

WOMEN'S ECONOMIC EMPOWERMENT AND THE CARE ECONOMY

A SCOPING STUDY OF THE LITERATURE

Prepared by IDRC

This document presents an annotated bibliography of some of the recent literature on the care economy, as it is relevant to question of on women's economic empowerment and growth.¹ This is motivated by questions whether the literature on economic empowerment, labour market participation and female entrepreneurship take sufficient account of recent research on the care economy, i.e. of the role of women in child, elderly and sick care, and policies that support care givers.

There is a fair amount of literature on the care economy across the globe, but our list indicates that Africa is relatively underserved, and Latin America better covered. The papers do cover countries with different income levels, which suggest that the care-labour market balance shifts, but policy issues remain pertinent as countries move up the income ladder. Papers also suggest the importance of distinguishing different types of care, notably related to elderly and children. The literature also shows how the care economy is conceptualised in the different literatures, of sociology, social policy, feminist scholarship, and in quantitative studies.

This document has two sections, for ease of the reader. The first section lists publications and papers on women's economic empowerment and the care economy.² The second section provides summaries of these essays and reports, with embedded links to where each of these articles can be read or found.

Section 1: Care Economy Publications and Papers

1. Abe, Aya (2010). "The Changing Shape of Care Diamond: The Case of Child and Elderly Care in Japan." *Gender and Development Program Paper No. 9*, Geneva: UNRISD.

¹ It was prepared by Alanna Karpa at IDRC, with support of the IDRC team Supporting Inclusive Growth, and prepared in preparation of the new DFID-IDRC- Hewlett research initiative Grow and Economic Opportunities for Women (GROW).

² The list includes the literature used in preparation for the GROW initiative as well as select and major publications on the topic which includes papers from the UNRISD research program as well as key outputs of an earlier IDRC program Women's Rights and Citizenship.

2. Bedford, Kate (2010). "Harmonizing Global Care Policy? Care and the Commission on the Status of Women," *Gender and Development Program Paper No. 7*, Geneva: UNRISD.
3. Budlender, Debbie and Francie Lund (2011). "South Africa: A legacy of family disruption," *Development and Change*, 42(4): 925-946.
4. Budlender, Debbie and Ruth Meena (2009). "Care Provision in a Low Income Country: A Case Study of Tanzania," *Unpublished Report*, Geneva: UNRISD.
5. Budlender, D. (2008). "The Statistical Evidence on Care and Non-care Work Across Six Countries," *Gender and Development Program Paper No. 4*, Geneva: UNRISD.
6. Budlender, Debbie (2007). "A Critical Review of Selected Time Use Surveys," *Gender and Development Program Paper No. 2*, Geneva: UNRISD.
7. Cook and Dong, (2011). "Harsh Choices: Chinese Women's Paid Work and Unpaid Care Responsibilities under Economic Reform." *Development and Change*, 42(4): 947-966.
8. Dong, Xiao-Yuan (2011). "Chinese Women's Paid Work and Unpaid Care responsibilities during Economic Transition." *An UNRISD Seminar*. United Nations Research Institute for Social Development.
9. Faur, Eleanor (2011). "Widening the Gap? Competing Welfare Logics and the Social Organization of Childcare in Argentina," *Development and Change*, 42(4): 967-994.
10. Filgueira, Fernando, Magdalena Gutierrez and Jorge Papadópulos (2011). "A perfect storm? Welfare, Care, Gender and Generations in Uruguay: a Cautionary Tale for Middle Income Countries." *Development and Change*, 42(4): 1023-1048.
11. Filgueira, Fernando, Magdalena Gutierrez and Jorge Papadópulos (2009). "The coming of age of a mature welfare regime and the challenge of care: Labour market transformations, second demographic transition and the future of social protection in Uruguay," *Unpublished Paper*, Geneva: UNRISD.
12. Folbre, Nancy (2012). "The Care Economy in Africa: Subsistence Production and Unpaid Care," Paper for the AERC Biannual Research Workshop, 2-6 December.
13. Folbre, Nancy (2009) *Greed, Lust & Gender. A History of Economic Ideas*, Oxford University Press.
14. Folbre, N. (1994). "Who Takes Care of the Kids? Gender and the structures of constraint," Routledge: London and New York.
15. International Labor Organization (2012). "Global Employment Trends for Women 2012," Geneva: ILO.
16. Martínez Franzoni, Juliana, Carmen Largaespada-Fredersdorff, Karim Ulloa and Loen Voorend (2010). "The Political and Social Economy of Care in Nicaragua: Familialism of Care under an Exclusionary Social Policy Regime," *Gender and Development Program Paper No. 8*, Geneva: UNRISD.

