


# Citizens' Assembly on Gender Equality

## Placing the CARE economy at the Centre of Irish Society Part 2



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- 1. Unpaid work at the heart of care economy**
  - 2. Some costs and conditions in care sector**
  - 3. Perspectives and principles for change**



**Unpaid care  
work is at the  
heart of the  
global economy**


Care work is mostly **unpaid** or  
**low paid**

Care work carries **little  
recognition** or **value**

Care work is mostly carried out  
by **women**

**Question:**

**Why is this the case??**



## UN system of measuring economic activity

*UN System of National  
Accounts*

Under the global system of measurement of **GNP** and **GDP** what is measured is **market-based economic activity**.

Activity that passes through the **market** and therefore carries a **price**:

**value = price**



In this classical **economic model**, many activities are:

- **not counted**
- **unpaid**
- **excluded**
- **hidden**

- **subsistence agriculture and craft production** for immediate consumption
- **household activity**
- **community activity**
- **volunteering activity**

Consequently  
decisions on  
**policy priorities**

Based on  
**mainstream**  
economic  
**statistics**

Both **narrow** and  
**gendered**

- **value** is reduced to  
**price**
- valuable activities that  
are **unpaid** are **not**  
**counted**
- significant amount of  
**women's work** is  
**devalued**

# GENDER GAP



**3 IN 4**  
people  
performing  
unpaid care  
work are women

The pace of  
change is so  
slow that it  
will take

**210  
YEARS**

to close the  
**gap** between  
men and  
women

At present rate of change to reach 50:50 or equal sharing of unpaid work between men and women globally will take 210 years.

Many **different**  
**kinds** of  
unpaid work

Some  
**examples**

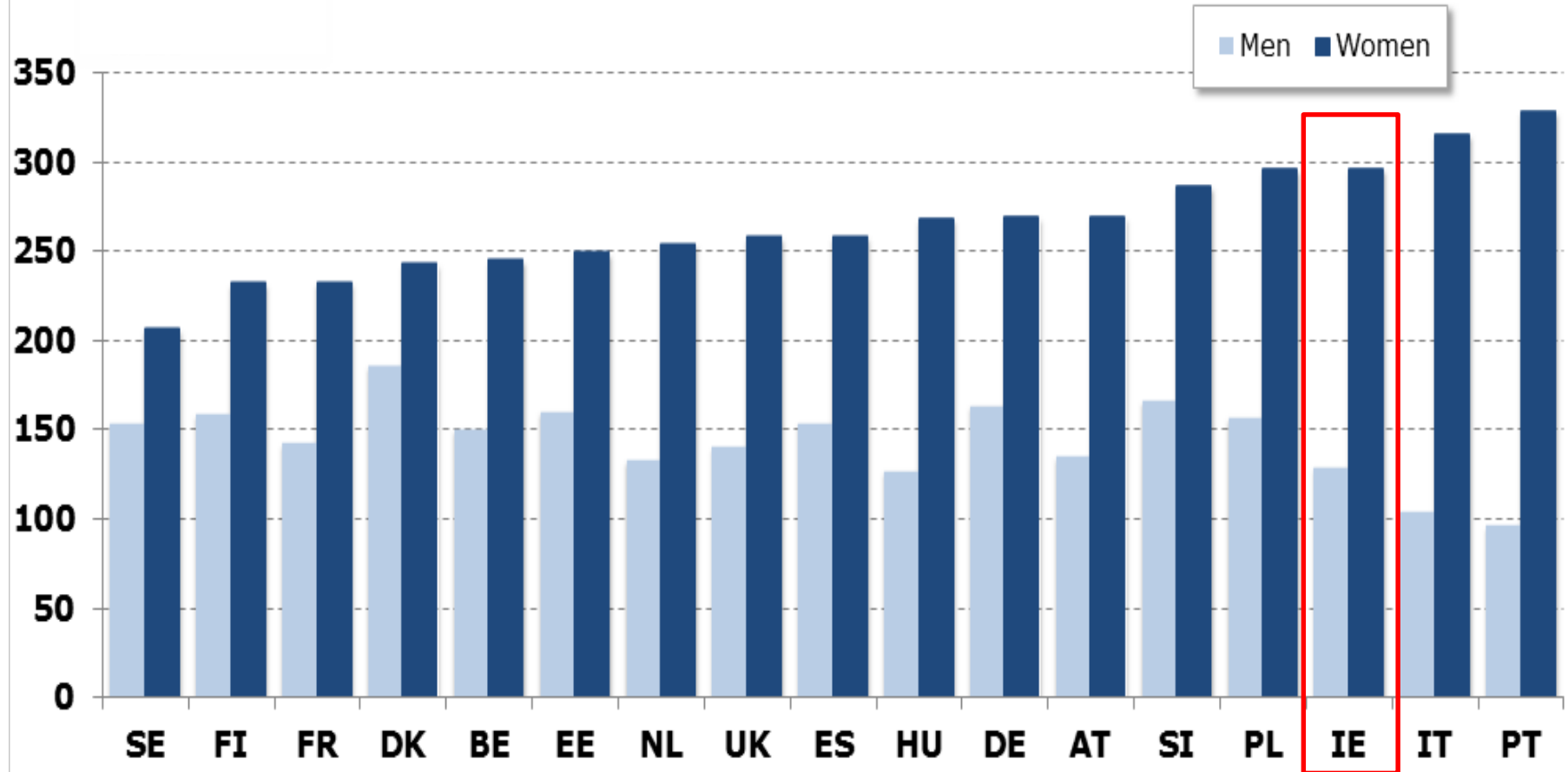
Caring for **children** inside and outside the home.....by a parent, grandparent or neighbour

