



Care Economy Valuation in Local Development Planning

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Abstract

Local development planning conventionally relies on indicators of market production, employment, infrastructure, enterprise activity, public expenditure, and household income. Such measures are essential, yet they incompletely represent the productive foundations of local economies because a substantial volume of childcare, eldercare, household maintenance, assistance to persons with illness or disability, food preparation, and other forms of unpaid care remains outside conventional market transactions. The exclusion or weak visibility of these activities can distort assessments of labor availability, household economic capacity, service deficits, gender inequality, and the infrastructure required for inclusive development.

This study examines how care economy valuation can be incorporated into local development planning through a simulation-based analytical framework. Because no verified local survey dataset was supplied, the article does not present simulated observations as empirical findings. A reproducible analytical corpus of 120 hypothetical local planning units was constructed using four dimensions: care-burden reduction, access to care services, local employment support, and women's economic participation. The framework combines time-use recognition with replacement-cost valuation, care-service mapping, and care-sensitive development indicators. The simulated analysis produced a Pearson correlation of $r = 0.717$ between reductions in unpaid care burdens and women's economic participation. Mean participation increased from 51.2 in planning units with low recognition and reduction of care burdens to 71.3 in integrated care-sensitive planning units.

The results illustrate that valuing care is not simply an accounting exercise. It can alter how local authorities interpret labor constraints, social infrastructure requirements, employment creation, household vulnerability, and development priorities. The study proposes that local development plans should recognize unpaid care, estimate its economic contribution transparently, identify care-service deficits, and integrate investments in childcare, eldercare, health, water, transportation, and related services into economic planning. The resulting framework positions the care economy as productive infrastructure that supports labor-force participation, human well-being, and locally inclusive development.

Keywords: care economy; unpaid care work; local development; time-use valuation; social infrastructure; women's economic participation; household production; development planning.



1. Introduction

Economic development is commonly measured through activities that generate observable market transactions, recorded employment, business income, investment, public expenditure, and formally measured production. These indicators remain central to development planning, but they provide an incomplete representation of the work required to sustain households, workers, children, older persons, and people requiring continuing support. Care work includes both paid and unpaid activities and constitutes an essential foundation of social and economic reproduction. The International Labour Organization's major 2018 assessment emphasized the relationship between paid care work, unpaid care work, labor-market outcomes, and persistent gender inequalities. When local planning systems recognize only activities that pass through conventional markets, a large part of this productive contribution may remain statistically and institutionally invisible.

The distribution of unpaid care is also highly unequal. Global time-use evidence compiled before 2021 consistently showed that women perform the majority of unpaid care and domestic work. The ILO's global analysis reported that women undertake more than three quarters of unpaid care work, while UN Women's 2019–2020 assessment found that women globally perform approximately three times as much unpaid care and domestic work as men. These patterns matter for local economic planning because time devoted to unpaid care affects the amount, location, duration, and type of paid employment that individuals can undertake. Charmes' analysis of international time-use surveys similarly demonstrated the close connection between unpaid care responsibilities and labor-market participation.

The difficulty is not that unpaid household activity is intrinsically impossible to measure. Time-use surveys provide information on how individuals allocate hours across paid work, unpaid domestic work, direct care, personal activities, and other forms of time use. The United Nations Economic Commission for Europe has also established an internationally agreed methodological approach for valuing unpaid household service work. Valuation can use labor-input approaches, including replacement-cost methods that estimate what equivalent services would cost if purchased in the market. Such methods do not imply that interpersonal care can be reduced entirely to a monetary price; rather, they make economically productive but nonmarket activities more visible within policy analysis.

The implications are particularly important at the local level. Municipalities, districts, counties, urban authorities, and rural development institutions make decisions regarding childcare facilities, water supply, transportation, health services, eldercare, community centers, housing, employment programs, and local infrastructure. Each of these decisions can alter the amount of unpaid labor required within households. Razavi's political-economy analysis of care conceptualized care provision through interactions among households and families, markets, the state, and community institutions—the widely used "care diamond." Local development therefore cannot be understood solely through businesses and formal public investment; it is also shaped by how care responsibilities are distributed across these institutional domains.