17. Martínez Franzoni, Juliana and Koen Voorend (2011). "Who cares in Nicaragua? A Care Regime in an Exclusionary Social Policy Context," *Development and Change*, 42(4): 995-1022.
18. Palriwala, Rajni and Neetha N. "Stratified Familialism: The Care Regime in India through the Lens of Childcare," *Development and Change*, 42(4): 1049-1078.
19. Patel, Leila (2009). "Thematic Paper: the Gendered Character of Social Care in the Non-Profit Sector in South Africa," *Paper for United Nations Research Institute for Social Development*," University of Johannesburg.
20. , Ito (2011). "The Good, the Bad, and the Confusing: The Political Economy of Social Care Expansion in South Korea," *Development and Change*, 42(4): 905-923.
21. Peng, Ito (2009). "The Political and Social Economy of Care in the Republic of Korea," *Gender and Development Program Paper No. 6*, Geneva: UNRISD.
22. Razavi, Shahra (2012). "Rethinking Care in a Development Context: An Introduction," *Development and Change*, 42(4): 873-903.
23. Razavi, Shahra and Silke Staab (2012). "Introduction: Care Workers in the Global Economy: Worlds Apart?" *Global Variations in the Political and Social Economy of Care*, Routledge: UNRISD.
24. Razavi, Shahra (2007). "The Political and Social Economy of Care in a Development Context; Conceptual Issues, Research Questions and Policy Options," *Gender and Development Program Paper No. 3*, Geneva: UNRISD.
25. Staab, Silke and Roberto Gerhard (2010). "Childcare Service Expansion in Chile and Mexico: For Women or Children or Both?" *Gender and Development Program Paper No. 10*, Geneva: UNRISD.
26. UNRISD (2010). "Why Care Matters for Social Development," *Research and Policy Brief 9*, Geneva: UNRISD.
27. Urdang, Staphanie (2006). "The Care Economy: Gender and the Silent AIDS Crisis in Southern Africa," *Journal of Southern African Studies*, 32 (1): 165-177.
28. Wekwete, Naomi N (2012). "Gender and Economic Empowerment in Africa: Evidence and Policy Issues," Paper for the AERC Biannual Research Workshop, 2-6 December.
29. Williams, Anne "Federating HIV/AIDS Home-Based Caregivers in Kenya and Uganda," 1-26. Written with support from: GROOTS Kenya, the Uganda Community Based Association for Child Welfare, and GROOTS International.
30. Williams, Fiona (2010). "Claiming and Framing in the Making of Care Policies: the Recognition and Redistribution of Care," *Gender and Development Program Paper No. 13*, Geneva: UNRISD.

31. World Bank (2011). "Gender Equality and Development," *World Development Report 2012*, Washington D.C.: International Bank for Reconstruction and Development and The World Bank.

Section 2: Abstracts and Links to Publications and Papers

1. **Abe, Aya (2010). "The Changing Shape of Care Diamond: The Case of Child and Elderly Care in Japan." *Gender and Development Program Paper No. 9*, Geneva: UNRISD.**

The paper describes the enormity of the elderly care problem in Japan and examines the government's role in providing care, and to a limited degree, the market's role before and after the introduction of Long-Term Care Insurance (LTCI). It also looks at changing patterns in state provision of childcare. The paper expands on the idea of the "care diamond" introduced by Razavi and applies it to elderly and childcare in Japan in order to compare the two.

Both for elderly care and childcare, gender inequalities in care provision are still strong. The bulk of care is provided by women in the immediate family, either wife, daughter or step-daughter in the case of elderly care, and mother, in case of childcare. A combination of cultural and socioeconomic reasons keeps the gender bias in place. One is the weak representation in and influence on the policy-making process by women's and other social movements. Another is the fact that the value of women's time in the labour market is quite low compared to that of men. A growing proportion of the female labour force is composed of non-permanent workers whose wages are much lower than those of permanent workers. This is reinforced by care policies that leave women with no alternative but to interrupt their careers in their 20s and 30s in order to take care of their children. Conspicuously missing in the development of both elderly and childcare policies is the voice of caregivers, notably women, and those receiving care themselves. Here, care policies do not differ from other social policies in Japan, which are notably bureaucracy-driven.

2. **Bedford, Kate (2010). "Harmonizing Global Care Policy? Care and the Commission on the Status of Women," *Gender and Development Program Paper No. 7*, Geneva: UNRISD.**

The paper aims to: identify the narratives of how the policy frame of equal sharing of responsibilities, including caregiving in the context of HIV/AIDS, came into being; identify the policy alliances generated through that frame; and identify what those involved thought the major steps forward were. It aims to provide a supportive examination of the emerging global policy agenda on care issues as crystallized in the 2009 Commission on the Status of Women meetings. The paper closes with a discussion of two issues that received less attention at the 2009 CSW meetings: disability, and diversity of family formation. While the paper seeks to explicate the immense value of the Agreed Conclusions forged at the CSW for future efforts to secure care services, it also aims to explore the limitations of those agreements and highlight the importance of continuing the conversation on care to grapple with current exclusions.

