

Policy Report:

Making the Case for Care

WHAT IS CARE?

Care work is meeting the physical, psychological and emotional needs of adults and children, old and young, frail and able-bodied, that is, the services provided to each human being in their home, often by family members. Care is crucial to human well-being and to the pattern of economic development.

UNPAID CARE

Unpaid care services are rendered and consumed in all countries and contexts. However, the time burden of such work is particularly high in places where infrastructure is poor, welfare systems do not support families' care needs and markets for care services are absent or lagging.ⁱ While fertility is declining in many countries, easing the burden of childcare, the number of older persons – those aged 60 or over – is steadily growing resulting in increased need for elder care.^{ii,iii} As marriage rates decline and while divorce, remarriage and cohabitation become more commonplace, a larger number of single parents and cohabiting couples are raising families worldwide, resulting in uniquely challenging care needs.^{iv}

Women spend significantly more time on unpaid care work than men, including twice as much time on household work and four times as much time on childcare.^v Overall, 76.2 percent of the total care hours globally are provided by women.^{vi} In the OECD countries, women spend about 2½ hours more than men on unpaid work each day, regardless of the employment status of their spouses.^{vii} In Southern and Eastern Mediterranean (SEMED) countries, where gender division of labor is significantly more pronounced: women on average spend six to eight times more time than men on unpaid work.^{viii} These gender gap persist despite men increasing their involvement in unpaid care work. In the countries where data are available, estimates suggest it could take around 210 years to close the gender gap.^{ix}

The high burden of unpaid care limits women's ability to participate in the economy. Research shows that providing affordable and quality childcare options can increase women's labor supply and labor market attachment.^x The burden of caring for children, the elderly and the sick falls disproportionately on women from lower socio-economic groups as relatively well-educated, high-earning women are often better able to afford market-based care than their poorer counterparts.^{xi,xii} Women living in tightly knit rural communities may have access to assistance from other female family members than recent migrants to urban areas.^{xiii} Therefore, women who are already in vulnerable and marginalized positions are more likely to be impacted by care burdens than those with more resources from higher income communities and households.

THE COST OF UNPAID CARE



UNPAID CARE AND THE INDIVIDUAL

In EBRD Countries of Operation (CoO), on average women spend 3 hours more daily on unpaid work compared to men, and a lion share of unpaid work is devoted to care.¹ Women perform twice as much unpaid labor as men in Slovenia and ten times in Egypt (see figure 1). SEMED countries on average display a more unequal distribution of unpaid labor. These gender gaps persist despite men’s increasing involvement in unpaid care work. In the countries where data are available, estimates suggest it could take around 210 years to close the gender gap.^{xiv}

Countries with inequitable attitudes are more likely to have higher unpaid work burden on women.

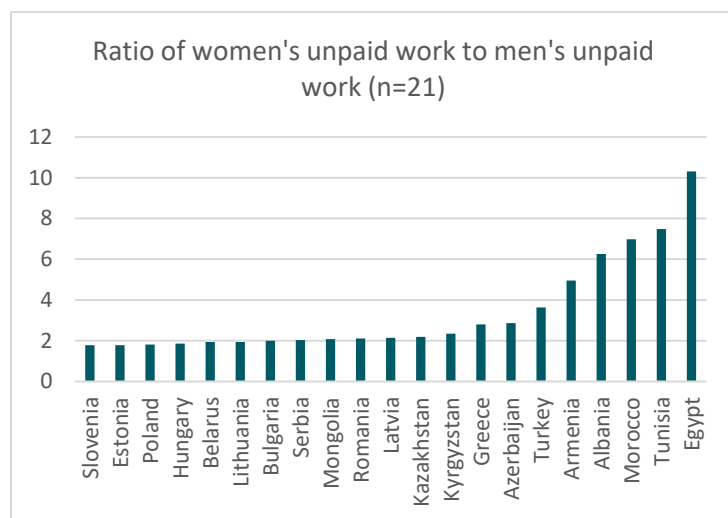


Figure 1: Women and men's unpaid work in EBRD Countries

Several recent large-scale surveys explore men’s and women’s attitudes toward maternal employment, work-family balance and men’s involvement in unpaid care. These surveys reveal that in many contexts, and most notably in Arab States, both men and women hold the belief that children suffer if the mother works outside the home. They also find that a majority of households continue to prefer the traditional “male breadwinner” model, where the mother does not work for pay and the father works full-time. These norms and the roles they ascribe to men and women do

not appear to change significantly even as women enter paid employment.^{xv} In their analysis of time use data from 11 EU member states, Mills et al find that women continue to take on the majority of domestic work regardless of their earning contributions to their household.^{xvi} Social norms often