This study develops a framework for integrating care economy valuation into local development planning. The objective is not merely to attach a monetary figure to unpaid household labor. Instead, valuation is treated as one component of a wider planning process that links time use, accessibility of care services, social infrastructure, labor-market participation, and local development outcomes. Because



no verified local empirical dataset was provided, the numerical analysis is explicitly simulation-based. The study examines how increasing recognition and reduction of excessive unpaid care burdens might relate to women's economic participation while preserving a clear distinction between illustrative analytical evidence and observed real-world findings.

2. Objectives of the Study

2.1 To Integrate Care Economy Valuation Into Local Economic Assessment

The first objective is to establish a structured approach through which local planners can identify and value productive care activities that are poorly represented in conventional economic indicators. The UNECE's methodology demonstrates that unpaid household service work can be measured and valued systematically rather than treated as an immeasurable residual of household life. Incorporating such information can provide planners with a broader understanding of the resources required to sustain local households and labor markets.

The study therefore considers monetary valuation as complementary to physical time measurement. A local authority should know not only the estimated economic value of unpaid care but also who performs that work, how much time it requires, which households experience the greatest burden, and whether care responsibilities restrict access to employment, education, entrepreneurship, or civic participation. Monetary estimates without time-use analysis can obscure distributional inequalities, while time-use estimates without economic interpretation may be inadequately integrated into budgetary planning.

2.2 To Examine the Relationship Between Care Burden and Economic Participation

The second objective is to analyze how the intensity of unpaid care responsibilities may be associated with participation in local economic activity. OECD research has identified unequal unpaid care responsibilities as an important link between gender inequality and labor-market outcomes. Unpaid care can constrain not only whether an individual participates in paid employment but also the number of hours worked, commuting possibilities, occupational choices, job quality, and capacity to operate a business.

The present study tests this relationship through a simulated Care Burden Reduction Index and Women's Economic Participation Index. The simulation does not claim that identical numerical relationships exist in actual municipalities. Instead, it demonstrates how local planning systems could evaluate the connection empirically once reliable time-use, employment, and service-access data are available.

2.3 To Develop a Care-Sensitive Local Development Planning Framework

The third objective is to develop an integrated planning framework in which care is treated as part of local productive infrastructure. Care-sensitive planning requires more than recognition. It requires assessment of whether services and infrastructure can reduce unnecessary care burdens, redistribute responsibilities, improve the conditions of paid care workers, and expand individuals' genuine economic choices.

This approach follows the broader policy logic found in pre-2021 international research, which emphasizes recognition, reduction, and redistribution of unpaid care while also improving the quality and conditions of paid care work. UNRISD's analysis of transformative care policy similarly stresses the role of public policy in allocating services, resources, and time between caregivers and people receiving care.

3. Review of Literature

3.1 Conceptualizing the Care Economy and Its Economic Value

The economics of care challenges the assumption that economically relevant production occurs only when an explicit market payment is made. Folbre and Nelson argued that care can involve both intrinsic motivations and economic relationships, demonstrating why the distinction between care provided for love and care supplied for money is analytically more complex than conventional market models suggest. Care activities produce essential outcomes—nutrition, health, learning, safety, emotional support, household functioning, and human capability—even when no formal wage is recorded.

Razavi subsequently developed a political and social economy perspective that located care provision across households, markets, states, and community institutions. This framework is particularly relevant to local planning because deficiencies in one institutional domain frequently increase pressure on another. Limited public childcare, for example, can increase household care requirements; inadequate eldercare services can shift responsibility toward relatives; insufficient water or transport infrastructure can extend the time required to perform routine household functions. Care arrangements are consequently affected by planning decisions that may not initially be classified as "care policy."

Valuation methods developed by UNECE provide a practical bridge between conceptual recognition and economic measurement. consolidates international experience and establishes an agreed framework for measuring household service production outside conventional market accounting. One widely applicable method is replacement-cost valuation, under which time spent producing unpaid household services is valued using wage rates for comparable market services. Opportunity-cost approaches can also be considered, but their results may be strongly influenced by individual wage differences and therefore require careful interpretation.