The paper argues that the frame of care, linked as it was to the equal sharing of responsibility between men and women, proved an exceptionally expansive one. It successfully united a wide range of actors, including conservative faith-based actors who had mobilized against other gender equality initiatives in the past. These advances may prove significant in increasing attention to care within the UN, in defending care services from state cutbacks in a recession, and in helping civil society actors mobilize around care, especially in HIV circles. In addition, the agreements made at the 2009 meeting may represent the emergence of a new consensus around the importance of economic justice issues in gender equality venues, given the foregrounding of state services and the challenge to free-market models of growth witnessed there.

3. **Budlender, Debbie (2007). "A Critical Review of Selected Time Use Surveys," *Gender and Development Program Paper No. 2*, Geneva: UNRISD.**

This paper presents the results of a study of surveys undertaken in Argentina, Brazil, Mexico and Nicaragua (in Latin America); Bangladesh, India and the Republic of Korea (in Asia); and Chad, Mali,

Tanzania and South Africa (in sub-Saharan Africa). The paper focuses on the following seven issues in reviewing the country experiences: assessing the design of the survey; delineating the scope of the survey and the information it contains; assessing the quality of the data obtained, with particular attention to data available on unpaid care work; identifying weaknesses in the data and survey design, especially with respect to unpaid care work; identifying countries most suitable for inclusion in the second phase of the project; identifying issues for exploration through qualitative research in the second phase of the project; and providing some recommendations, in terms of design/methodology, scope and training for fieldworkers, for future time use surveys.

The country case studies are preceded by a brief discussion of key concepts and issues to assist readers in understanding the significance of particular characteristics of the surveys highlighted later in the paper. The surveys conducted in developing countries over recent years have drawn heavily on other—mainly developed—countries' experience of conducting surveys. Although this is reflected in the discussion, the paper focuses on those aspects of most relevance for developing countries.

4. Budlender, D. (2008). "The Statistical Evidence on Care and Non-care Work Across Six Countries," Program on Gender and Development, Paper No. 4, Geneva: UNRISD.

This paper summarizes and compares findings from analysis of time-use data from Argentina, Nicaragua, India, the Republic of Korea, South Africa and Tanzania for the project by UNRISD on Political and Social Economy of Care. This explores the way in which care—and care of persons in particular—is provided by the institutions of family/household, state, market and community, and by the people within these institutions. The analysis presented in this paper focuses on the quantitative aspects of unpaid care provided by individuals in households. Distribution of time spent on care explores the distributions that lie behind the averages that usually form the basis of time use analysis. The various country graphs confirm that while the amount of time spent by men on unpaid care work and person care tends to cluster at the lower end of distribution, there are substantial numbers of women who spend long hours on care work.

5. Budlender, Debbie and Francie Lund (2011). "South Africa: A legacy of family disruption," *Development and Change*, 42(4): 925-946.

This paper draws together unusual characteristics of the legacy created in South Africa by the apartheid system – the state-orchestrated destruction of family life, the high rates of unemployment, and the high prevalence of HIV/AIDS. The disruption of family life has resulted in a situation where many women have to play the role of both breadwinner and caregiver, but face the challenge of doing this in a situation of high unemployment and very limited economic opportunities. The ensuing question is then, given what is a crisis of care, who is actually providing it, and to what extent can or will the social provision and employment-related social policies mitigate the care and provisioning crises and offer support and security to women and children.

6. Budlender, Debbie and Ruth Meena (2009). "Care Provision in a Low Income Country: A Case Study of Tanzania," *Unpublished Report*, Geneva: UNRISD.

This article describes care provision in the context of Tanzania – a low-income country whose economy is still heavily dominated by subsistence and small-scale agriculture, that is highly dependent on donor funding, and is facing a significant HIV/AIDS pandemic. The article repeatedly returns, in different ways, to the issue of poverty. At the root, there is the poverty of the majority of Tanzanians. Related to this is the poverty is the serious "resource constraints" of government. These poverty factors restrict the policy choices available to the country, thereby making reliance on unpaid care work attractive for government and the various institutions and individuals who are always ready to give advice.

7. **Cook and Dong, (2011).** “Harsh Choices: Chinese Women's Paid Work and Unpaid Care Responsibilities under Economic Reform,” *Development and Change*, 42(4): 947-966.

This article examines the social and economic trends that intensify the pressure on the care economy, and on women in particular in playing their dual roles as care givers and income earners in post-reform China. The analysis sheds light on three critical but neglected issues. How does the reform process reshape the institutional arrangements of care for children and elders? How does the changing care economy affect women's choices between paid work and unpaid care responsibilities? And what are the implications of women's work-family conflicts for the well-being of women and their families? The authors call for a gendered approach to both social and labour market policies, with investments in support of social reproduction services so as to ease the pressures on women.

8. **Dong, Xiao-Yuan (2011).** “Chinese Women’s Paid Work and Unpaid Care responsibilities during Economic Transition,” *An UNRISD Seminar*, UNRISD.