¹ Authors’ own calculation based on country level time use data.

underpin the tendency of care work being done by women only. According to the data from the World Values Survey, 50 percent of people from the EBRD CoOs feel that children suffer when women work for pay, 32 percent people feel that when women earn more than their husbands, it is bound to create problems and 47 percent think that when jobs are scarce, men should have more right to a job than women (see figure 2).^{xvii}

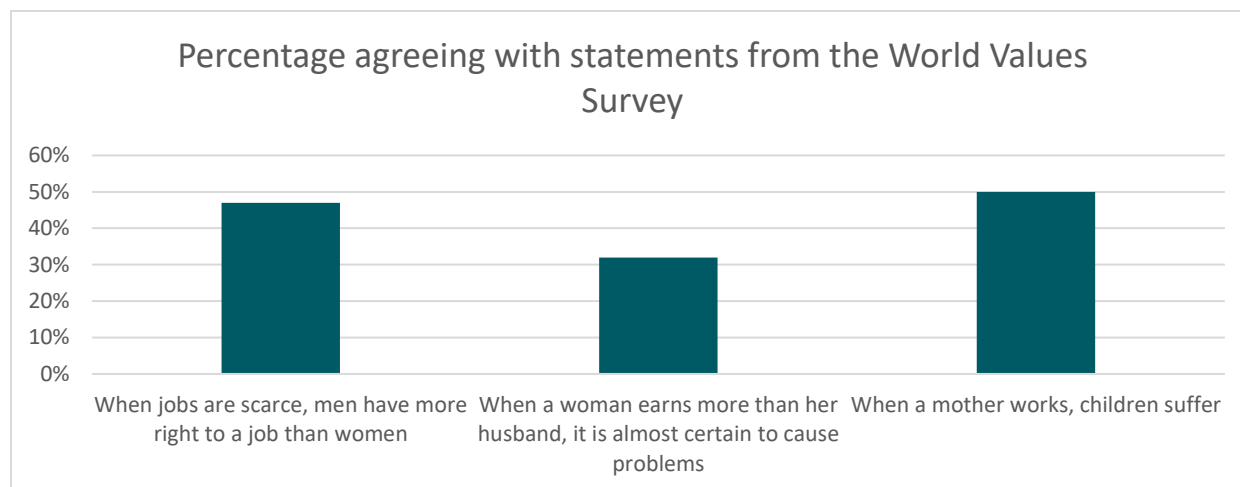


Figure 2: World Values Survey responses from EBRD CoOs

COST OF UNPAID CARE TO INDIVIDUALS

When childcare is not publicly provided, affordable, or easily accessible, only parents from higher socio-economic groups of the society can afford childcare. EBRD CoOs do not have provisions for universal childcare, and 36 of 38 countries do not provide tax-breaks for childcare expenses.^{xviii} Private, for-profit childcare provision is usually very expensive, making it unaffordable to families and women from lower socioeconomic groups.

Unpaid care responsibilities combined with formal work responsibilities result in a double work burden for women. Women are unable to participate in the labor market in the same ways as men do because of their unpaid care burdens. Women in virtually every country participate in the labor market at lower rates than men. Because of existing norms around women's roles as care-givers, when they take up jobs, they are expected to do so in addition to their household responsibilities. They become responsible for both household work and economic work, resulting in high time burdens.

The need for flexibility pushes women towards informal, part-time, or home-based employment. In virtually all countries where data are available, women are more likely to be employed in part-time jobs than men. Women also tend to reduce their hours of paid work with each additional child and mothers are even more overrepresented in part-time jobs. Data from the 2010 Labor Force Survey (LFS) conducted across 27 EU countries finds that 20.5 percent of all non-parent women work part-time compared to 36.4 percent of women who have children.^{xix} Many women with

children must forego insurance, pension and other benefits more often offered by formal and full-time work in favor of the flexibility offered by informal and part-time work. Women with part-time jobs are also significantly less likely to be in managerial and professional occupations and more likely to be in elementary occupations or employed in the service industry compared to full-time working women.

Even though the employment gaps between men and women around the world are narrowing, there continues to be a large gap between married men and married women. This is because women's care burdens frequently increase after marriage and especially after childbirth and many women withdraw from the labor market after having children.^{xx,xxi} Global data shows that female unpaid caregivers are 4 percentage points less likely to be in the labor force compared to women with no direct care responsibilities, whereas men with care responsibilities are 8.2 percentage points more likely to work than men without such responsibilities.^{xxii}

Women report that the double time burden can impact the quality of their work.^{xxiii} In the absence of flexible work arrangements, women often have to take sick-leave and unpaid time off to take care of children and elderly in need of care. This reduces their earning potential as well as productivity. Parents also report reduced focus, tardiness because of childcare crises, which affects the quality of their work.^{xxiv}

UNPAID CARE AND THE BUSINESS

In most EBRD CoOs, the private sector plays a limited role in supporting employees and enabling them to accommodate their care needs and duties. In some countries, even if there are penalties in place for not providing care-support to working mothers, companies prefer to pay the fine - which is often negligible - than make such provisions.

