Balancing the Responsibility for Care

**Ideal**

Ideally, care provision is balanced among different institutions, even if families are primary care providers.

Within the household, men and women should share the responsibility for care.

**Reality**

In reality, the provision of care is not balanced across the four providers.

Families, especially when they are poor, pick up the slack, doing the bulk of care work.

Within families, women bear a disproportionate burden of this care.

**Challenge**

The care workforce (in state, market and not-for-profit institutions) is far too small in most developing countries to meet growing care needs.

**Solution**

How can governments redistribute care more equally between women and men, and between families and society?

- Provide universal maternity and parental leave
- Invest in care services for children, older persons and people with disabilities
- Incentivize equal sharing of unpaid care work, e.g. through ‘daddy quotas’
- Prioritize investments in infrastructure to reduce the drudgery of unpaid care and domestic work
- Ensure that unpaid care and domestic work is counted in statistics and taken into account in policy-making
- Ensure decent employment conditions for care workers

Number of care workers per 1,000 population

- 35–70
- High-income Countries
- 5–20
- Countries in Latin America and the Caribbean*
- <5
- Countries in Sub-Saharan Africa

Source: Razavi 2007 and Duffy and Armenia, Forthcoming.

* The exception for Latin America and the Caribbean is Uruguay with nearly 40 care workers per 1,000 population.