





*The shaded areas of the map indicate ESCAP members and associate members.**

The Economic and Social Commission for Asia and the Pacific (ESCAP) is the most inclusive intergovernmental platform in the Asia-Pacific region. The Commission promotes cooperation among its 53 member States and 9 associate members in pursuit of solutions to sustainable development challenges. ESCAP is one of the five regional commissions of the United Nations.

The ESCAP secretariat supports inclusive, resilient and sustainable development in the region by generating action-oriented knowledge, and by providing technical assistance and capacity-building services in support of national development objectives, regional agreements and the implementation of the 2030 Agenda for Sustainable Development.

**The designations employed and the presentation of material on this map do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.*

How to Invest in the Care Economy: A Primer

Copyright © United Nations Economic and Social Commission for Asia and the Pacific 2022

All rights reserved

ST/ESCAP/3028

Reproduction of material in this publication for sale or other commercial purposes, including publicity and advertising, is prohibited without the written permission of the copyright holder. Applications for such permission, with a statement of purpose and extent of the reproduction, should be addressed to the Director, Social Development Division, United Nations Economic and Social Commission for Asia and the Pacific at escap-sdd@un.org.

Acknowledgements

This **Primer on How to Invest in the Care Economy** was prepared as part of the Development Account Project on Strengthening Social Protection for Pandemic Responses: Identifying the Vulnerable, Aiding Recovery and Building Resilience. It responds in particular to the stream on “strengthening a gender emphasis in designing policies to combat the COVID-19 pandemic, especially the care economy”.

The report was developed through collaboration between the United Nations Economic and Social Commission for Asia and the Pacific (ESCAP) and the Institute of Development Studies (IDS) in the United Kingdom, under the overall direction and guidance of Srinivas Tata, Director of the Social Development Division with ESCAP.

Cai Cai, Chief of Gender Equality and Social Inclusion Section with ESCAP, led the research team comprising Channe Lindstrøm Oguzhan, Social Affairs Officer and Jessica Henn, Consultant from ESCAP and Deepta Chopra, Professorial Research Fellow; Meenakshi Krishnan, Research Officer and Chung-Ah Baek, Research Officer, from IDS. The report was authored by Deepta Chopra and Meenakshi Krishnan.

Karen Emmons edited the report, and Daniel Feary designed the publication.

Notes

This publication serves as the first publication in '**A Policymaker's Toolkit for Valuing Unpaid Care and Domestic Work and Investing the Care Economy**' which serves to empower policymakers in driving effective policy implementation for valuing and investing in the care economy. It is followed by The Model Framework for Policy Action on the Care Economy Concept which provides a strategic roadmap for evidence-led, care-sensitive, and gender-transformative policies. For practical guidance on operationalizing the model framework, please consult '**Designing Policymaker Training to Address the Care Economy: A Facilitator's Manual**' and '**Valuing and Investing in the Care Economy: A Policymaker's Guide**', the third and fourth publications in the series respectively.



Please scan the QR code to access the other publications in this series and for accompanying materials

ESCAP REGION

ESCAP member States — Afghanistan, Armenia, Australia, Azerbaijan, Bangladesh, Bhutan, Brunei Darussalam, Cambodia, China, Democratic People's Republic of Korea, Fiji, Georgia, India, Indonesia, Islamic Republic of Iran, Japan, Kazakhstan, Kiribati, Kyrgyz Republic, Lao People's Democratic Republic, Malaysia, Maldives, Marshall Islands, Federated States of Micronesia, Mongolia, Myanmar, Nauru, Nepal, New Zealand, Pakistan, Palau, Papua New Guinea, Philippines, Republic of Korea, Russian Federation, Samoa, Singapore, Solomon Islands, Sri Lanka, Tajikistan, Thailand, Timor-Leste, Tonga, Türkiye, Turkmenistan, Tuvalu, Uzbekistan, Vanuatu and Viet Nam.

Associate members — American Samoa; Cook Islands; French Polynesia; Guam; Hong Kong, China; Macao, China; New Caledonia; Niue; and Northern Mariana Islands.

The United Nations bears no responsibility for the availability or functioning of URLs.

Mention of firm names and commercial products does not imply the endorsement of the United Nations.

Growth rates are on an annual basis, except otherwise indicated.

References to dollars (\$) are to United States dollars, unless otherwise stated.

Contents

Acknowledgements	ii
Introduction	vi
<hr/>	
Section 1: Sustainable Development Goals and the care agenda	1
<hr/>	
Section 2: Key concepts	3
<hr/>	
Section 3: Gendered dimensions of unpaid care work	8
<hr/>	
Section 4: How does unpaid care and domestic work impact women and economies?	10
<hr/>	
Section 5: Investing in the care economy	14
Conclusion	20
References	21

Boxes

Box 1	Targets for SDG 5 on achieving gender equality and empowerment of women and girls	2
Box 2	Promising practice on time-use data from Mexico	4
Box 3	Promising practice on care infrastructure from Cambodia	12
Box 4	Promising practices on care-related social protection from the Russian Federation	13
Box 5	Promising practices on employment-related care policies from the Republic of Korea	17
Box 6	Recommended policy measures under each care policy category	18

Figures

Figure 1	Top ten occupations with largest proportion of women's employment (percentage)	5
Figure 2	Care diamond	7
Figure 3	Time spent in unpaid care and domestic work in eight countries of East Asia, South-East Asia and the Pacific	9
Figure 4	Time spent in unpaid care and domestic work in eight countries of the North and Central Asia and the South and South-West Asia subregions	9
Figure 5	Conceptual framework for care-sensitive and gender-differentiated policies	15



© Lidya Permata Sari, First Winner Category I, Women and COVID-19 comic and illustration competition 2020, organized by UN Women, the Ministry of Women Empowerment and Child Protection and the World Health Organization, with support from the Government of Japan.