Egypt

Information on the private sector's involvement in providing childcare is limited in Egypt. **According to available data, employer-provided childcare centers were estimated to make up less than 3 percent of all childcare centers in Egypt as of 2004.**^{xxv} The majority of childcare centers are operated by NGOs (55 percent) and the private sector (42 percent).^{xxvi}

Kazakhstan

The private sector is increasingly playing a role in providing preschool education.^{xxvii} However, **the cost of private childcare is high- almost two to three times as much as state kindergartens- and pre-school education remains prohibitive for many families, especially for childcare for children between 0 and 2.**^{xxviii} As a result, wealthier families have greater access to childcare than poorer families. According to OECD data, private childcare is up to three times the cost of state kindergartens and can have a large impact on the family income.^{xxix} Childcare payments are not tax-deductible in Kazakhstan.^{xxx} The high cost means that most mothers have to provide care themselves or rely on relatives for childcare, limiting their labor force participation. The high cost of childcare has

also increased the prevalence of informal care by grandparents (especially grandmothers), and as a result reduced the LFP of older women.^{xxxii}

Romania

Data about employer-provided childcare is limited in Romania. There are some data about workplace flexibility measures. Available data showed that around 9.4 percent of workers are able to benefit from flexible work hour schedules. However, even among people who are able to negotiate and use flexible hours, only 8.4 percent can benefit from these measures regularly without any restrictions from employer.^{xxxiii}

Turkey

Despite laws that stipulate they need to extend care services to their employees and recently introduced tax incentives, few private sector companies that meet the criteria² provide on-site care.^{xxxiii} According to official MoNE data, there are two companies who provide on-site facilities where 289 children receive care. There are also two childcare facilities located in two Organized Industrial Zones (OIZ) which are operated by the OIZ directorates.

Interviews with the public and private sector reveal that companies see on-site care centers as risky and costly and prefer paying the minimal monthly fine. Employees may also prefer not to have their children cared for at a work facility or may be reluctant to demand their rights out of fear of losing their jobs. One key informant interviewed commented that both employers and employees do not prefer direct care provision in the workplace. This informant suggested that employers can meet employees and the government halfway by providing childcare vouchers. In general, both workers and employers felt that “incentives work better than penalties.”^{xxxiv}

Table 1: Employee mandate related to care

| | Mothers guaranteed an equivalent position after maternity leave | Dismissal of pregnant workers prohibited | Employers required to provide break time for nursing | Parents can work flexibly |
|-------------------|-----------------------------------------------------------------|------------------------------------------|------------------------------------------------------|---------------------------|
| Egypt | X | ✓ | ✓ | X |
| Kazakhstan | ✓ | ✓ | ✓ | ✓ |
| Romania | ✓ | ✓ | ✓ | X |
| Turkey | X | ✓ | ✓ | ✓ |

² According to Women Business, and the Law: “Companies employing at least 100 women must provide a lactation room close to the workplace (within 250 meters), and companies employing at least 150 women must provide a workplace crèche for children up to age six, or vouchers to pay for those services from certified childcare providers.”

COST OF UNPAID CARE TO THE BUSINESS

The unpaid care burden can impact businesses financially and otherwise. A survey by the World Bank shows that out of all women leaving the workforce, 71 percent cited childcare needs as the primary reason.