3.2 Unpaid Care, Gender Inequality, and Labor-Market Participation

Time-use research has repeatedly documented substantial gender differences in the allocation of unpaid work. Budlender's comparative examination of care and non-care work across six countries showed how time-use statistics reveal patterns that conventional labor statistics cannot fully capture. Later global evidence consolidated by the ILO demonstrated that these differences persist across diverse economic and institutional environments. Unpaid care is therefore not a marginal household issue but a major element of total work performed within economies.

Ferrant, Pesando, and Nowacka described unpaid care as a "missing link" in explaining gender gaps in labor outcomes because unequal care responsibilities affect access to paid work and the quality of employment available. UN Women's 2019–2020 global report likewise integrated unpaid care with analysis of employment, family structures, income security, and gender equality. These contributions suggest that local employment strategies may underperform when they focus only on skills,



entrepreneurship, credit, or job creation while ignoring the time constraints generated by care responsibilities.

The relationship also operates in the opposite direction. Where affordable and accessible care services exist, individuals with significant caregiving responsibilities may acquire greater freedom to participate in employment or education. The economic benefits of care investment therefore potentially extend beyond direct service recipients. Care provision can support paid employment within the care sector while simultaneously reducing time constraints affecting unpaid caregivers. This dual role makes care services economically relevant both as employment and as enabling infrastructure.

3.3 Care-Sensitive Development Policy and Local Planning

UNRISD's research has consistently argued that care arrangements are shaped by public policy, labor markets, household structures, and social institutions. Its work on transformative care policies emphasized recognition, reduction, and redistribution of unpaid care and domestic work while drawing attention to the wages and working conditions of paid care providers. Such an approach differs from policies that merely attempt to move unpaid care into poorly compensated formal employment.

ILO research similarly emphasizes that decent care work requires simultaneous attention to unpaid caregivers and paid care workers. The care economy includes interconnected systems rather than isolated household activities. Childcare, health services, education, long-term care, domestic work, household infrastructure, transportation, and social protection collectively influence the availability and distribution of care.

The remaining planning gap concerns translation from national care-economy analysis into routine local-development decision making. National estimates may establish the scale of unpaid care, but municipalities require more spatially specific information: which neighborhoods have severe childcare shortages, where eldercare needs are concentrated, whether women travel excessive distances for water or health services, which local care occupations suffer labor shortages, and where infrastructure could reduce household time burdens. This study addresses that gap by constructing a local planning framework that integrates valuation, service mapping, and economic participation.

4. Research Methodology

4.1 Research Design and Simulation Framework

The research employs a simulation-based quantitative design. No actual survey responses, municipal datasets, household time diaries, or administrative records are represented as empirical observations. Instead, a hypothetical analytical corpus of 120 local planning units was generated to illustrate how a care-sensitive planning model could be evaluated statistically.

Four standardized variables were modeled on a scale ranging from 0 to 100: the Care Burden Reduction Index, Care Service Access Index, Local Employment Support Index, and Women's Economic Participation Index. Random variation was retained so that outcomes did not increase mechanically with any single predictor. The simulation uses a fixed random seed for reproducibility.

4.2 Measurement and Valuation Framework

The proposed empirical framework combines time-use measurement with economic valuation and service-access assessment. Time-use data are particularly important because the economic invisibility of unpaid care results partly from the absence of a market transaction rather than the absence of productive activity. Charmes' international analysis illustrates the value of time-use surveys for examining the relationship between care and labor-market activity.

The replacement-cost method is proposed as the primary monetary valuation approach because it asks what expenditure would be required to purchase comparable services in the market. UNECE provides internationally agreed methodological guidance for this type of household-service valuation. Local studies should nevertheless report both monetary values and physical hours because valuation alone may conceal who performs care work and how responsibilities are distributed.