Introduction

This primer is designed to support policymakers and government officials in their efforts to achieve Sustainable Development Goal 5 on gender equality and empowerment of women in their countries. It lays out the basic concepts relating to what is called the “care economy” — the sum total of all paid and unpaid care work. It highlights the implications of a lopsided and gendered division of labour in unpaid care and domestic work. This strengthens the case for governments to invest in the care economy by addressing four care policy categories — care infrastructure, care-related social protection, care services and employment-related care. The primer includes the normative principles and levers of change that will help policymakers and practitioners to create a policy ecosystem that values care work and promotes women’s empowerment.

Section 1

Sustainable Development Goals and the care agenda



At the turn of the millennium, in September 2000, world leaders agreed on the United Nations Millennium Declaration, with the aim of ending extreme poverty. They adopted eight international development goals, called the Millennium Development Goals (MDGs), to be achieved by 2015. Among the eight was the goal on promoting gender equality and empowerment of women. By 2015, progress towards the MDGs had been uneven, with some targets being met while others were missed. As a result, a 2030 Agenda for Sustainable Development was adopted. It envisions a transformation of the world by prioritizing the development of people, the planet, peace and prosperity through global partnerships. The blueprint sets out 17 Sustainable Development Goals (SDGs) with 169 targets and specific indicators to be achieved by 2030 through national policies, regional collaboration, and global action.

SDG 5 articulates the goal to achieve gender equality and empower all women and girls. Box 1 refers to the various targets under this SDG aimed at ending violence and discrimination against women and girls in all forms everywhere while promoting their effective and equal participation in social, political and economic life.

SDG 5.4 pertains especially to the care agenda and underlines the importance of recognizing and valuing unpaid care and domestic work. This work is largely performed by women and girls the world over (ILO, 2018). SDG 5.4 calls for appropriate investments in care infrastructure, social protection systems and public services as a way of promoting shared responsibility for this essential work among the four pillars of society – the State, markets, households and communities. This requires a redistribution of existing patterns of care work, from women to men and from households to the State, markets and communities.

By laying out arguments on why investing in the care economy is crucial and in suggesting pathways and entry points for the next steps, this primer adds to the impetus for building back better and achieving the SDGs through a gender-equitable and greener recovery.

BOX 1 Targets for SDG 5 on achieving gender equality and empowerment of women and girls

- 5.1** End all forms of discrimination against all women and girls everywhere
- 5.2** Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation
- 5.3** Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation
- 5.4** 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 the family as nationally appropriate
- 5.5** Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life
- 5.6** Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences
 - 5.a** Undertake reforms to give women equal rights to economic resources, as well as access to ownership and control over land and other forms of property, financial services, inheritance and natural resources, in accordance with national laws
 - 5.b** Enhance the use of enabling technology, in particular information and communications technology, to promote the empowerment of women
 - 5.c** Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels

Source: Goal 5 | Department of Economic and Social Affairs.

Section 2

Key concepts



Economy

The economy is generally understood as the set of activities related to the production and consumption of goods and services, the allocation of scarce resources and the supply of money. An increased level of production and consumption of material goods and services is often equated with development.

Gross domestic product

Gross domestic product (GDP) is an economic indicator that is often used as a proxy for human welfare. It derives from the total value of goods and services produced in a country in a specified period. It is calculated by adding the value of total consumer spending, government spending, business spending and the value of net exports. Although considered an indicator of the health of the national economy, it is at best a crude measure of economic development. It has been criticized for excluding real and important work done by people at home, such as the care of children, sick persons, older persons or other dependants.

System of National Accounts

The United Nations System of National Accounts (SNA) was created with the broad objective of providing “a comprehensive conceptual and accounting framework for compiling and reporting macroeconomic statistics for analysing and evaluating the performance of an economy”.¹ It provides an internationally agreed standard on how to compile measures of economic activity and by corollary what is considered “non-economic or a personal activity”. While the SNA production boundary excluded the unpaid provision of services for own final use from the computation of the Gross Domestic Product, unpaid domestic and care work is considered productive in an economic sense in view of the third-party criterion. Indeed, it is possible to outsource the provision of care and domestic services to the market. To shed light on the

1 Systems of National Accounts.

contribution of this form of work to the economy, national statistical offices construct extended account of household production as complementary measure of GDP, though not with regular frequency.

BOX 2 Promising practice on time-use data from Mexico

In Mexico, the National Institute of Statistics and Geography launched a Household Satellite Account in 2011. The initiative provides information on the economic value of unpaid care work (own-use production work of services). In 2016, the Institute found that women worked 3.1 million hours per week in unpaid care work while men worked 2.6 million hours. Unpaid care work represents 65 per cent of women's total working time in Mexico, compared with only 24 per cent of men's working time. The total time spent on unpaid care work by men and women amounts to 23.2 per cent of the country's GDP, with care and support, such as childcare, representing the largest share. The results of the Household Satellite Account have informed public policy related to gender equality, care services and household expenditure and consumption.

Source: Ferrant and Thim, 2019.

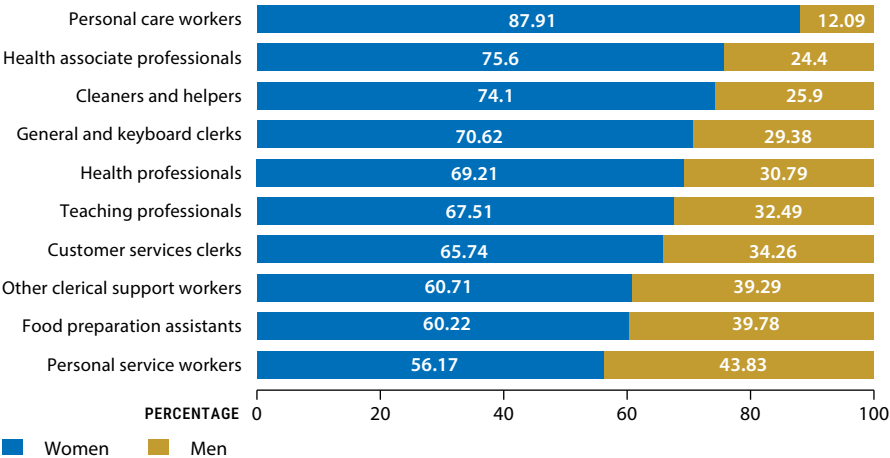
Paid work

In line with the definitions adopted by the SNA and the International Conference of Labour Statisticians, paid work is understood to include activities that are produced for the market and work done for corporations, quasi-corporations, non-profit organizations or government sectors. It also includes work done in households for primary production, non-primary production, construction or other services produced for an income (Charmes, 2019, p. 9).