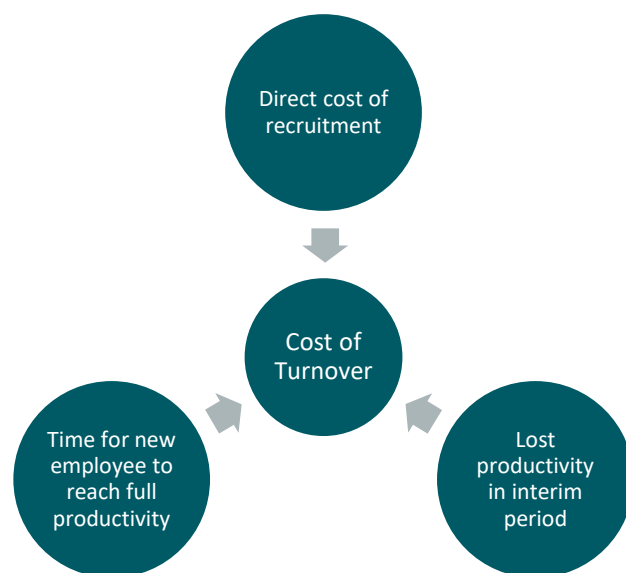


Figure 3 Factors contributing to cost of turnover

Primary research in 3 EBRD CoOs (Kazakhstan, Romania and Turkey) shows that turnover due to unaddressed childcare burden can cost companies hundreds of thousands of dollars annually. Businesses incur losses because of every voluntary turnover. From arranging separation of exiting employee to recruiting, onboarding, and training a new employee, companies spend substantial amounts. Companies also face lower productivity while the new employee reaches full productivity and as a result of loss of institutional knowledge.

Investing in childcare can reduce the need for women to leave the workforce after childbirth or in case of other care needs at home and thus reduce losses incurred by businesses.

Companies that do not provide support to employees to accommodate their child and elder care needs may have a difficult time recruiting women. Research shows that women are more likely to prefer jobs that provide them with flexibility and childcare support.^{xxxv} Thus, companies without such provisions can lose out on attracting qualified female candidates. Interviews with companies that do address care needs revealed that women often ask about flexibility and childcare options and show preference for jobs that offer these options.

Research shows that employees are more motivated and productive at firms that invest in childcare. IFC's research with employers from around the world found that employers that offer childcare options improve staff productivity through reduced absenteeism, greater focus and enhanced motivation and commitment.^{xxxvi} Employees of companies that offer childcare solutions reported having to take fewer sick days for childcare responsibilities, more peace of mind and focus on work and fewer mistakes or accidents.^{xxxvii}

TURKEY: CHILDCARE PROVISION COSTS LESS THAN TURNOVER EXPENSES

A medium-sized agri-business of about 800 employees (with more than 70% women) underscored the high cost of turnover when women do not return to work after taking parental leave. The company provides maternity benefits in accordance with the law: 16 weeks of paid maternity leave with provisions of another 6 months of unpaid leave. Breastfeeding mothers can take 1.5 hours daily to nurse until the child is 1 year old. Fathers are given 5 days of paid paternity leave. **But the company does not provide childcare services or subsidies, leaving employees to generally depend on family members, including older children in the house, for childcare.** Elder care is also very limited. Where support mechanisms are not available, women frequently quit their jobs to take care of their children or elderly relatives. The women employed at this company are mostly seasonal workers and are disproportionately represented in lower skilled and manual-labor positions. In 2017, the company faced a turnover rate of over 26 percent of all women employees; 91 women quit every year due to care-related burdens.

Volume of turnover

152 women quit TF in 2017 (142 Blue collar, 8 white collar).

Assuming 60 percent quit due to care responsibilities, TF's turnover due to care burden is 76 women (86 blue collar, 6 white collar)

Cost of replacementDirect cost of recruitment per hire

White collar: TL 4056
Blue collar: 0

Average first year orientation and training per hire

White collar: TL 3,200
Blue collar: 76

Total direct cost

White collar: $6 \times (4,056 + 3,200) =$
TL 39184
Blue Collar: $71 \times 76 =$ TL 6504

Lost labor productivity

[Annual labor productivity = $\times 3$ labor cost = TL 81,966]

Lost productivity during time to hire

Average time to hire
137.5 days

Lost productivity while new employee reached productivity of old employee

Average time for new employee to reach productivity of old employee
240 days
Convergence to full productivity
 $240/2 = 120$ days

Total non-productive time for every turnover:
 $137.5 + 120$ days = 257.5 days = $(257.5/365)$ 71% of year

Lost productivity per hire: TL 81,966 \times 71% = TL 57,847

Total lost productivity

Blue collar: $86 \times$ TL57847 = TL 4,936,454
White Collar: $6 \times$ TL57847 = TL 731,725

Total cost of turnover in 2017 due to unmet care needs:

TL 5,713,868 Or USD 914,218.99. *

Equivalent of 14% of the company's annual revenue in Turkey.

**The cost of turnover has been calculated based on a formula adapted from Deloitte LLP's voluntary turnover calculations. It is based on the company's wages and turnover data from 2017.*

UNPAID CARE AND THE ECONOMY

The lack of public care services is an acute problem for many workers in transitional states. In some contexts (post-Soviet states for example) care services for children, the elderly and disabled people may be shifted from the state back to families and women. In other contexts (SEMED countries) these services were never developed.