Dong discusses the social and economic trends that intensify the pressure on the care economy and on women in particular in playing their dual roles as caregivers and income-earners in post-reform China. Her presentation provided insights on a number of important issues, such as: how the reform process reshapes the institutional arrangements of care for children and elders; how the changing care economy affects women’s choices between paid work and unpaid care responsibilities; and the implications of work-family conflicts for the well-being of women and their families.

9. **International Labor Organization (2012).** “Global Employment Trends for Women 2012,” Geneva: ILO.

This report first discusses how gender stereotyping and biases affect the provision of care and why women are over-represented in particular types of jobs. Women dominate in “care” occupations such as nursing, teaching, social care and especially child-care. Men tend to be concentrated in areas associated with physical strength, risk-taking or decision-making. Such gender biases are also reflected in organizational practices. Male-dominated sectors tend to be more unionized, and men are more frequently selected for managerial positions because, some argue, they are perceived to be more willing to work longer hours and supervise others. Occupational, sectoral or time-related segregation can also be explained by women’s preferences for job security or the manner in which societies force them to balance work and family responsibilities. These factors, among others including structural and legal context, could help explain the over-representation of women in public sector jobs and/or part-time work.

This report also addresses how an inadequate supply of affordable non-parental childcare and short school or childcare hours can constrain parents’ full-time participation, in particular for mothers. Here, government and social partners can support non-parental care. In particular, publicly provided childcare may create better paid and more secure jobs for women. The fact that care workers are typically female has led some to argue that such services perpetuate the traditional gender division of labour and reinforce occupational segregation. In developed countries, affordable, accessible, high-quality childcare with hours harmonized with the working day has been shown to improve work-family balance, increase parents’ labour force participation, increase labour force continuity, increase productivity and reduce absenteeism.

10. **Faur, Eleanor (2011).** “Widening the Gap? Competing Welfare Logics and the Social Organization of Childcare in Argentina,” *Development and Change*, 42(4): 967–994.

This article examines how social policies and programmes implemented in Argentina shape the social organization of childcare. Faur seeks to analyse how welfare institutions are currently responding to emerging needs, and to what extent women from different social classes are able to

defamilialize part of the care their children need and enter into the workforce. Because Argentina lacks a truly unified “care policy”, Faur examines four different kinds of facilities and programmes: employment-based childcare services; preschool schemes; social assistance care services and poverty reduction strategies. Faur argues that far from expressing a homogeneous welfare regime, social policies are marked by a deep fragmentation that exposes the competing welfare logics that underpin them and ultimately reproduce gender and social inequalities.

11. Filgueira, Fernando, Magdalena Gutierrez and Jorge Papadópulos (2009). “The coming of age of a mature welfare regime and the challenge of care: Labour market transformations, second demographic transition and the future of social protection in Uruguay,” *Unpublished Paper*, Geneva: UNRISD.

In the first part of the paper, the authors review some conceptual developments and some critical arguments regarding the welfare and social model debate as it relates to the issues of risk, protection and care. Secondly, they argue that changes in the labor market, sexual division of labor and ageing have put new strains on the welfare regime. In order to do so, the authors present data on labor market evolution with particular emphasis on women’s participation, data on age structure and family arrangements of the elderly, and finally data on the transformation of family arrangements, especially, in this case families with children. They argue that these transformations have contributed to the development of a three tiered society: a well-off group that deals with these new strains by buying services in the market, a defensive middle-class that has less and less children and relies on an increasingly poor and inadequate social state, and a large proportion of poor people that rely partially on the state and increasingly on families that have neither the strength nor the resources to confront these new challenges. The third section concentrates on changes in the architecture of care and protection present in the welfare regime.

Finally, the paper argues that despite serious problems, not all hope should be lost. There have been some important improvements regarding education, health care, family allowances and to a lesser extent social security for the elderly that give room for hope. Furthermore, there is a window of opportunity for radically reshaping the welfare regime, specifically its welfare state, in the right direction. Thus in this section we will concentrate on four reforms that go in the right direction: early childhood education and full time schools, health care reform and its emphasis on primary care and emergency health care, social security reform regarding both retired peoples income and housing and care networks, and finally, family allowances and its impact on children’s welfare and access to both health care and education.

12. Filgueira, Fernando, Magdalena Gutierrez and Jorge Papadópulos (2011). “A perfect storm? Welfare, Care, Gender and Generations in Uruguay: a Cautionary Tale for Middle Income Countries,” *Development and Change*, 42(4): 1023-1048.

This paper claims that middle-income welfare states often model a system of entitlements based on a welfare regime that assumes stable two parent families, a traditional bread winner model, full formal employment, and a relatively young age structure. This paper argues that a gendered approach to welfare reform that introduces the political economy of care and unpaid work is critical to confronting the welfare of these nations. The Uruguayan case shows how the decoupling of risk and protection has ruined the efficacy of welfare devices in the country. Uruguay is an example of an ageing society that has transformed its family and labour market landscapes even while maintaining a welfare state that was contributory, elderly and male-oriented – leading to the increased vulnerability of women and mounting fiscal stress on the system as a whole. The redistribution of risk between women and children of upper and lower income groups presents a deep regressive pattern. The political economy of care and welfare has brought about mild reforms in the last ten years, but these changes may prove to be too little, too late.