Paid care work

With an increase in female labour force participation in the past few decades, there has been an increase in the demand for care to be met through the market. Paid care work refers to care jobs in such sectors as health, education, personal care of dependants and domestic work. Women tend to be overrepresented among care workers in a range of jobs, such as nurses, domestic workers, personal carers, teachers and childcare assistants. Figure 1 shows that the top-10 occupations where women tend to be concentrated are mostly in the care sectors. This indicates that the normative association between women and care results in their occupational segregation into care work even outside the home.

FIGURE 1 Top ten occupations with largest proportion of women's employment (percentage)



Source: Authors' depiction of ILOSTAT, 2020.

Unpaid work

Work that is performed without any direct remuneration or profit yet is for own-use production can be said to be unpaid. This can take several forms: subsistence work, such as the care and feeding of animals; processing of agricultural products for own consumption; work on family farms; collection of water, fuelwood and fodder; or household and domestic chores. Many countries endeavour to develop “satellite accounts” as a way of supplementing the main SNA to capture the range of this unpaid production of goods and services by households. However, most labour force surveys do not regard these activities as work (Charmes, 2019), resulting in an undercounting of women’s economic participation as well as a devaluation of these tasks, which are mostly unremunerated.

Unpaid care and domestic work

According to SDG 5.4.1, unpaid domestic and care work refers to services intended for the final use of household and/or family members living in other households. More specifically, unpaid domestic work refers to activities including food and meals management preparation, cleaning and maintaining of own dwelling and surroundings, do-it-yourself decoration, maintenance and repair of personal and household goods, care and maintenance of textiles and footwear, household management, care of livestock, shopping for own household and family members

and travel related to previous listed unpaid domestic services. Unpaid care work refers to activities related to childcare and instruction, care of the sick, elderly, or household and family members living with disability, and travel related to these unpaid caregiving services. While collection of water and fuel is not considered as either unpaid care or unpaid domestic work, this work is central to all the tasks that pertain to unpaid care and domestic work.

Care economy

Overall, the care economy refers to paid care work and unpaid care work provided by people as part of human survival, welfare and reproducing the labour force. Care is the cornerstone of all human development because it “contributes to meeting the material and/or developmental, emotional and spiritual needs of one or more other people” (Chopra and Sweetman, 2014, p. 409). It is a good thing. Yet, because it is pervasive and all encompassing, care also “goes largely unremarked and unquestioned” (ibid., p. 410).

The care economy includes both direct and indirect care. **Direct care** provisioning entails one-to-one relational tasks between the caregiver and the care receiver, such as breastfeeding a baby, helping a child with homework, tending to a bed-bound elderly person, or giving emotional support to someone diagnosed with a terminal illness. **Indirect care** does not entail person-to-person engagement but are nevertheless indispensable components of care provisioning. These include common domestic tasks—for example, cooking, cleaning, washing, shopping, household repairs and maintenance, the collection of water, firewood/fuel and animal fodder.

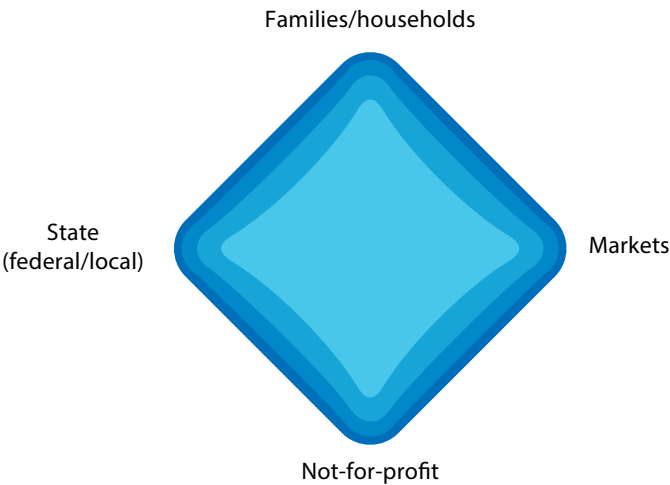
Caregivers and care receivers

Care work takes place in a relationship between the ‘caregiver’, one who provides care, and the ‘care receiver’, one who receives care – such as a father and a child or a doctor and a patient. However, the relationship isn’t mutually exclusive – many caregivers are also care receivers (e.g. a grandmother who cares for her grandchildren and also receives care from her adult children or a nurse). Furthermore, although women make up the majority of caregivers, caregiving is not gender specific.

Care diamond

The “care diamond” refers to the four main institutional actors or stakeholders in society among whom the care work of society can be distributed. These are – the State, markets, households and communities, as shown in figure 2. While in an ideal situation all four actors would be involved in care provision, typically women and girls within households perform the lion’s share of this care work. This unequal distribution of care responsibilities has gendered implications for women’s and girls’ rights and equality across income, livelihood, health, well-being, public participation and crisis resilience. Redistribution of care work across other stakeholders of the care diamond is needed for women’s and girls’ well-being and gender equity.

FIGURE 2 **Care diamond**



Source: Razavi, 2007, p. 21.