**Eldercare** provided by family or **community-based** **services** drawing on volunteers e.g. meals on wheels

**Full-time carers** looking after those with **disabilities** in need of care or **respite care** drawing on voluntary sector



## Time spent in unpaid work by gender



Source: OECD Gender data portal

Women do nearly 3 times more housework than men per week in Ireland.

#evidenceinfocus

# Valuing unpaid work

**UK** – estimated unpaid work: equivalent to **56% of GDP**

Some countries have developed systems to **value paid work**.

Based on:

- **time-use surveys** putting **market value** on each hour of unpaid work.

Called **satellite accounts** or sometimes **shadow budgeting**.

In practice,  
there is a  
**significant care  
penalty**

Women earn **lower  
incomes** and  
access fewer  
**economic** and  
**social** supports  
over their lifetimes

- little **recognition** of value of **care**
- **systemic** economic **dependency**
- reduced **lifetime earnings** & **pension** entitlements
- narrower range of **employment** and **educational opportunities**
- greater **risk of poverty** both as **lone parents** and in **old age**
- less **control** of **time** - fewer opportunities for **political** and **cultural participation**

# Some very stark gendered figures

**98%** of full-time carers are women

**95%** of adult dependents in the social protection system are women

**Contributory State Pension: 84%** men

**Non-Contributory State Pension: 66%** are women (lower rate)

Estimated **€2.7 billion** worth of tax relief on pensions is recorded annually

Yet just **€1.7 billion** is paid out in **State Non-Contributory Pensions** per year.



**Rigid gender  
roles are  
failing men  
also**

Men in general may benefit from the **unequal division** of caring.

But **rigid gender roles** result in **men's dis-engagement** from **care and caring**.

**Low priority** is attached to **supporting men** within our **caring system** and within our **policy system**.



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## COSTS AND CONDITIONS IN CARE SECTOR





Ireland - **social policies on care** are largely based on

- unpaid **family care**

- private **market**

Many households provide care services **themselves**

**Costs** on market are increasingly **prohibitive**

Those who **can pay** often rely on the **private marketplace**

This has generated **new structural inequalities**



# Consequences of high cost of childcare

Childcare is a **major cost** for most parents and acts as a **barrier to paid employment.**

The average full-time childcare fees recorded in 2019 were €184 per week (ranging from €150 to €250 for one child).