13. Folbre, Nancy (2012). "The Care Economy in Africa: Subsistence Production and Unpaid Care," Paper for the AERC Biannual Research Workshop, 2-6 December.

This paper outlines a theoretical framework for analyzing the care economy, including both the paid and unpaid work of caring for dependents and the flow of financial resources through the family, the community, the state, and the market. A brief review of research on care work and economic development is followed by more specific consideration of empirical research on African countries, with a particular focus on the impact of HIV/AIDS. It asks what we know about the extent and value of the care economy in Africa, and why it matters. The paper concludes with a brief summary of policy implications and an agenda for future research.

14. Folbre, Nancy (2009). *Greed, Lust & Gender: A History of Economic Ideas*, Oxford University Press.

This book traces how much mainstream economic thinking on the care economy has been gender blind. It argues that 'greed and lust' have been considered core to economic functioning, but seen as good only for men, and only outside the realm of family life. This book discusses how a key contribution of feminist thinking has been to change the conceptualisation of the balance between "self-interest" and care for others.

15. Folbre, Nancy (1994). "Who Takes Care of the Kids? Gender and the Structures of Constraint," Routledge: London and New York.

The first purpose of this book is to show that economists have not paid sufficient attention to relationships between men and women or parents and children, and that, as a result, they have failed to provide a convincing analysis of economic development, political conflict, or social welfare. The second purpose of this book is to develop the following hypothesis: Both production and social reproduction are shaped by diverse forms of collective action. Groups organized along lines of gender and age make particularly conspicuous efforts to reinforce the institutional arrangements that they find advantageous, and to change those they find burdensome. Folbre explores these two goals both theoretically and empirically, from a number of different vantage points.

16. Martínez Franzoni, Juliana, Carmen Largaespada-Fredersdorff, Karim Ulloa and Loen Voorend (2010). "The Political and Social Economy of Care in Nicaragua: Familialism of Care under an Exclusionary Social Policy Regime," Gender and Development Program Paper No. 8, Geneva: UNRISD.

Drawing on statistical sources, official documents and secondary sources, this paper explores the general features of the Nicaraguan social policy regime, in terms of both social spending and the principal components of education, health, social protection and actual care services. On the basis of 54 interviews with women and men from two very different municipalities—Managua and Estelí—the paper describes the prevailing care practices, interpreting them in the light of available time use statistics. During the period studied (1980s-2000s)—the role of the state was, in various ways, subsidiary to that of unpaid, volunteer and community work, providing only rudimentary support. First, only the most basic social services were provided by the state, and coverage was far from adequate. Second, households and communities played a more dominant role than did public institutions. Third, most public programmes were dependent on strong family and community participation. This paper discusses the mix of public, market and family care practices in the context of the findings.

17. Martínez Franzoni, Juliana and Koen Voorend (2011). "Who cares in Nicaragua? A Care Regime in an Exclusionary Social Policy Context," *Development and Change*, 42(4): 995-1022.

In Latin American countries with historically strong social policy regimes, neoliberal policies are usually blamed for the increased burden of female unpaid work. However, studying the Nicaraguan care regime in two clearly defined periods, the Sandinista and the neoliberal, suggests that this argument may not hold in the case of countries with a more familialist social policy regime. Despite major economic, political and policy shifts, the role of female voluntary work remains persistent and pivotal, and was significant long before the onset of neoliberal policies. Nicaragua's care regime has been highly dependent on the voluntary work of mostly women. Moreover such voluntary work has been and continues to be vital for the viability of many public social programmes.

18. Palriwala, Rajni and Neetha. "Stratified Familialism: The Care Regime in India through the Lens of Childcare," *Development and Change*, 42(4): 1049-1078.

This article explores the political and social economy of care in India by focusing on childcare practices, from the viewpoint of the care giver. It is argued that the care regime is an ad hoc summation of informal, stratified practices. It is shaped by the institutional context, in particular the economic and social inequalities of work and livelihoods, as well as trends and absences in state economic and social policy. Central to the dynamics of care practices in India is the ideology of gendered familialism in public discourse and policy, which reiterates care as a familial and female responsibility and works to devalue and diminish the dimensions of care. By delineating the range of institutions through which everyday childcare practices are organized, this contribution draws out the differentiations and actualities of stratified familialism and care. At one end of the spectrum are those who have the possibility to retain familial careers at home and supplement them with paid and other institutional careers; at the other are those who are neither able to retain family members at home nor fill the care gap through formal institutions.