Section 3

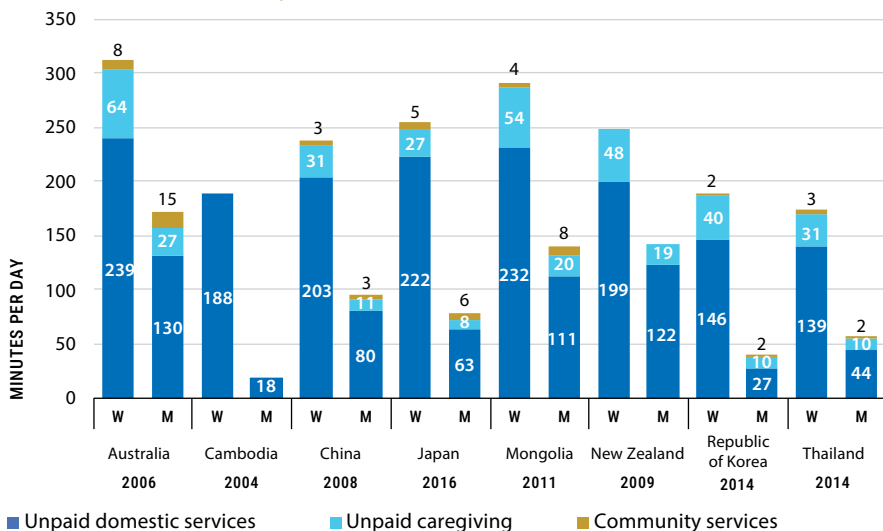
Gendered dimensions of unpaid care work



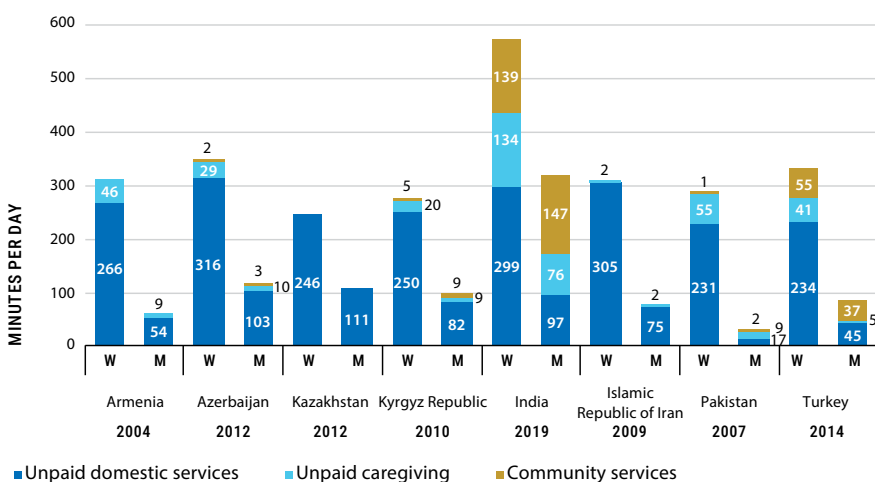
There is overwhelming consensus (and data) that most of the unpaid care and domestic work are performed by women the world over. In most countries of Asia and the Pacific (13 out of 15) with available relevant data, the amount of time that women spend on unpaid care and domestic work each day is two to five times longer than men (ESCAP, 2024). **Time-use surveys** are the most widely used metrics for capturing the nature and essence of paid and unpaid work performed by men and women. The time-use surveys show how individuals spend their time during the day or in a week and what the gendered division of labour is within households.

Figure 3 and figure 4 summarize the distribution of men's and women's time across unpaid domestic services, care-giving to household members and volunteer work in 14 countries in the Asia-Pacific region. These graphs vividly portray the picture of women's disproportionate contribution to care work in all countries. Women spend more time than men on unpaid care activities, with the gap varying from twofold to as high as tenfold more time in some countries. Regional variations also exist, with women in South and Central Asian countries spending a greater number of hours in unpaid care and domestic work than women in South-East Asia. This is referred to as the "intensity" of care jobs. In addition, care jobs are often arduous and hard, especially without basic amenities, such as water, electricity or energy-saving devices, such as washing machines or vacuum cleaners. Cleaning, looking after sick or older persons, washing clothes and cooking over wood-fired stoves can all take a toll on women's and girls' health.

Despite several methodological challenges in accounting for care work, inconsistencies in data collection and the huge cost of conducting such surveys (Charmes, 2021; Folbre, 2021), time-use data provide valuable insights into how unpaid care and domestic work are performed across countries. Time-use survey data can pinpoint important areas where policy interventions are needed, such as investments in small infrastructure like piped water or fuel sources or time- and energy-saving devices, especially in rural areas. These investments benefit women immensely by reducing the time and energy spent on domestic chores.

FIGURE 3 Time spent in unpaid care and domestic work in eight countries of East Asia, South-East Asia and the Pacific

Source: Authors' compilation from data tables in Charmes, 2019, pp. 28–31.

FIGURE 4 Time spent in unpaid care and domestic work in eight countries of the North and Central Asia and the South and South-West Asia subregions

Source: Authors' compilation from data tables in Charmes, 2019, pp. 28–31 and for India from NSO, 2019.

Section 4

How does unpaid care and domestic work impact women and economies?



SDG 5.4 reiterates the importance of recognizing and valuing unpaid care and domestic work and the promotion of shared responsibility within the household and the family as nationally appropriate. This target has been established in the face of acute discrimination and disadvantage that women and girls experience on account of their disproportionate care responsibilities. This section outlines how the disproportionate amount of time and energy spent by women on unpaid care and domestic work adversely affects their full participation in economic, political and social life.

Reduced labour force participation and income poverty

Studies from India have noted how marriage itself and its ensuing increase in domestic work represent a big barrier to women's labour force participation (Deshpande and Kabeer, 2019). This is exacerbated by the male breadwinner or female caregiver stereotypes prevalent in many societies, which limit women's participation outside the home.

Even when women have been able to enter the paid labour market, they face multiple challenges in the form of the "motherhood employment penalty", the "motherhood wage penalty" and the "motherhood leadership penalty" (ILO, 2019). This adversely affects women from either joining the workforce or from continuing in the workforce after motherhood.

Research in India and Nepal found that childcare, especially for mothers with children younger than 5 years, represents a significant impediment to the way women are able to participate in paid work, specifically determining the hours, location and type of paid work that women can engage in (Chopra and others, 2020). Azcona and others (2020) corroborated these findings, showing that many subregions of Asia and the Pacific have a wide discrepancy between men's and women's labour force participation in households with children younger than 6 years. Not only is there more childcare to be done but there is also an increase in the intensity of domestic work with each additional child. This can explain the sharp drop in the workforce participation of women in households with three or more children.