The public sector has a central role to play in shaping the incentives and mandates for care, providing and regulating the provision of care and socializing the cost of care, with the goal of ensuring access to universal quality child and elder care (ILO, 2018b; Ilkharacan, 2018). Many of the case studies explored, and key informants interviewed for this project, reported that their companies initially began to accommodate the care needs of workers, or invest in care, as a result of government mandates for childcare provision. Convention 156 on Workers with Family Responsibilities is an ILO convention, ratified by 44 countries, that lays out how the public and private sector can collaborate to accommodate and resolve care needs. This convention refers to many of the best practices highlighted in this report and suggests how the private and public sector can work together to meet the care needs of workers.

In an ideal world, access to quality care would be universal and not stratified by income or labor force participation (Ilkharacan, 2018). The goal of engaging the private sector in accommodating the care needs of workers is to ensure that care needs are addressed and do not conflict with work responsibilities. Demonstrating that there are returns to accommodating workers' care needs also highlights the potential fiscal space that exists to be redistributed towards providing universal access to quality care.

Egypt

Leave for parents is limited to maternity leave only with the cost borne by the employer rather than the social security system.^{xxxviii} In 2015, the government increased the duration of paid maternity leave from 90 days to 120 days, but other provisions remain the same.^{xxxix} During pregnancy and maternity leave, women cannot be dismissed from their employer, but their original position is not guaranteed upon their return.^{xl} There is no national legislation mandating paternity leave or parental leave in Egypt.^{xli} Because these provisions are only provided for new mothers, and not fathers, and because they are paid for solely by the employer, it creates a disincentive to hiring women workers in Egypt.^{xlii}

Government-provided childcare is very limited in Egypt. Government-run nurseries make up less than 3 percent of the total and are clustered in rural areas to serve poor populations.^{xliii} A very small portion of the national GDP (0.2 percent) is spent on public facilities that can encourage women to seek jobs, such as nurseries and safe public transport.^{xliv} In recent years, the government has increased investment in public nurseries and are in the process of creating strategies to improve the quality of childcare services.

Kazakhstan

Maternity leave in Kazakhstan is 126 calendar days, 70 prior to giving birth, and 56 after giving birth.^{xlvi} Until 2003, providing maternity benefits was the sole responsibility of employers. Since 2008, the state has taken over the entire maternity benefit system, which has eased the financial burden on employers and reduced discriminatory dismissal of pregnant women and new mothers.^{xlvi} The state also provides a one-time lumpsum allowance to mothers that work in the informal sector, but this is only provided after the birth. Additionally, the state government provides monthly 'social payments' for each child until they reach one year old.^{xlvi}

The state is the biggest provider of childcare and early childhood education and care in Kazakhstan. Under the Soviet government, childcare centers were available as part of the social support infrastructure, but these were dismantled in the post-Soviet years.^{xlvi} In 2014, of the total number of childcare centers and kindergartens, 56 percent were state-run, 16 percent were privately run, and 27 percent were mini-centers.ⁱ Access to childcare varies significantly between rural and urban areas. Cities have higher demand for childcare and in some cities, there are long waiting lists for enrolment. Rural areas on the other hand, have fewer kindergartens and lower demand.ⁱⁱ According to 2010 data, only 38.7 percent of the number of preschool children in Kazakhstan attended public and private nurseries and kindergartens, and 69 percent of populated areas did not have access to nurseries or kindergartens.ⁱⁱⁱ

Romania

Romania offers the longest parental leave (also called *child-raising benefit*) among the countries presented in this brief. Benefits are paid in full by the government and are applicable to birth parents, adoptive parents, guardians and foster carers. The primary parent (as decided by the couple) in Romania is entitled to up to two years of parental leave as long as they have worked for the prior 12 months.^{liii} During parental leave, the parent receives 75 percent of their average net monthly income (not exceeding 3400 RON or 840 USD) from the year prior to taking leave if they are taking only one year of leave or 1,200 RON (about \$280 USD) per month if they are taking the full two years.^{liv} However, in the absence of a robust childcare system, parental benefits alone cannot significantly improve women's participation in the labor market.^{lv}

The demand for public childcare services far exceeds the supply and an informal system exists where children of the wealthy or better-educated are more likely to get a slot in these centers.^{lvi} As of 2014-2015, there were 350 creches in Romania to serve children aged 0-3 years old.^{lvii} Of these, 89.1 percent were government-run facilities serving 18,600 children.^{lviii} For those who purchase private childcare, payments for childcare are not tax deductible.^{lix} As a result, working parents often have to rely on unpaid care provided by relatives. Romania has one of the lowest rates of Early Childhood Education Enrolment in Europe, only 10 percent of children under three years old and 40 percent of children between three years old and schooling age receive formal care.^{lx, lxi} Research shows that around 43 percent of 0-2 year-olds and 60 percent of 3-5 year-olds receive some unpaid care from non-parents during the week,^{lxii} and grandparents, especially grandmothers, are disproportionately likely to be unpaid care providers in Romania, accounting for up to 30 percent of all extensive care provided to children.^{lxiii}