19. Patel, Leila (2009). "Thematic Paper: the Gendered Character of Social Care in the Non-Profit Sector in South Africa," *Paper for United Nations Research Institute for Social Development*, University of Johannesburg.

The focus of this thematic paper is on the non-profit sector in South Africa with particular reference to care services delivered at the community level. Non-profit Organizations (NPO) constitute one component – alongside the state, the market and families/households – of the overall institutional arrangement providing care; this arrangement is referred to as the "care diamond" This thematic paper works from the assumption that the South African NPO sector consists of a diverse cluster of care providers that are often loosely referred to as the 'community' or 'voluntary' or 'non-market' sector. Limited knowledge and understanding exists of what the differences are between the various types of NPOs, specifically with regards to their relations with government and donors. More specifically the objectives of this thematic paper are as follows: to explore existing policies and legislation that provide the mandate for the implementation of social care programmes by the non-profit sector; to understand the working relationships between, on the one hand, government and the non-profit sector, and on the other between donors and the non-profit sector and how this sector's care work is influenced by government and donors; and to examine the gender dynamics of care in NPOs in relation to the nature and scope of the care programmes being implemented by voluntary organisations.

20. Peng, Ito (2009). "The Political and Social Economy of Care in the Republic of Korea," *Gender and Development Program Paper No. 6*, Geneva: UNRISD.

The time use survey analysis of the care economy in the Republic of Korea (based on data from 1999 and 2004) shows that despite increased state support for the burden of care placed on families, women continue to take on a large share of unpaid care work within households, and that the total value of this work represents a significant percentage of Korea's gross domestic product. The analysis suggests that

married women bear the largest burden of unpaid care work in Korea, and that much of this work is focused on childcare. Peng concludes that the gender division of labour remained relatively unchanged between 1999 and 2004, and that regardless of their employment status, women—particularly married women—took on a disproportionately large share of unpaid care work.

The care diamond in Korea has traditionally been skewed toward the family and the market, with women undertaking a huge amount of unpaid care work, and the market providing reasonably secure jobs for men to support their families. The family remains an important site for social welfare and care, but has been relieved of some of its care and welfare responsibilities with the expanded participation of the state and market in social welfare. Finally, there is an increased expectation that non-governmental and voluntary organizations will play a larger part in providing social welfare and social care. The configuration of the Korean care diamond has thus shifted from a strong emphasis on the family and the market to a more balanced redistribution of care and welfare provision. Social policy reforms have significantly contributed to the reconfiguration of the care diamond. These reforms came about as a result of intense contestation among various political actors within and outside of the government. Recent social care expansion has contributed to a more balanced redistribution of care and welfare provision among the state, family, market and community, but it is still unclear whether these changes will result in greater gender equality in Korea.

21. Peng, Ito (2011). “The Good, the Bad, and the Confusing: The Political Economy of Social Care Expansion in South Korea,” *Development and Change*, 42(4): 905-923.

This paper examines the recent family-work reconciliation policy reforms in Korea and discusses why these reforms may be good politics, but a bad deal for women. The recent social policy reforms in South Korea indicate a progressive shift by a conservative welfare state in modulating the country’s familialistic male breadwinner welfare regime. Korean government has increased its support for women by extending its role in provisioning, regulating, and coordinating childcare and workplace support programmes for working parents. At the same time, labour market deregulation reforms have also created more pressures on women to seek and maintain paid work outside the home. Contradictory objectives between social and economic policies have resulted in a confusing mix of policies that both support and impede gender equality.

22. Razavi, Shahra (2007). “The Political and Social Economy of Care in a Development Context; Conceptual Issues, Research Questions and Policy Options,” *Gender and Development Program Paper No.3*, Geneva: UNRISD.

This paper traces the evolution of ideas in the area of gender and care, and analyses some of the main strands of thinking that have contributed to this ongoing debate. The effort to review the literature is far from exhaustive, and it is also biased toward connecting gender analyses of care in developing countries to some of the conceptual and theoretical work on care that, for the most part, takes the developed capitalist economies as its point of reference.

The first section analyses the contribution of feminist economics to the conceptualization, as well as the measurement and valuation, of the unpaid economy, including its care components. Debates within feminist economics on how to conceptualize the connections between the sphere of market-based capital accumulation (the commodity economy) and that of non-market-based social reproduction (the unpaid care economy) have drawn attention to the distinctions between different components that constitute the unpaid economy, throwing the spotlight on care and its distinct characteristics. The economic dynamics of the paid care sectors—a growing component of the gross domestic product in the more developed economies and also a significant employer, particularly of women—are receiving increasing attention, particularly the tendency for market provision to turn to low-wage and high-turnover labour strategies that produce low-quality care services. This literature

draws attention to the urgent need for an economic strategy, underpinned by better organization and broader coalitions among care workers, if caring standards are not to deteriorate and care workers are not to fall further behind other workers in pay and working conditions.