Greater representation in the informal economy

Informality is a prevalent characteristic of labour markets. The ILO estimates that more than half of the global workforce and as many as 90 per cent of workers in micro and small enterprises are in the informal economy.¹ And 1.3 billion of the world's 2 billion informal workers live in the Asia-Pacific region (ILO, 2020). The informal economy includes workers in micro and small enterprises, in home-based work, in self-employment and in seasonal, migrant or agricultural work, all of which are not regulated by formal contracts, labour legislation and required conditions of work. Studies have also noted the contradictory role of the State in promoting informal employment through the use of employees as project consultants, as temporary workers, as outsourced or contractual workers and sometimes even as "volunteers", especially among care services, such as community nurses and health care workers (Remesh, 2017; Yun, 2018).

Women in Asia and the Pacific are overrepresented in informal and vulnerable work as care providers, health care workers and small entrepreneurs. This can often mean working in ad hoc and insecure jobs, in hazardous industries and in low-paid jobs with adverse and dangerous working conditions. Around 64 per cent of women workers are in informal employment, according to United Nations estimates (ESCAP and UN Women, 2020, p. 22). Women often "choose" informal work because of the flexibility of time and workplace that such jobs afford, typically allowing women to undertake paid work while fulfilling unpaid care work responsibilities, such as collection of water, fodder and fuelwood (Chopra and Zambelli, 2017).

Informal employment also means women do not benefit from social protection programmes and social insurance benefits. This has cascading effects later in life, when older women tend to have less income and social protection support than men but tend to live longer than men.

Time poverty and depletion

The intensity and arduousness of care tasks directly correlate with the extent and scope of public service provisions. For example, research in South Asia emphasizes that although men engage in some household work and childcare, their participation is sporadic, while women are always working, either on domestic or paid tasks alongside supervisory childcare (Zaidi and Chigateri, 2017). This time poverty leads to emotional and physical stress and depletion because women feel they are never able to complete their chores adequately or catch uninterrupted sleep or get any rest (Chopra and Zambelli, 2017).

1 "Informal economy", Decent Work for Sustainable Development Resource Platform.

The absence of infrastructure, especially piped water, electricity or fuel sources, food services, good roads and safe transport, significantly increases women's time in water collection (Chakraborty, 2008) and other household tasks. This is likely to affect women in rural areas and disabled and older women much more acutely (ESCAP and UN Women, 2020).

BOX 3**Promising practice on care infrastructure from Cambodia**

In line with the National Strategic Development Plan and the Cambodia Sustainable Development Goal targets, the Ministry of Rural Development has made important progress in rehabilitating rural roads at the provincial, district, commune and village levels. Improvements in rural road infrastructure have made travel easier for everyone. Women have better access to health centres, schools, markets and employment opportunities, thereby contributing to overall poverty-reduction efforts in rural areas. The percentage of rural population with access to improved water supply increased from 44.2 per cent in 2013 to 53 per cent in 2015 to 58.3 per cent in 2017, while 70.9 per cent had access to improved sanitation in 2017, up from 37.5 per cent in 2013. Additionally, for many rural women, switching to biogas has not only saved them money but has freed them from collecting firewood. Doing domestic chores is much faster, enabling women to have more free time for income-generating activities and participating in community activities.

Source: National Review Report on 25th Anniversary of Beijing Platform for Action (2019). Available at www.asiapacificgender.org/country-reviews.

Intensification of care work during crises

Withdrawal of public services or cuts in welfare spending often result in an intensification of domestic chores in households. The COVID-19 pandemic is a topical illustration of the additional pressure and strain on women as a result of difficulty in accessing food, water, health and educational services (UN Women, 2020a).

Rapid gender assessments after onset of the pandemic found that time spent by women on cooking, cleaning and household tasks had increased considerably, even as men made more contribution within the home due to the lockdowns. And 27 per cent of women, compared with 14 per cent of men, reported time increases in three or more domestic activities under lockdown. The demands of childcare increased dramatically due to school closures. And female single parents in many countries faced acute stress in trying to combine paid work with unpaid work and childcare (UN Women, 2020b).

Adverse effects on physical and mental health

While some attention has been given to women's sexual and reproductive health care services (ESCAP and UN Women, 2020), the depletion of physical and mental well-being caused by a disproportionate share of unpaid care responsibilities is less widely captured and addressed. Balancing arduous paid work (especially in the informal sector) with unpaid care work can be a source of mental and emotional stress in addition to the physical burden that long hours and the back-breaking workload puts on women (Chopra and others, 2020). Inadequate rest and sleep, no time for leisure and arduous effort expended in household tasks in the absence of access to infrastructure all add to the length of the workday for women and deplete their physical and mental well-being. Absence of accessible and affordable childcare services increases the responsibility of both direct and supervisory childcare that often falls to women. This is more acute in areas where men have migrated out to find work.

With more women entering the paid labour force, the time available for doing unpaid care work is either squeezed or results in the intergenerational transfer of care to mothers, sisters, daughters and grandmothers. The existence of global care chains, with care workers migrating from countries in the global South to countries in the global North, point to care deficits, or a "crisis of care". The next section recommends actions for policymakers and governments to address this growing concern.

BOX 4 Promising practices on care-related social protection from the Russian Federation

To respond to the challenges created by the COVID-19 pandemic, the Government of the Russian Federation initiated important measures to enhance childcare support:

- Increased allowances to mothers covered by the Maternity Capital Grant and expanded beneficiaries, affecting 27 million children.
- Provided childcare allowances for children younger than 18 months and first-born children.
- Provided a one-off cash transfer to families with children younger than 17 years, irrespective of family income.
- Provided cash support for each child younger than 18 years to parents who became unemployed due to the pandemic.

Source: ESCAP, 2021, p. 65.