Turkey

Turkish law provides for 16 weeks of paid maternity leave, generally eight weeks prior to and eight weeks after giving birth.^{lxiv} In the case of multiple births, paid maternity leave is expanded to 18 weeks. This maternity leave is funded entirely by the state through social security and women have the option to take an additional 6 months of unpaid leave.^{lxv} Until recently, paternity leave was extended only to state employees for 10 days of paid leave, with no similar entitlements for most private sector employees. In 2015, this was expanded to private sector employees, granting them five days of paid paternity leave or three days in case of adoption.^{lxvi}

Currently, there is no legislation that requires the central or local governments to provide early childhood and preschool education. The 2014-2018 5-year Development Plan prioritized high quality and affordable early childhood and preschool education partly as a measure for human capital development and as well to promote women's labor force participation and better work life balance.^{lxvii} It set a target to increase gross enrollment from 43 percent in 2013 to 70 percent for children ages 4-5.^{lxviii}

Table 2: Parental benefits in select EBRD countries

| | | Maternity leave | Paternity leave | Parental leave |
|-------------------|---------------------------|-------------------------|-----------------|-----------------------------|
| Egypt | Length of paid leave | 90 | Not provided | Not provided |
| | Payment of leave benefits | Employer and Government | N/A | N/A |
| Kazakhstan | Length of paid leave | 126 | N/A | 309 |
| | Payment of leave benefits | Government 100% | N/A | Government (partially paid) |
| Romania | Length of paid leave | 126 days | 15 days | 1-2 years |
| | Payment of leave benefits | Government 100% | Employer 100% | Government 53% |
| Turkey | Length of paid leave | 112 days | 5 days | Not provided |
| | Payment of leave benefits | Government 67% | Employer 100% | N/A |

COST OF UNPAID CARE TO THE ECONOMY

The impact of unpaid work on women's economic activity in the region is notable. Labor force participation of women is lower in countries where there are larger gender gaps in time spent on unpaid work (figure X). According to the latest ILO data and projections, women's labor force participation across the EBRD CoOs remains at 46.8 percent - ranging from 12.6 percent in Jordan to 65.4 percent in Kazakhstan - and is lower than the global average of 48.7 percent.

