

work should be recognized and valued “through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate” (UN Sustainable Development Knowledge Platform, 2015).<sup>49</sup> The indicator framework for the global monitoring system for the implementation of the 17 goals – to be adopted by the UN General Assembly by end-2016 – includes a proposal for specific metrics to measure the average daily hours spent on unpaid domestic and care work, by sex, age and location. This monitoring system will also make possible a more systematic and comparable measurement of unpaid work.

## 2. Demographic, social and environmental changes lead to more demand for paid care services

Although across the world the care professions are already short-staffed, the demand for formal care services is expected to grow in response to a number of global changes. With an increasingly ageing population in many high and middle-income countries and a burgeoning youthful population entering childbearing age in sub-Saharan Africa, the demand for care provision is expected to grow further. In some regions, HIV and AIDS and other health pandemics have also contributed to increased demands on individual workers to provide family care for adults, often in addition to children. Changing family structures, with fewer extended families and high levels of single-parent households, the increased engagement of women in paid work outside the household, urbanization, and national and international migration have also diminished traditional and informal support mechanisms. In low-income countries, tensions on women’s time are also exacerbated by escalating pressures from climate change-related events, deforestation and the energy and food crises, which increase the hours spent in unpaid work.<sup>50</sup>

As discussed later in this chapter, the growing demand for paid care services has not been matched by the creation of decent care jobs in the public sector. Thus, home-based care workers, often informal and low-paid, remain the main providers of social care services for middle-income households which have no access to formal social care services. Ineffective measures to address the “global care crisis”, along with inequalities in wages and working conditions across countries, have generated the phenomenon of “global care chains”, namely, the expanding international migration of care workers, in particular domestic workers, child-minders and nurses, in response to care shortages in industrialized countries and those with ageing populations, while leaving behind their own family dependants (Addati and Cheong, 2013). On the supply side, the lack of decent work in the home country is the primary reason for most labour migration. Many developing countries now include migration as part of national development strategies, certify labour and engage directly in the export of women to labour-importing countries (Williams, 2014; Guevarra, 2014; Sophal, 2009).

The scale of the global care chain is not insignificant. In 2015, the ILO estimated that there were 83.7 million male migrant workers and 66.6 million female migrant workers in the world. Of the total of 150.3 million migrant workers, 11.5 million – or 17.2 per cent – were domestic workers. The majority of the domestic workers (73.4 per cent) were women. Regionally, South-Eastern Asia and the Pacific host 24.0 per cent of female migrant domestic workers, followed by Northern, Southern and Western Europe (22.1 per cent) and the Arab States (19.0 per cent) (ILO, 2015o).

49. The present report uses the term unpaid “household” work instead of unpaid “domestic” work to distinguish the former from the work performed by domestic workers on an occupational basis, according to the definition in the Domestic Workers Convention, 2011 (No. 189).

50. See Razavi and Staab (2010) for a study on the growing need for paid care services as a result of women’s increasing participation in the labour market and under the impact of demographic changes (notably, ageing) and health crises, including HIV and AIDS. For studies on unpaid caregiving provided to persons living with HIV, see Akintola (2008) on Southern Africa and Makina (2009) for a study on South Africa and Zimbabwe. See Röhr (2007), UN WomenWatch (2009), Demetriades and Esplen (2010), UNDP (2011), World Bank (2011b) and Hallegatte et al. (2016) for an overview of the gender-based impact of climate change. On the issue of deforestation and gender, see Peach Brown (2011) for a study on the Congo Basin and Djoudi and Brockhaus (2011) for a study on Mali. On food security, a study by Heltberg et al. (2012) examines the role of women as “shock absorbers” for the food, fuel and financial crises. Similarly, a joint FAO and ADB (2013) report discusses the disproportionate impact of the food price crisis, financial and economic crisis and ecological crisis on women.