CARE IN CRISIS

UNDERSTANDING THE VALUE OF PAID AND UNPAID CARE IN RESPONSE TO COVID19

The COVID-19 crisis has demonstrated more than ever that care work, paid and unpaid, underpins economic and social life in all societies. It is critical to sustaining society’s wellbeing, supporting people to live meaningful and healthy lives.

Care includes support provided to children, people with disability, older people and people who are sick. Often this care is provided by friends and family, without monetary compensation, and so is not well captured in common measures of ‘work’ or ‘economic output’, such as Gross Domestic Product (GDP) or Gross National Income (GNI).

Unpaid care responsibilities are disproportionately undertaken by women. The additional time spent by women providing unpaid care work reduces both their time to enjoy leisure activities and to engage in paid work. This unequal burden negatively impacts women’s economic autonomy and mental and physical health.

The distribution of care work is a human rights issue, enshrined in international law, including binding obligations on States to address the issue of unpaid care outlined in CEDAW, the Beijing Platform for Action, the International Covenant on Economic, Social and Cultural Rights, the International Covenant on Civil and Political Rights, the Convention on the Rights of the Child and the Convention on the Rights of Persons with Disabilities. It is also a key area of focus for the Sustainable Development Goals (SDGs).

WORLDWIDE, WOMEN ARE ESTIMATED TO UNDERTAKE 76.2% OF THE TOTAL AMOUNT OF UNPAID CARE WORK - MORE THAN 3 OUT OF EVERY 4 HOURS PERFORMED.¹

ACROSS ASIA AND THE PACIFIC AS A WHOLE, WOMEN DO FOUR TIMES MORE UNPAID CARE WORK THAN MEN.²

IN AREAS OF HIGH POVERTY PREVALENCE IN FIJI, 82% OF WOMEN REGULARLY DO UNPAID HOUSEHOLD WORK, COMPARED TO JUST 11% OF MEN.³

IN JIWAKA PROVINCE, PNG, MANY WOMEN SEE THEIR DAILY BURDEN OF UNPAID DOMESTIC WORK AS THE MOST SERIOUS FORM OF VIOLENCE AGAINST WOMEN AND GIRLS, AND LIKEN IT TO SLAVERY.⁴

2 Ibid. p. xxx.
3 IWDA. 2020. “Gender differences and potential implications of covid-19 in Fiji: insights from Individual Deprivation Measure data”.
CARE IS UNDERVALUED IN TWO KEY WAYS:

1. UNPAID CARE IS NOT CAPTURED IN MEASUREMENTS OF ECONOMIC OUTPUT, AND IS THEREFORE OFTEN NOT CONSIDERED TO BE ‘WORK’.

2. PAID CARE WORK IS FREQUENTLY POORLY PAID AND INSECURE.

FEMINIST SOCIAL REPRODUCTION THEORY (SRT) HIGHLIGHTS THAT THE LABOUR REQUIRED TO PRODUCE GOODS AND SERVICES WITHIN A CAPITALIST SOCIETY IS DEPENDENT ON THE LABOUR NEEDED TO PRODUCE AND CARE FOR PEOPLE.\(^5\)

AS COVID-19 HAS LAID BARE, CAPITALISM IS UNDERWRITTEN BY THE UNPAID CARE MOST OFTEN PROVIDED BY WOMEN, AND FREQUENTLY WOMEN WHO ARE THE MOST MARGINALISED, INCLUDING WOMEN FROM MIGRANT AND REFUGEE BACKGROUNDS AND WOMEN OF COLOUR.\(^6\)

THE ILO ESTIMATES UNPAID CARE WORK TO REPRESENT 9% OF GLOBAL GDP, OR 11 TRILLION US DOLLARS (PURCHASING POWER PARITY 2011).\(^7\)

OF COUNTRIES MEASURED BY THE ILO, AUSTRALIA’S UNPAID CARE WORK REPRESENTS THE HIGHEST PROPORTION OF ITS GDP, MAKING UP THE EQUIVALENT OF 41.3%.\(^8\)

WITH AN AGEING GLOBAL POPULATION, THERE HAVE BEEN GROWING CONCERNS REGARDING THE NEED FOR INCREASED NUMBERS OF CARERS, BOTH PAID AND UNPAID.\(^9\)

Now, the COVID-19 crisis is further shining a spotlight on the problems caused by the undervaluing of care. Many ‘essential workers’ are care workers, including doctors, nurses and childcare workers. The forced or voluntary closure of many paid care-providing facilities has left many families in lockdown juggling the responsibilities of care work and paid employment. These circumstances are converging to present an unprecedented challenge to society, but they are also an opportunity to radically transform the value we place on both paid and unpaid care.