Section 5

Investing in the care economy



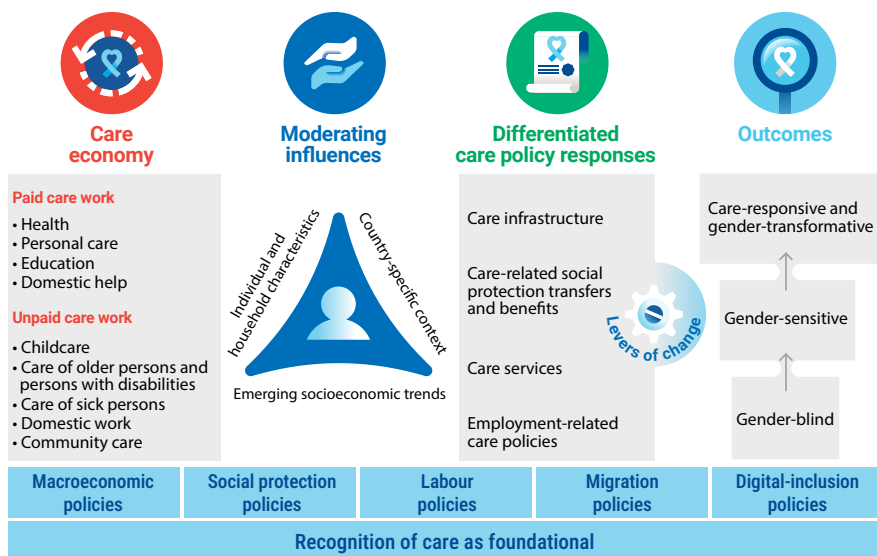
There is a critical need to recognize and value women's time and labour spent in care work, especially its unremunerated aspects. Investing in the care economy requires a series of efforts at multiple levels with policies and programmes that reduce, redistribute and adequately reward care work. The policy recommendations in this section aim to help member States achieve SDG 5.4 as part of the 2030 Agenda.

The Triple R framework (Elson, 2008) has been proposed as one pathway to address the issue of unpaid care. The three Rs it outlines are: recognize, reduce the drudgery and time spent, and redistribute care work from women to men or from households to other pillars of the care diamond. More recently, a high road to care, or the 5R framework, was expanded upon by the International Labour Organization, adding elements of just "rewards" for care workers as well as adequate "representation" and voice in decision-making (ILO, 2018).

The conceptual framework shown in figure 5 allows a comprehensive approach to achieve care-sensitive and gender-transformative outcomes. It begins with recognizing care as foundational, positive and the centre of all human life and activity. This is the core normative principle that must guide policy actions. Feminist ethics of care emphasize the interdependence and relationality of all human beings. Acknowledging this interdependence enables us to develop more caring communities, more caring economies, more caring States and more caring democracies (Care Collective, 2020; Tronto, 2013; Women's Budget Group, 2020).

In addition to a normative commitment to value care work, a framework of rights and legislative obligations is necessary to create a supportive institutional context within which care policies can be designed and adopted. The SDGs provide an international framework for member States to pursue sustainable and inclusive growth. States must be the guarantor of rights and take a strong regulatory role in the provision of market services by protecting the interests of all stakeholders. Redistributive policies have the potential to address the gender-differentiated care needs of women as well as challenge the patriarchal status quo simultaneously. This calls for a shift in mindset, from seeing women as beneficiaries of welfare expenditures to appreciating their role as significant contributors to long-term human welfare.

FIGURE 5 Conceptual framework for care-sensitive and gender-differentiated policies



Source: Adapted from ESCAP, 2021, p. 14.

Care policies measures

Figure 5 illustrates four main care policy categories or areas under which adopting measures can make a material difference to the lives and care responsibilities of women:

- Care infrastructure** — water, sanitation, energy, transport, food services and health care infrastructure for persons who are sick (HIV patients, COVID-19 patients) or living with a disability and pregnant women.
- Care-related social protection** — cash transfers, cash-for-care, vouchers, tax benefits and non-contributory pension schemes.
- Care services** — childcare, older person care and care provisions for persons with a disability or illness through the State or the market.
- Employment-related care** — leave policies, family-friendly working arrangements, flexitime, career breaks, sabbaticals, severance pay and employer-funded or contributory social protection schemes, such as maternity and parental leave benefits.

Technical recommendations on specific policy measures that can be adapted to national contexts for each care policy category are given in box 6. The extent to which policy measures are both **care-sensitive** and **gender-differentiated** will determine whether member States are able to transform the status quo. Care-sensitive measures are defined as those that explicitly address the care needs of dependant and vulnerable people, while gender-differentiated measures are those that explicitly identify and respond to women's care needs by targeting women as beneficiaries of these measures. Measures that are care-sensitive as well as gender-differentiated can be said to create *care-responsive and gender-transformative outcomes*.

The quality, accessibility, affordability, universality and intention to prioritize care must be central when designing and implementing these policies. To ensure the successful implementation of the proposed care policy measures, the following factors must also be made available by governments:

- A **Finance and gender-responsive budgeting** — These are essential to ensure that adequate institutional capacity is created to meet the differentiated care needs of women. Despite tightening fiscal space due to the pandemic, investment in the care economy represents a robust avenue for potential recovery. Investments in care sectors, such as education, health and childcare, have been shown to have higher potential to generate employment and returns than traditional infrastructure investments (De Henau and Himmelweit, 2021; Ilkcaracan and others, 2015). Creating gender and development budgets within each government agency and line ministry could be a way to encourage all agencies, and not just the women's machineries, to advocate for change.
- B **Care and gender-disaggregated data** — Evidence for policymaking is an important first step. This requires data on the nature, time, type and extent of unpaid care and domestic activities performed by different household members. Although time-use surveys are regarded as the most comprehensive in explicating the gendered patterns of men's and women's paid and unpaid work, they are also time-, energy- and cost-intensive. Piggybacking on existing household and labour force surveys can be an alternative source of data collection. However, an explicit intent of capturing unpaid care statistics is imperative.
- C **A whole-of-government and whole-of-society collaborative approach** are requisite for any movement forward. Interministerial collaboration with sectoral ministries and the ministry of finance and planning alongside the women's ministry could represent a way forward. Media campaigns that challenge entrenched cultural norms can create the necessary momentum for change. These will help bring about mindset shifts by encouraging the value and redistribution of unpaid care work from women to men and from families to other stakeholders in society.