**€7,500 - €12,500 per year of net income for one child**

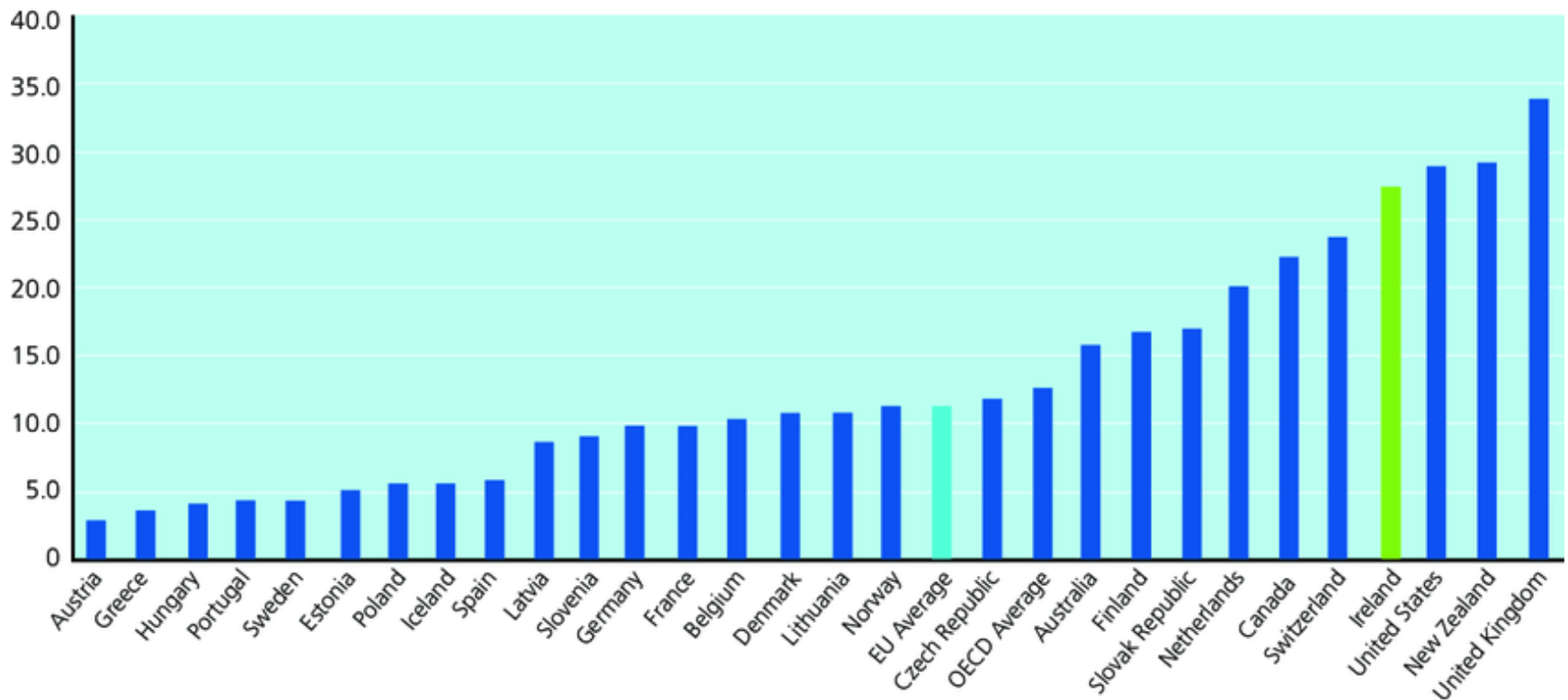


# Net costs of childcare

EU average 12%

Ireland 28%

Lone parents (Ireland) 40%



EU Data: 2018

Historically in  
Ireland –

chronic  
**underfunding  
of early  
childcare**

**Ireland** allocates just:

- **0.2% of GDP** on early childcare
- compared to an **EU average of 0.8%**
- **UNICEF target of 1%**