---


\(^6\) Leonard, Sarah. 2016. “Capitalism’s Crisis of Care: interview with Nancy Fraser”. Dissent, Fall.

\(^7\) ILO. 2018. p. 49.

\(^8\) Ibid. p. 50.

WHAT WOULD IT TAKE TO DESIGN FOR TRANSFORMATION?

DECADES OF FEMINIST ECONOMIC ANALYSIS AND ADVOCACY HAVE UNCOVERED KEY POLICY INTERVENTIONS TO RECOGNISE, REDUCE AND REDISTRIBUTE UNPAID CARE WORK.10

RECOGNISE

Measure care contributions as part of the economy. Economists have long recognised the limitations of output-focused measures like GDP in capturing the full picture of an economy.11 Instead, measurements that consider overall impact, including care work, allow governments to support activities that promote living standards.12

New Zealand released its first ‘wellbeing budget’ in May 2019, focussing on the health of the country’s finances, natural resources, people and communities.13

Challenge inequality and transform gender roles to change the underlying view of care work as ‘women’s work’.

Challenging gender norms may be most effective when people are young. School-based behaviour change programs have demonstrated success. For example, following a respectful relationships program run by Equal Playing Field in PNG, 92.5% of students reported “that they had seen boys become more respectful to girls at least some of the time”.14

Create care-friendly workplaces that value carers and their contribution to the workforce, by offering flexible work practices such as remote working, compressed or flexible working hours and meaningful part-time options.

The SOCFINAF coffee plantations in Kenya offer on-site crèches for employees, and have seen reduced employee turnover and higher productivity as a result.15

REDUCE

Invest in time saving measures such as infrastructure and technology to reduce the labour and time required for unpaid care.

Electricity and water services in homes eliminate the time needed to fetch firewood and water, however fewer than 60% of the population in most Pacific countries are covered by electricity services.16,17

Invest in paid care services to provide greater access to diverse, quality and affordable alternatives to unpaid caring by family or friends.

In South Korea the government has invested in expanding child care services, including providing universal childcare vouchers irrespective of employment status or income.18

Invest in better conditions for paid care workers, including higher pay, greater security within contracts, and work health and safety considerations.

In Japan, five out of every six home-care workers experience monthly changes to their weekly hours and working days, while in Australia at least 39% experience monthly changes to their weekly hours and working days. In Japan, 50% of nurses earn below the national average weekly income.19,20

REDISTRIBUTE

Analyse gendered impacts, including care considerations, within all policy making and budgeting processes, to ensure the best decisions are made for society overall.

Increase social protections including welfare payments, ‘cash-for-care’ or care budgets, tax relief, pension schemes and long term care insurance schemes, to properly compensate unpaid carers for their work.21

In the Netherlands adult care dependants are eligible to receive a personal budget to pay for care, including by friends and relatives.22

Provide adequate leave for care responsibilities, including parental leave and carers leave, to increase employee retention and improve the distribution of care between genders. Providing compulsory or ‘use it or lose it’ leave for a second parent (in addition to primary carer/maternity leave) can make a difference to the distribution of unpaid care work.

In countries where leave is available for a second parent of three weeks or longer, parents are up to 15% more likely to share paid work and unpaid care responsibilities equally.23

10 The 3Rs framework was originally conceived by Professor Diane Elson of Essex University in 2017, and was adopted by the UN Secretary General’s high level panel on women’s economic empowerment.
16 ILO. 2018. P. 154
18 Yoon, Jappung, 2014.