The institutions involved in the provision of care may be conceptualized in a stylized fashion as a care diamond, to include the family/household, markets, the public sector and the not-for-profit sector. The boundaries of the responsibility mix often shift in response to the claims of social networks and organized interest groups as well as through state action. There is enormous diversity in currently existing policy responses to care—arguably greater than that found for other contingencies such as illness or unemployment, and with differing implications for gender equality. The final section of the paper considers the renewed interest in social policy, trailing after the high neoliberalism of the 1980s that was epitomized by the “social investment state” allegedly focused on productive and active welfare, and on investing in children’s opportunities

23. Razavi, Shahra (2012). “Rethinking Care in a Development Context: An Introduction,” *Development and Change*, 42(4): 873-903.

Many developing country governments are experimenting with new ways of responding to care needs in their societies. However, these have been insufficiently recognized and analyzed — a lacuna that the present collection of papers seeks to address. In an increasingly unequal world, where gender inequalities intersect with ever-widening income inequalities, and where the options for securing good care are limited for the socially disadvantaged, this paper argues that a failure to socialize the costs of care will feed into and exacerbate social inequalities. This paper addresses how feminist scholarship on the gendered construction of welfare provisioning and welfare regimes has produced a conceptually strong and empirically grounded analysis of care, reinforcing the necessity of rethinking the distinctions between ‘the public’ and ‘the private’ as well as the links between them. Yet this analysis, premised on post-industrial contexts, does not travel easily to other parts of the world. Many of its core assumptions — about family structures, labour markets, state capacities, and public social provisioning — do not hold for a wider range of countries. Rethinking care in a development context also points to different policy priorities. Explicit care policies may be rudimentary in many developing countries, but a wider range of policies and social relations influence the supply of care.

24. Razavi, Shahra and Silke Staab (2012). “Introduction: Care Workers in the Global Economy: Worlds Apart?” *Global Variations in the Political and Social Economy of Care*, Routledge: UNRISD.

Drawing on original research on the care economy in three developing regions (Africa, Asia, Latin America), this essay introduces a major empirical lacuna while facilitating a conversation across the North-South divide. Care work, both paid and unpaid, contributes to well-being, social development and economic growth. But the costs of providing care are unequally borne across gender and social class. Feminist scholarship on the gendered construction of welfare provisioning and welfare regimes has produced a conceptually strong and empirically grounded analysis of care, reinforcing the necessity of rethinking the distinctions between “the public” and “the private” as well as the links between them. Yet this analysis, premised on post-industrial contexts, does not travel easily to other parts of the world. Many of its core assumptions – about family structures, labor markets, state capacities, and public social provisioning – do not hold for a wider range of countries.

25. Staab, Silke and Roberto Gerhard (2010). “Childcare Service Expansion in Chile and Mexico: For Women or Children or Both?” *Gender and Development Program Paper No. 10*, Geneva: UNRISD.

In this paper, the authors look at recent efforts to expand Early Childhood, Education and Care (ECEC) services for young children in two countries: Chile and Mexico. Although concerns over low female labour force participation and child welfare have emerged on both countries' political agendas, their approaches to service expansion differ significantly, indicating that while there may be some convergence around social investment ideas, their translation into policy practice is far from homogenous. Through a comparison the authors show that differences in policy design have important implications in terms of the opportunities the programmes are able to create for women and children from low-income families and the prospects for mitigating – or entrenching – existing gender and class inequalities.

Section one of the paper sets the scene by providing evidence on how patterns of care-giving have been altered by transformations in demographic, household and employment structures. Section two provides an overview of the main developments in ECEC services in the two countries under study. Commonalities and differences in the design of both programmes are discussed and some of their likely implications for gender equality, equal access to quality care and sustainability of childcare programmes are highlighted. Section three ventures some hypotheses as to why both countries may have chosen such different responses to address similar problems. The authors suggest that a combination of institutional legacies and overall frameworks for social policy and politics have made particular modes of ECEC services provision more attractive to governments than others.

26. The World Bank (2011). "Gender Equality and Development," *World Development Report 2012*, Washington D.C.: International Bank for Reconstruction and Development and the World Bank.

This report addresses several key gender issues relevant to the care economy. First, the report looks at how markets, institutions, and households can combine to limit progress. Gender gaps in productivity and earnings, for example, are pervasive. They are driven by deep-seated gender differences in time use, in rights of ownership and control over land and assets, and in the workings of markets and formal institutions. Second, to narrow disparities between women and men in earnings and productivity, a combination of policies is needed to address the various constraints that disproportionately affect women's access to economic opportunities. Third, gender differences are particularly persistent when rooted in deeply entrenched gender roles and social norms—such as those about who is responsible for care and housework in the home, and what is "acceptable" for women and men to study, do, and aspire to. These gaps tend to be reproduced across generations.