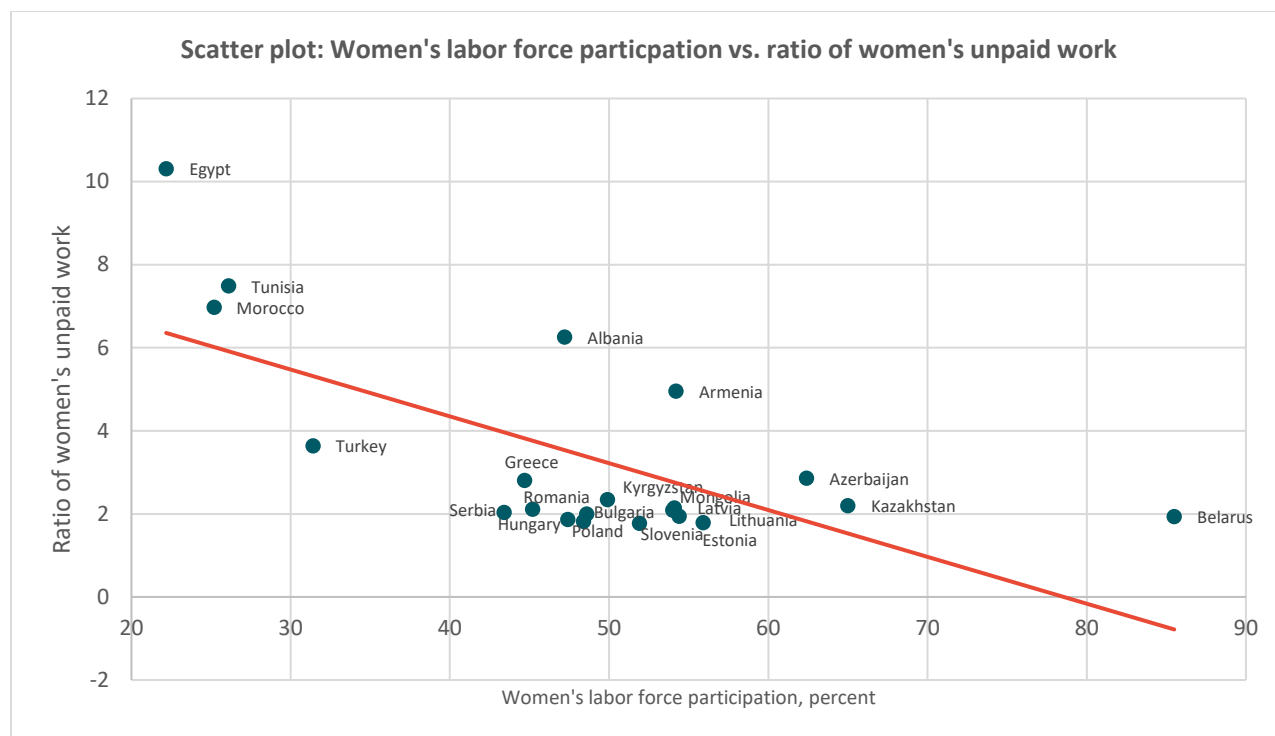


Figure 4: Women's unpaid work and labor force participation in EBRD Countries

Source: ILOSTAT and UNSD

Recent analysis conducted by the ILO indicates that, after controlling for education, age group, place of residence, income group and using country fixed effects, the presence in the household of children aged 0–5 years reduces women's probability of participating in the labor force by 5.9 percentage points, while the presence of elderly persons reduces the same probability by 1.6 percentage points.^{lxxix}

Women's limited labor force participation can negatively impact the economic growth of the country. According to research from multiple sources at different time periods, investing in women's labor force participation benefits the economy by increasing GDP and the size of the labor force as well as improving efficiency and productivity in labor markets.^{lxx, lxxi, lxxii} Recent research by McKinsey estimates that if women participated in the global economy at the same levels as men, it would add \$28 trillion to the annual global GDP by 2025.^{lxxiii} Researchers argue that gender equality in the labor market can be the most important factor in reducing poverty in developing countries.^{lxxiv, lxxv}

MEASURING THE IMPACT OF INVESTING IN CHILDCARE ON THE ECONOMY



This section estimates how investing in childcare can increase women's labor force participation (LFP) in EBRD countries. **Men's LFP is higher than women's LFP in all EBRD countries, with an average gap of 21.14 percentage points.** The average is higher in SEMED countries, at 49.47 percentage points.

In recent country-specific studies, the elasticity of female labor supply with respect to the price of childcare ranges from -0.12 to -0.2 .¹⁰ Hence, if the price of childcare is reduced by 50 percent, the labor supply of mothers will rise on the order of 6 to 10 percent.

We use a cross-country regression to estimate the labor force participation gap elasticities with respect to cost of care in EBRD countries. The following specification is used to measure the elasticity:

Labor Force Participation gap = f (Government preprimary_investment, Women_ secondary schooling, Per capita GDP, Total fertility rate, Women_life expectancy, Women in the service sector, Urban population, Taxed_childcare, Parental leave, Employment growth)

Government spending on pre-primary education is used as a proxy for the investments in childcare and is the variable of interest. The regression controls for other indicators that impact women's care burdens, such as whether parental leave is mandated by the state, and whether expenses for childcare are taxed by the state. Other controls such as women's education level, per capita GDP, women's life expectancy, and fertility rates are also included. We use robust errors to address the small sample size.

The regression estimates show that on average, increasing the share of government expenditure on pre-primary education (as a percentage of GDP) by 1 percentage point can reduce the LFP gap by 10.2 percentage points. This effect is statistically significant at the .01 level.

Using this relationship, we forecast each EBRD country's LFP gap if they were to raise their expenditure on preprimary education to 1.5 percent of total GDP, the highest level of investment in the EBRD region (figure 1). **If 1.5 percent of GDP is invested in pre-primary education, the average LFP gap in EBRD countries falls from 21.14 percentage points to 6.8 percentage points.** The biggest gains in women's labor force participation are in SEMED countries, where the gap falls to 16.5 percentage points from 49 percentage points (based on forecasts in Egypt and Jordan).