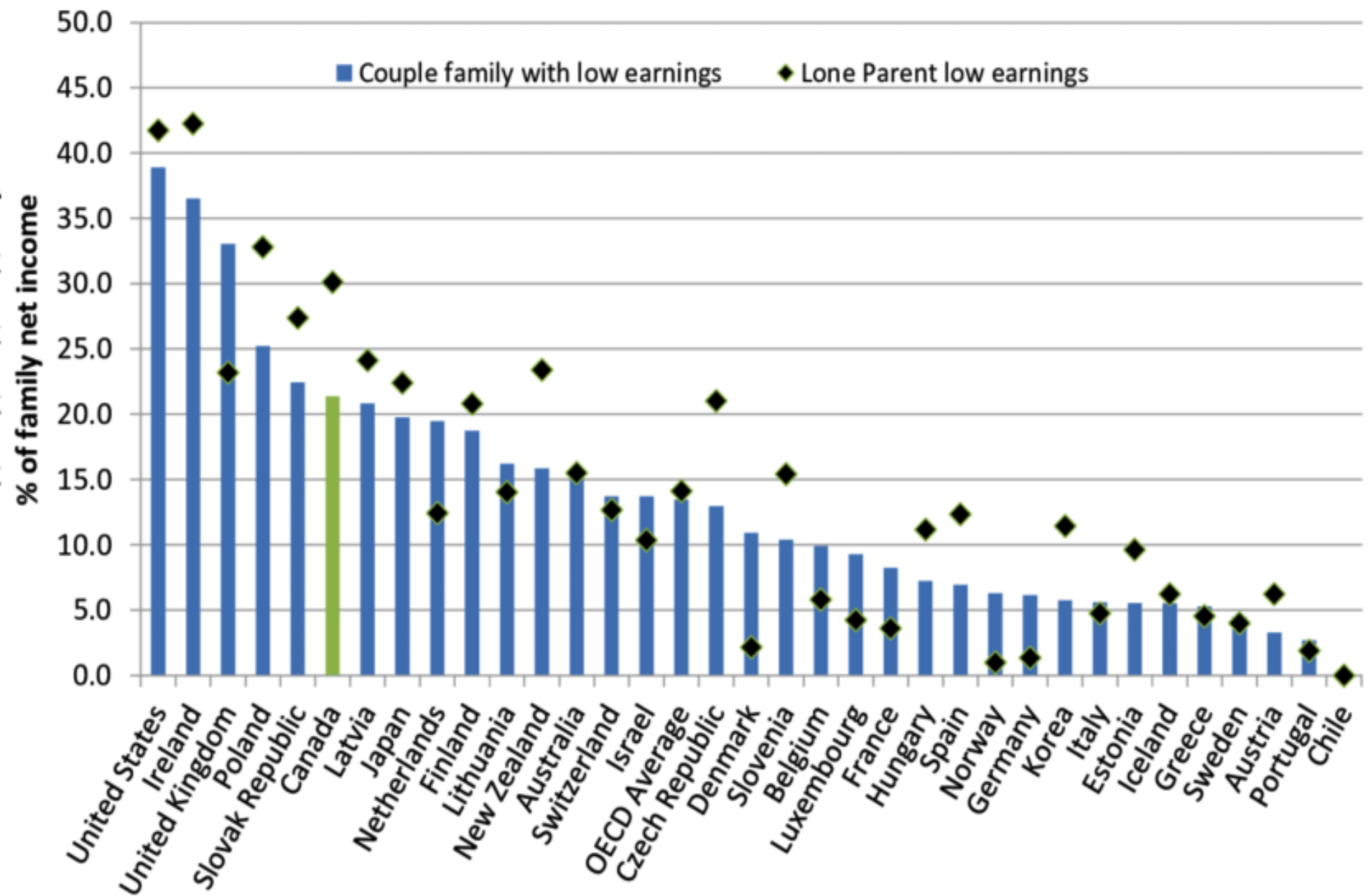
# **Childcare costs and low-pay**

## **Example of Lone parents**

**Lone parents face additional challenges as both:**

- **primary earner and primary caregiver**

**Childcare costs creates particular barriers when low paid part-time employment is often the only possibility**



OECD Data: 2016



**Care workers:**

**Low wages and  
lack of pay scale  
and career  
structure**

**Over 98% are  
women**

Pobal survey 2018/19

**Room leader: €12.55**

**Assistant staff: €11.46**

**Average staff turnover: 23%**

**Current Minimum Wage:  
€10.20**

**Current Living Wage: €12.30**

**61% on less than Living  
Wage at time of COVID-19  
closure in March 2020.**



**75% of  
nursing  
homes are in  
the private for-  
profit sector**

**Private fees** are between €50,000 and €75,000 annually.

On the **Fair Deal** scheme, an older person pays **80%** of their **income** plus **7.5% p.a.** of their **assets** as a **yearly** contribution.