Investing in the care economy requires a multipronged approach and efforts from multiple stakeholders. Policy solutions must be accompanied by a shift in mindsets and institutional legacies. Most fundamentally, the value of care to human societies and to the planet must be recognized.

BOX 5 Promising practices on employment-related care policies from the Republic of Korea

After onset of the COVID-19 pandemic, the Ministry of Employment and Labour announced that employees with children could reduce their working hours to take care of their children due to the postponement of the new school term. Parent employees also received up to five days of leave along with childcare support. This measure was limited to households who were not receiving paid family emergency leave from their workplace.

The Government also announced Comprehensive Measures for Public Welfare and Economy to Minimize the Impact of COVID-19 and Early Overcoming, in February 2020. The programme targeted workers with children younger than 8 years who need family care due to the absence of day-care centres. Family care expenses were provided, at 50,000 Korean won per person per day, along with temporary support for up to ten days.

Source: ESCAP, 2021, p. 62.

BOX 6

Recommended policy measures under each care policy category



Care infrastructure

- Provide piped water, especially to rural areas.
- Provide hygienic sanitation facilities, with a focus on the menstrual health and hygiene of women and girls.
- Encourage clean sources of fuel and energy for cooking and other domestic purposes.
- Create affordable access to kitchen and other home appliances and technologies that reduce the time and energy spent on domestic chores.
- Ensure safe, reliable and affordable transport options for women and girls.
- Expand social care infrastructure, such as schools, hospitals, care homes and housing for underserved communities and vulnerable populations, including older and abandoned persons.



Care-related social protection

- Expand social assistance programmes, such as unconditional cash transfers, to support the care responsibilities in low-income households, especially childcare and care of sick or older persons.
- Encourage non-contributory social insurance schemes for vulnerable women and women employed in the large informal sector.
- Avoid combining conditionalities that reinforce pre-existing gender inequalities and burden women more when designing social welfare schemes, such as public works programmes, subsidies, vouchers or school meals.
- Connect social protection programmes to labour market activation and skill-building opportunities.



Employment-related care policies

- Mandate gender-equitable care leave to meet a variety of care needs, such as the care of young children; sick, older or terminally ill family members; or dependants with a disability.
- Introduce shared parental leave policies for early childcare.
- Offer creche facilities for workers with young children, either onsite in workplaces or near workers' homes as appropriate.
- Create flexible working policies and family-friendly work arrangements that allow workers to combine paid work with caring responsibilities.
- Ensure that employers offer adequate paid sick leave and health insurance coverage.
- Encourage formal contracts and decent work conditions for women migrant and informal sector workers.



Care services

- Fund universal, public childcare centres for children younger than 6 years that are easily accessible and affordable.
- Offer institutional care to vulnerable groups, such as persons who are disabled, abandoned, orphaned or terminally sick.
- Create integrated personal care arrangements for the care of older persons.
- Ensure universal health coverage and public health care services for economically disadvantaged persons.
- Ensure decent work conditions for domestic and paid care workers, especially migrants.



Conclusion

Care is a cross-cutting issue across several SDGs. Even though women are disproportionately impacted by care work, care is not an issue limited to women's interests only. As debated and demonstrated by decades of scholarship, care is an issue of interest to women, men, children, older persons, sick persons, persons with disabilities, governments and economies. The ongoing pandemic has provided ample proof of the universality and centrality of care. The actions and choices of governments in the face of this crisis will determine the course of the rest of history.

The 2030 Agenda must remain a guiding post for member States to close persisting gaps in development and reduce poverty and inequalities. This will need a recognition of multiple intersecting inequalities and axes of vulnerability on which women particularly sit. Recognizing and valuing unpaid care and domestic work and promoting shared responsibility is the lever needed to transform gender relations and in effect transform the world.

Investments in the care economy can yield not only progress towards gender equality and women's empowerment but also create inclusive growth and human development by addressing the interlinked issues of poverty, health, education, decent work and gender equality.