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LFP gap at current and increased pre-primary education investment

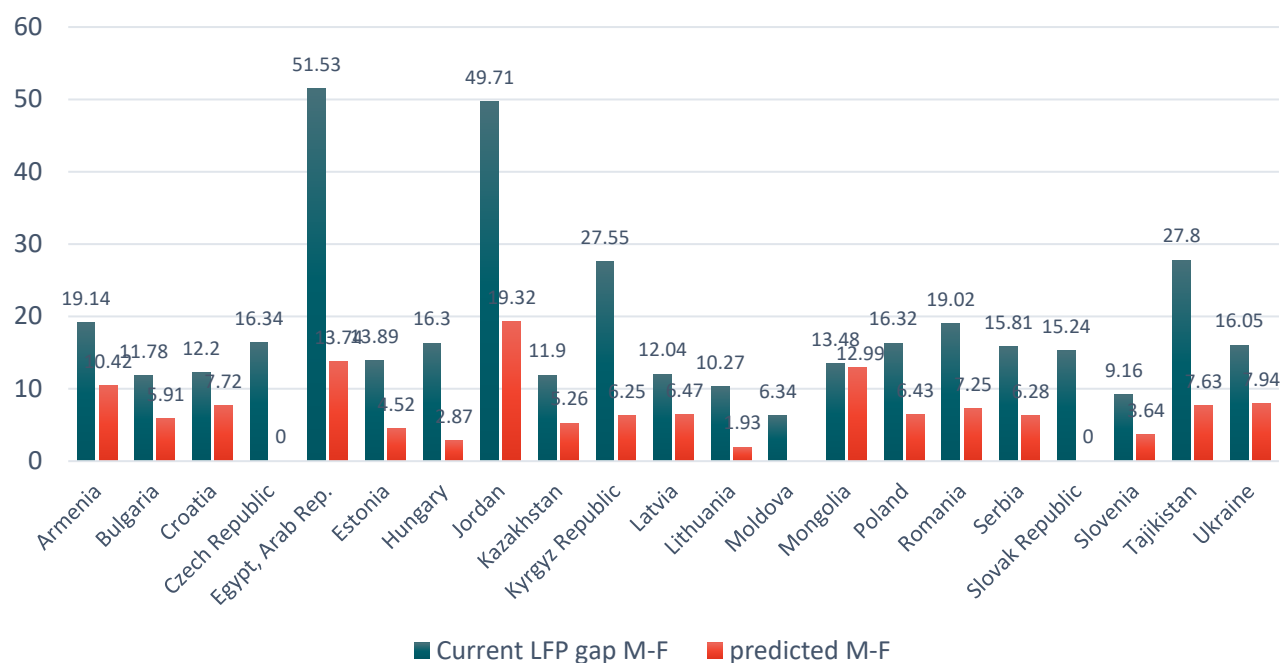


Figure 5 Possible change in LFP gap due to increase in investment in preprimary education (a proxy for daytime care for children under 5)

ROLE OF PUBLIC SECTOR AND PRIVATE SECTOR IN CREATING ACCESS TO CHILDCARE

Legislative, policy and private sector actions can all play an important role in lifting the burden of unpaid care work and creating an enabling environment for women in labor markets. These actions can provide or promote the high-quality care infrastructure needed to address the care needs of families. They can define entitlements to care services and leave, to negotiate flexible hours and schedule with employers and develop taxation systems and provide subsidies to secure universal access to quality care services. These initiatives can also change social norms and attitudes around gender roles for men and women and the distribution of care work.

Private Sector:

- EBRD operates in countries that currently don't have enough public investment in care provision. The private sector can help fill in some of these gaps by providing care services and wage subsidies for employees and accommodating workers care needs.
- Our research shows that providing childcare would cost a small fraction of the costs that businesses incur from turnover of women that leave due to care burdens. The provision of childcare can be a mix of solutions, ranging from on-site care to childcare subsidies.
- There is not a one size fits all model for care provision in the private sector. There are different ways in which the private sector can support care needs of its employees, from flexible working to on site provision, vouchers, or partnership with public institutions

Public Sector:

- In the long run, in order to create universal access to quality care services, states need to fund these services through the tax system and provide them free of charge.
- Potential fiscal space exists and is demonstrated by revealing the costs to firms and economies of not accommodating women's care needs.
- How the public sector can respond to care needs varies:
 - Create programs that incentivize businesses to accommodate workers' care needs and provide childcare support to employees.
 - Hold the responsibility to regulate and oversee care provision and ensure quality care and decent work for paid care providers.
 - Recognize and regulate informal childcare provision by creating fiscal and remunerating informal caregivers through government subsidies.

CONCLUSIONS

Addressing care needs and ensuring universal access to quality care services is fundamental for individuals, households and economies. Investing in care can increase women's LFP, prevent the loss of human capital and skills from the labor market, increase women's attachment to the labor market and protect the rights of those who need to care and be cared for. The public sector has the responsibility to regulate and oversee care provision, to create an enabling environment where firms accommodate workers' care needs and to ensure that all paid care work is decent work. The private sector has an interest in providing care in order to reduce costs of turnover as well as increase productivity of company by hiring and retaining talent and boosting staff morale.

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