P28 / Public Policy, Gendered Inequalities, and the Social Reorganization of Care in Global Perspective

Topic : Equity, Gender, Inclusion and the Diversity in Public Policy

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GENERAL OBJECTIVES, RESEARCH QUESTIONS AND SCIENTIFIC RELEVANCE

Care has become one of the most pressing challenges facing contemporary public policy. This challenge is unfolding against a profound transformation of the world's demographic landscape. The global population reached approximately 8.2 billion people in 2024 and is projected to continue growing to around 10.3 billion by the mid-2080s, while fertility has fallen to 2.25 births per woman and is already below replacement level in more than half of all countries and areas (United Nations, 2024). At the same time, people are living longer: global life expectancy reached 73.3 years in 2024 and is projected to rise to 77.4 years by 2054. Population ageing is therefore becoming a particularly significant policy challenge. By the late 2070s, the number of people aged 65 and older is projected to reach 2.2 billion and surpass the number of children under 18; even earlier, by the mid-2030s, the population aged 80 and over is expected to reach 265 million, exceeding the number of infants worldwide (United Nations, 2024). These trends coexist with very different demographic realities across regions: while some societies are experiencing population decline and rapid ageing, others continue to have relatively young and rapidly growing populations. Together with transformations in labor markets and family structures, these demographic shifts are reshaping both the scale and the nature of care needs across the world.

From a feminist perspective, care cannot be understood solely as a question of service provision or social policy design, but rather as a central arena in which gender relations, social hierarchies, and relations of dependency are produced and reproduced (Fraser, 2016). Historically, the social organization of care has rested on a gendered division of labor that has assigned women primary responsibility for caregiving and social reproduction, both through unpaid work within households and through paid forms of care work (Federici, 2015, 2018). Feminist scholarship has further shown that paid care work is frequently characterized by low wages, precarious employment, limited recognition, and weak labor and social protections, particularly in sectors such as domestic and migrant care work (Glenn, 1992; Tronto, 2013). These inequalities cannot be understood through gender alone: the organization of care is also structured by class, race and racialization, ethnicity, migration status, citizenship, age, and territory, producing highly unequal distributions of both care responsibilities and access to care (Glenn, 1992; Hochschild, 2000; Razavi, 2007).

This panel proposes to examine contemporary transformations in care policy from a global, comparative, and feminist perspective. Its general objective is to analyze how different states and societies are responding to the so-called care crisis and, more specifically, the extent to which current policies challenge or reproduce the traditional gendered division of labor. The central question will be: Are emerging care policies producing a meaningful redistribution of care responsibilities among the state, the market, communities, families, women, and men, or are they institutionalizing pre-existing inequalities in new forms?

CALL FOR PAPERS

This panel invites papers that examine care as a field of public policy from comparative, feminist, intersectional, and critical perspectives. We are particularly interested in contributions that move beyond the analysis of service provision to explore the institutional, political, economic, and socio-gendered relations through which care responsibilities are distributed among states, markets, families, communities, women, men, and other social actors.

The panel seeks to bring together research from Latin America and the Caribbean, North America, Europe, Africa, Asia-Pacific, and the Middle East and North Africa, as well as transregional and comparative studies.

The panel will be organized around five lines of comparative discussion:

1. From Family Responsibility to the Right to Care: Systems, Institutionalization, and Universalization: This

line will examine the shift from models in which care has been treated primarily as a private and family responsibility toward its recognition as a right and a public responsibility. A central question will be what it means to recognize care as a right: who is recognized as a rights-holder, what obligations are assumed by the state, and how this recognition transforms the relationship among families, communities, markets, and public institutions.

2. Gendered Division of Labor, Time, and Co-responsibility: A second line will focus directly on the unequal distribution of paid and unpaid work between women and men. The key question is whether these policies are able to transform the historical association between femininity and care, or whether they continue to be designed around the implicit assumption that a woman will remain available to absorb the everyday demands of social reproduction.

3. Care as Work: Employment, Precariousness, and Global Care Chains This line will focus on the conditions of those who perform paid care work: domestic workers, home-based caregivers, workers in residential care facilities, nurses, and other sectors linked to social reproduction. The discussion will address processes of professionalization, formalization, and labor regulation, as well as wage inequalities and unequal access to social protection, and global care chains.

4. Care, Aging, and Demographic Transformation Rapid population aging in many societies has turned long-term care into one of the major challenges facing contemporary welfare systems. This line will compare different public responses to the care of older persons and dependent populations, including home-based services, institutional and community-based care, long-term care insurance, cash transfers, and mixed systems of provision.

5. Community Care, Territory, and Alternatives to Marketization Finally, the panel considers forms of care that exceed the conventional opposition among state, market, and family. Particularly in Latin America, Africa, and many Indigenous and rural societies, substantial portions of care are organized through community networks, extended families, and collective forms of sustaining life. This dimension opens space for conceptions of care emerging from community-based, Indigenous, decolonial, and Global South feminisms that challenge the reduction of care to an individualized or commodified service.

We welcome theoretical, empirical, comparative, and policy-oriented papers.