The differing amounts of time that men and women allocate to care and related household work are one factor driving segregation and the consequent earnings gaps. In most countries, irrespective of income, women bear a disproportionate responsibility for housework and care, while men are responsible mostly for market work. When all activities are added up, women typically work more hours than men, with consequences for their leisure and well-being. Everywhere women devote more time each day to care and housework than their male partners. Even as women take up a bigger share of market work, they remain largely responsible for care and housework. These patterns are only accentuated after marriage and childbearing.

27. UNRISD (2010). "Why Care Matters for Social Development," *Research and Policy Brief 9*, Geneva: UNRISD.

This article addresses how care work, both paid and unpaid, contributes to well-being, social development and economic growth. But the costs of providing care are unequally borne across gender and class. Families in all their diverse forms remain the key institution in meeting care needs. The challenge is to forge policies that support them and are grounded in certain key principles: recognize and guarantee the rights of care-givers and care-receivers; distribute the costs more evenly across society; and support professional, decently paid and compassionate forms of care.

28. Urdang, Staphanie (2006). "The Care Economy: Gender and the Silent AIDS Crisis in Southern Africa," *Journal of Southern African Studies*, Volume 32 (1): 165-177.

This article considers the impact of AIDS on women's roles and responsibilities within the household care economy. It emphasizes that all interventions aimed at reversing the epidemic need to take into account the excessive work-load that members of the household, usually women, shoulder in responding to the needs of sick family members. Most notably, gender equality and care economy issues need to be identified by development programmes. There is also a need to implement policies that focus on issues such as treatment, prevention, education, economic empowerment and violence against women. The article argues that unless the care economy and the relations of gender inequality within the household are included in the design, implementation and evaluation of such interventions, results will be compromised

29. Wekwete, Naomi N. (2012). "Gender and Economic Empowerment in Africa: Evidence and Policy Issues," Paper for the AERC Biannual Research Workshop, 2-6 December.

This paper addresses the fact that the majority of women in Africa are working in the informal sector or on small pieces of land and are engaged in care work, where the work is invisible and unpaid. Some of the inequities are embedded in the deep-rooted cultural norms and beliefs in the societies. These inequalities can only be addressed by engaging in intensive women's economic empowerment. This paper presents evidence to show that some of the programmes have been successful in trying to economically empower women, such as the use of cell phones to access markets, political will to implement laws, the "household approach" where programmes should adopt the bottom-top model to effect changes in attitudes and practices, and providing loans specifically for SMEs owned and managed by women. This paper also identifies key strategies to increase women's economic empowerment including: expanding women's opportunities for full and productive paid employment; improving women's access to education by introducing of free primary and secondary education; adult literacy programmes; supporting women in investment of agricultural inputs and equipment; and investment in labour-saving and productivity-enhancing technologies and infrastructure to free women's time for more productive activities.

30. Williams, Anne "Federating HIV/AIDS Home-Based Caregivers in Kenya and Uganda," 1-26. Written with support from: GROOTS Kenya, the Uganda Community Based Association for Child Welfare and GROOTS International.

This paper studies the formation and activities of federations of home-based caregivers in Kenya and Uganda. The first section discusses the issue of care within the context of HIV/AIDS, and describes the research topic and methodology. The next section describes the findings from each country. Following this is a discussion of the organising achievements and challenges. This paper aims to provide a useful analysis of a relatively under-analysed approach to addressing HIV/AIDS care and reducing its burden on women.

31. Williams, Fiona (2010). "Claiming and Framing in the Making of Care Policies: the Recognition and Redistribution of Care," *Gender and Development Program Paper No. 13*, Geneva: UNRISD.

This paper seeks to understand how care policies are shaped. It looks at the dynamic between how constituencies make care claims and the ways in which care policies are constructed and delivered in different national, regional and historical contexts. The focus is mainly on childcare policies for working parents in Europe, but the purview here also includes policies for disabled people and unpaid carers. Its aim is to provide an understanding, within particular contexts, of the relationship between: the articulation of claims based on the needs of those who provide and/or receive care; the political frames and logics of policies which attend to care needs; and the outcomes of such policies for different groups of care receivers and providers.

The first section focuses on the ways different political actors frame care policies in Europe. It starts with a brief review of the theories and concepts that inform the paper. It goes on to apply these to an analysis of how care needs are interpreted in the claims of those representing the providers and receivers of care. The second part examines policies in different national contexts by asking which issues drive policies and what this means for outcomes in terms of social inequalities.

In conclusion, the paper finds that care policies in Europe are imbued with tension and contradiction from the perspective of those who provide and receive care support. On the one hand, the last decade has seen important changes: for example, the recognition of the employment potential of those previously marginalized from paid work such as mothers and disabled people; the recognition of men's caring capacities; the rise of state responsibilities for care provision, especially in child care; and the recognition of family carers. On the other hand, these opportunities have been accompanied by constraints, including a sense of obligation by mothers and disabled people to find work often in the more precarious parts of the labour market; the increased commodification of care services; and the construction of parents/carers, older and disabled people exercising choice as consumers in the care market, rather than exercising their voice as citizens in the public domain of care.