care Plan 2021–2025 emphasises reducing the significant gaps in access to care among the population, which tend to impact those facing intersecting vulnerabilities the most. The overall aim is to achieve universal care coverage for all people who need it, throughout the life cycle.<sup>50</sup>

The SNIC forms part of a broader commitment to care and gender equality in Uruguay. Complementary policies include extended maternity and paternity leave for new parents,<sup>51</sup> as well as care credits, which provide mothers with an additional year of pension contributions for each child they have. This compensates women for time spent outside of the labour force when caring for dependent children – recognising the value of care and its contribution to society.<sup>52</sup> Finally, the National Statistics Office has conducted nationwide time-use surveys to gather the data to quantify gender gaps in paid and unpaid work.<sup>53</sup> This underlines the critical importance of gender data in designing and implementing inclusive care policies and systems.<sup>54</sup>

Since the introduction of the national care system in Uruguay, similar care policies and systems have been developed in Argentina,<sup>55</sup> Costa Rica,<sup>56</sup> Panamá<sup>57</sup> and the district of Bogotá, Colombia,<sup>58</sup> among other South and Central American countries. And in 2017, Cabo Verde established its National Care Plan – the first example of a comprehensive, public care system in sub-Saharan Africa.<sup>59</sup>

# Global alliance recommendations

Policymakers should not underestimate the **importance of political will** and its potential to shift the wider discourse on care. For this reason, governments that wish to take a stance on shifting the narrative on care should consider joining forces – along with stakeholders from different sectors – to share ideas, learnings and best practices on the care economy and contribute to the global shifting of gender norms related to care.

## Join the Global Alliance for Care

The Global Alliance for Care is a global multi-stakeholder network composed of national and local governments, international and philanthropic organisations, civil society and private sector actors advocating for a feminist care agenda. Founded in 2021 by UN Women and the National Institute of Women (INMUJERES) Mexico, it has a membership of over 150 organisations.<sup>60</sup>

The Alliance promotes co-responsibility for care, equitable compensation and representation for caregivers, and protection of care recipients' rights; facilitates collective learning about care policies, actions and best practices; provides a space where diverse global actors working to advance the care agenda can connect with one other; and facilitates greater coordination for collective action.<sup>61</sup>

Governments committed to establishing inclusive care policies and systems are invited to join the Global Alliance for Care to work together in solidarity with actors striving for similar progressive shifts in gender norms around paid and unpaid care work.

## Actively participate in regional and international dialogues on care

Governments should join regional and global dialogues where gender equality and care are central to the agenda: making policy commitments and holding themselves accountable for their implementation.

As the following examples show, the number of regional and global dialogues where gender equality and care are central to the agenda is increasing.

### The XV Regional Conference on Women in Latin America and the Caribbean

Organised by the Economic Commission for Latin America and the Caribbean (ECLAC) and UN Women, this conference took place in November 2022 and resulted in the Buenos Aires Commitment. This agreement among regional states commits to prioritising inclusive care policies and systems that overcome harmful sexist roles, stereotypes and norms, based on the principles of equality, universality, and social and gender co-responsibility.<sup>62</sup>

## The Bali Care Economy Dialogue

This event, organised by the Asia Foundation and also held in November 2022, brought together actors from across Asia and the Pacific to discuss how to build resilient care ecosystems in the region.<sup>63</sup>

## The West African Symposium on Women's Economic Empowerment

This symposium took place for the first time in October 2022, involving key government stakeholders from across the region to discuss care strategies and policy solutions.<sup>64</sup>

## G20's Working Group on the Empowerment of Women

The 2023 G20 summit in New Delhi resulted in the historic creation of this working group. The group's mandate will include promoting investment in affordable care infrastructure to address the unequal distribution of paid and unpaid care work, and shifting norms, attitudes and behaviours that perpetuate gender inequality.<sup>65</sup> This builds upon the progress from the W20 (Women 20) summit that preceded it, where these issues – along with many others relating to gender equality – were raised.<sup>66</sup>

Policymakers participating in these forums improve coordination, collaboration and cooperation on the care economy, keep care high on the agenda in international and regional spaces, and work towards a shift in gender norms around paid and unpaid care work.

## Conclusion

Care work – whether paid or unpaid – is a social good that nurtures our societies and upholds our economies. Yet care work remains a deeply gendered phenomenon, contributing to gender inequalities in labour market outcomes for women. Governments serious about achieving gender equality and inclusive economic growth must meaningfully address gender norms through public policy to build caring societies.

Policymakers are encouraged to take these concrete steps, grounded in evidence, to address discriminatory gender norms relating to care. This will enable states to work towards a world where men, women and people of all genders are supported by comprehensive, public care systems, have the freedom to share caring responsibilities more equitably and have the opportunity to fulfil their economic potential.

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