New **legislation** promises to give more priority to **home supports**.

Existing **home care packages** are in **crisis** and **numbers in need** are **growing**.

# Ireland is now part of a globalised care chain

Estimated 20,000-26,000 **undocumented migrant workers** in Ireland

## Ireland

- historically an **exporter of care**
- currently an **importer of care**
- importance of **emigrants' remittances** for country of origin

**Care services** increasingly rely on **global migrants**

Issues of:

- **pay and conditions**
- regularising **legal status**

# Covid-19

## Emergency measures for childcare sector

The Covid-19 **temporary wage subsidy scheme (TWSS)** has **been** continued until 31st March 2021 in **childcare sector**.

Provides for **85%** (or **75%** for higher incomes) towards the **cost of all wages** and **significant** contribution to **overhead costs**.

Level of fees were expected to be **held at pre-COVID levels** – but there is evidence that this is not happening in practice.



# Pandemic Emergency measures

Highlight need  
for rethinking  
our **model of  
care?**

Supporting private providers  
has kept **childcare  
businesses open**

but does **not address:**

- Cost to **parents**
- Low wages & conditions  
among **employees**

In practice: continued **charging  
of high fees to privately  
paying parents**

What will happen on **April 1<sup>st</sup>  
2021?**



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## PERSPECTIVES AND PRINCIPLES OF CHANGE



# Conclusion

**Existing model**  
of care provision:

**State**  
**subsidisation** or  
**payment** for  
**private service**  
delivery

Current social and economic policy in Ireland supports an **unequal gendered** system of **care provision** with low level of **State support**.

This is **not** in the **interests** of either **women** or **men**

**New model of care:**  
supporting **different** ways of  
**managing** and **organising**  
care

# Conclusion

**Key principles  
for new model of  
service provision**

**Social/public  
responsibility for  
care**

**Recognise care as a social  
investment**

**State support for quality care  
systems for child, disability  
and eldercare**

- **Recognise different needs  
of different households**
- **Support different choices of  
different households**
- **Respect autonomy of adult  
care recipients**

**New model of  
public  
provision that  
sees**

**care provision  
as  
*social  
investment***

Long-term: **State  
responsibility and public  
provision of *quality  
universal basic care  
services***

Short-medium term aims

- decreased **reliance on  
market**
- increased **public provision**
- increase **level of wages**
- maintain **flexible approach**

# Conclusion

**Objectives of putting care economy at the centre of our society**

- Facilitate **combining of care and paid employment**
- Encourage greater **male participation** in care
- Remove the **care penalty** imposed on **women**
- Improve **economic** situation of **care workers**
- **Protection** of **migrant workers** in care services

## Recommendations:

Recognise the **value of unpaid work** when developing and implementing **social and economic policies**

Carry out:

- **gender impact assessment of budget**
- **bi-annual national time-use survey - unpaid work**

Introduce:

- **age-based Universal Pension entitlement** and remove concept of **dependency** from the Social Protection system – benchmark to 35% of average earnings
- **Recognise care** by allowing those **seeking part-time work** to access **Jobseekers payments**

# Recommendations

## Public investment programme in care

### Moving towards a model of Universal Basic Services

#### Short-term

- All care workers on minimum of Living Wage
- Develop career structure for care workers

#### Medium-term

- 0.5% GDP invested in early childhood & care
- Increase income disregard for carers to €18,000

#### Long-term

- Implement career structure for care sector
- 1% GDP invested in early childhood & care
- Increase income disregard for carers to €20,000





CARE