References

- Azcona, Ginette, and others (2020). *The Impact of Marriage and Children on Labour Market Participation: Spotlight on Goal 8*. Spotlight on the SDGs 3, Vol. 3. UN Women and ILO. Available at <https://doi.org/10.18356/88f157a4-en>.
- Benería, Lourdes (2003). *Gender, Development, and Globalization: Economics as If All People Mattered*. New York: Routledge.
- Care Collective (2020). COVID-19 pandemic: A crisis of care. *Care Ethics Research Consortium* (blog), 28 March. Available at <https://care857567951.wordpress.com/2020/03/28/covid-19-pandemic-a-crisis-of-care/>.
- Chakraborty, Lekha S. (2008). *Deficient Public Infrastructure and Private Costs: Evidence from a Time-Use Survey for the Water Sector in India*. Working Paper 536. The Levy Economics Institute. Available at <http://www.ssrn.com/abstract=1156900>.
- Charmes, Jacques (2019). *The Unpaid Care Work and the Labour Market. An Analysis of Time-Use Data Based on the Latest World Compilation of Time-Use Surveys*. Geneva: International Labour Organization. Available at https://www.ilo.org/wcmsp5/groups/public/---dgreports/---gender/documents/publication/wcms_732791.pdf.
- _____ (2021). *Measuring Time Use: An Assessment of Issues and Challenges in Conducting Time-Use Surveys with Special Emphasis on Developing Countries: Methodological Inconsistencies, Harmonization Strategies and Revised Designs* Mexico City: UN Women.
- Chopra, Deepta, and others (2020). *Are Women Not 'Working'? Interactions between Childcare and Women's Economic Engagement*. IDS Working Paper 533. Brighton, UK: Institute of Development Studies. Available at https://opendocs.ids.ac.uk/opendocs/bitstream/handle/20.500.12413/14976/Wp533_Online.pdf?sequence=1&isAllowed=y.
- Chopra, Deepta, and Caroline Sweetman (2014). Introduction to gender, development and care. *Gender and Development*, vol. 22, No. 3, pp. 409–421. Available at <https://doi.org/10.1080/13552074.2014.975486>.
- Chopra, Deepta, and Elena Zambelli (2017). *No Time to Rest: Women's Lived Experiences of Balancing Paid Work and Unpaid Care Work*. Global Synthesis Report for Women's Economic Empowerment Policy and Programming. Brighton: IDS.
- de Henau, Jérôme, and Susan Himmelweit (2021). A care-led recovery from Covid-19: investing in high-quality care to stimulate and rebalance the economy. *Feminist Economics*, March, pp. 1–17. Available at <https://doi.org/10.1080/13545701.2020.1845390>.
- Deshpande, Ashwini, and Naila Kabeer (2019). *(In)Visibility, Care and Cultural Barriers: The Size and Shape of Women's Work in India*. Discussion Paper Series in Economics. New Delhi: Ashoka University. Available at <https://www.ashoka.edu.in/ecodp>.
- Elson, Diane (2008). The three r's of unpaid work: Recognition, reduction and redistribution. In *Expert Group Meeting on Unpaid Work, Economic Development and Human Well-Being*. New York: UNDP.
- ESCAP (2021). *COVID-19 and the Unpaid Care Economy in Asia and the Pacific*. ST/ESCAP/2967. Bangkok, Thailand: United Nations Economic and Social Commission for Asia and the Pacific. Available at https://www.unescap.org/sites/default/d8files/knowledge-products/2021_Regional_Report_Covid19-Care-Economy.pdf.
- ESCAP (2024). *Charting New Paths for Gender Equality and Empowerment: Asia-Pacific Regional Report on Beijing+30 Review*. Bangkok, Thailand: United Nations Economic and Social Commission for Asia and the Pacific.
- ESCAP, and UN Women (2020). *The Long Road to Equality: Taking Stock of the Situation of Women and Girls in Asia and the Pacific for Beijing+25*. Bangkok: United Nations, Economic and Social Commission for Asia and the Pacific and UN Women Regional Office for Asia and the Pacific. Available at https://www.unescap.org/sites/default/d8files/knowledge-products/Beijing%2B25_report%E2%80%9393low_res.pdf.

Ferrant, Gaelle, and Annelise Thim (2019). *Measuring Women's Economic Empowerment: Time Use Data and Gender Inequality*. No. 16. OECD Development Policy Papers. Paris: OECD.

Folbre, Nancy (2021). *Quantifying Care: Design and Harmonization Issues in Time-Use Surveys*. Mexico City: UN Women.

Ilkcaracan, Ipek, Tolga Kaya, and Kijong Kim (2015). *The Impact of Public Investment in Social Care Services on Employment, Gender Equality and Poverty: The Turkish Case*. Istanbul Technical University Women's Studies Center and The Levy Economics Institute. Available at https://www.kaum.itu.edu.tr/en/wp-content/uploads/2015/09/ITU.Levy__PrefaceandSummary.pdf.

ILO (2018). *Care Work and Care Jobs for the Future of Decent Work*. Geneva: International Labour Organization. Available at https://www.ilo.org/global/publications/books/WCMS_633135/lang--en/index.htm.

_____ (2019). *A Quantum Leap for Gender Equality: For a Better Future of Work for All*. Geneva: International Labour Organization. Available at https://www.ilo.org/global/publications/books/WCMS_674831/lang--en/index.htm.

_____ (2020). *Asia-Pacific Employment and Social Outlook: Navigating the Crisis towards a Human-Centred Future of Work*. Thailand: International Labour Organisation. Available at https://www.ilo.org/wcmsp5/groups/public/@asia/@ro-bangkok/@sro-bangkok/documents/publication/wcms_764084.pdf

Razavi, Shahra (2007). *The Political and Social Economy of Care in a Development Context: Conceptual Issues, Research Questions and Policy Options*. Gender and Development Programme Paper 3. Geneva: UNRISD.

Remesh, Babu, P. (2017). Informal work in the formal sector: Conceptualizing the changing role of the state in India. In *Critical Perspectives on Work and Employment in Globalizing India*, Ernesto Noronha and Premilla D'Cruz, eds. pp. 83–94. Singapore: Springer. Available at https://doi.org/10.1007/978-981-10-3491-6_5.

Tronto, Joan, C. (2013). *Caring Democracy: Markets, Equality, and Justice*. New York: NYU Press.

UN Women (2020a). *The First 100 Days of Covid-19 in Asia and the Pacific: A Gender Lens*. Bangkok: UN Women Regional Office for Asia and the Pacific. Available at https://asiapacific.unwomen.org/-/media/field%20office%20eseasia/docs/publications/2020/04/ap_first_100-days_covid-19-r02.pdf?la=en&vs=3400.

_____ (2020b). *Unlocking the Lockdown: The Gendered Effects of Covid-19 on Achieving the SDGs in Asia and the Pacific*. UN Women. Available at https://data.unwomen.org/sites/default/files/documents/COVID19/Unlocking_the_lockdown_UNWomen_2020.pdf.

Women's Budget Group (2020). *Creating a Caring Economy: A Call to Action*. Report by Commission on a Gender-Equal Economy. UK: Women's Budget group. Available at <https://wbg.org.uk/wp-content/uploads/2020/09/CGEE-Creating-a-Caring-Economy-A-Call-to-Action-WBG.pdf>.

Yun, Aelim (2018). *The State Made Informalisation of Women Workers: A Case Study into Care Work in South Korea*. Oxford Human Rights Hub. Available at <https://ohrh.law.ox.ac.uk/the-state-made-informalisation-of-women-workers-a-case-study-into-care-workers-in-south-korea-2018-u-of-oxhrh-j-46/>.

Zaidi, Mubashira, and Shraddha Chigateri (2017). *"My Work Never Ends": Women Balancing Paid Work and Unpaid Care Work in India*. National report for Women's Economic Empowerment Policy and Programming. New Delhi: Institute of Social Studies Trust.