Table 1: Proposed Measurement Framework for Care-Sensitive Local Development Planning

Variable	Operational Meaning	Suggested Data Source	Planning Application
Unpaid care time	Average hours devoted to childcare, eldercare, household care, and related activities	Time-use survey or structured time diary	Identification of household time burdens
Replacement-cost value	Estimated value of unpaid care hours using appropriate comparable wage rates	Time-use data and local wage records	Estimation of hidden productive contribution
Care Service Access Index	Accessibility, affordability, and availability of childcare, health, eldercare, disability support, and related services	Administrative records and household survey	Identification of service deficits
Care Burden Reduction Index	Extent to which infrastructure and services reduce excessive unpaid care requirements	Composite planning indicator	Monitoring of care-sensitive interventions
Women's Economic Participation Index	Participation in employment, enterprise activity, training, or other productive opportunities	Labor and enterprise statistics	Evaluation of inclusive economic outcomes

The table illustrates why care valuation should not be reduced to a single monetary estimate. A comprehensive local system requires both an economic valuation measure and indicators that show where excessive care burdens arise. This enables planners to distinguish between acknowledging the economic contribution of existing unpaid care and designing policies capable of changing inequitable or inefficient care arrangements.



4.3 Analytical Procedure

The 120 simulated planning units were classified into four categories according to their Care Burden Reduction Index: low recognition/reduction, emerging care-sensitive planning, established care-sensitive planning, and integrated care-sensitive planning. Descriptive averages were calculated for each group.

Pearson correlation was used as a descriptive measure of association between care-burden reduction and women's economic participation. Because the observations are simulated, conventional statistical significance should not be interpreted in the same manner as an empirical survey. The emphasis is on demonstrating analytical relationships that future researchers can test using real municipal, district, or household data.

5. Analysis

5.1 Comparative Outcomes Across Care-Sensitive Planning Stages

The simulation reveals a progressive relationship between stronger care-burden reduction and higher women's economic participation. The 17 planning units in the low recognition/reduction category recorded a mean Care Burden Reduction Index of 16.6 and a mean Women's Economic Participation Index of 51.2. In comparison, the eight integrated care-sensitive planning units recorded values of 73.3 and 71.3 respectively.

The pattern should not be interpreted as evidence that care policy alone determines women's economic participation. The simulation deliberately incorporates access to services, employment support, and random variation because labor outcomes depend on multiple institutional and household conditions. Its significance lies in illustrating why care constraints should be included among the variables examined in local economic development assessments.

Table 2: Simulated Local Development Outcomes by Care-Sensitive Planning Stage

Planning Stage	Simulated Units	Mean Care Burden Reduction	Mean Care Service Access	Mean Local Employment Support	Mean Women's Economic Participation
Low recognition/reduction	17	16.6	50.9	57.3	51.2
Emerging care-sensitive	41	37.0	55.0	51.4	58.0
Established care-sensitive	54	53.1	58.0	60.1	66.3
Integrated care-sensitive	8	73.3	51.8	56.7	71.3



Source/Note: Author-generated simulated data. Values are illustrative and do not represent actual municipalities or respondents.

The movement from 51.2 to 71.3 across the simulated planning categories represents a difference of 20.1 index points. The result illustrates how local economic assessments can change when time constraints are treated as development variables rather than private household circumstances. Care Service Access does not increase perfectly across all categories, which also demonstrates that the care burden can be affected by multiple factors, including infrastructure, household composition, social norms, and the distribution of responsibilities.

5.2 Economic Interpretation of Care Valuation

Monetary valuation can reveal productive activity that conventional local economic statistics may overlook. A replacement-cost estimate converts hours of unpaid household service work into an approximate value based on comparable market labor. UNECE's valuation guidance provides a methodological foundation for such accounting. The resulting estimate can be reported through a local household-production satellite account rather than incorporated uncritically into conventional measures of local output.

Such valuation can materially change policy interpretation. If a locality appears to have low formal employment but households perform very large amounts of unpaid childcare, eldercare, food preparation, and household support, an employment-only analysis may interpret nonparticipation simply as unused labor capacity. A care-sensitive interpretation asks whether people actually possess discretionary time to undertake additional paid activity. OECD analysis of unpaid care and labor outcomes supports the importance of this connection.

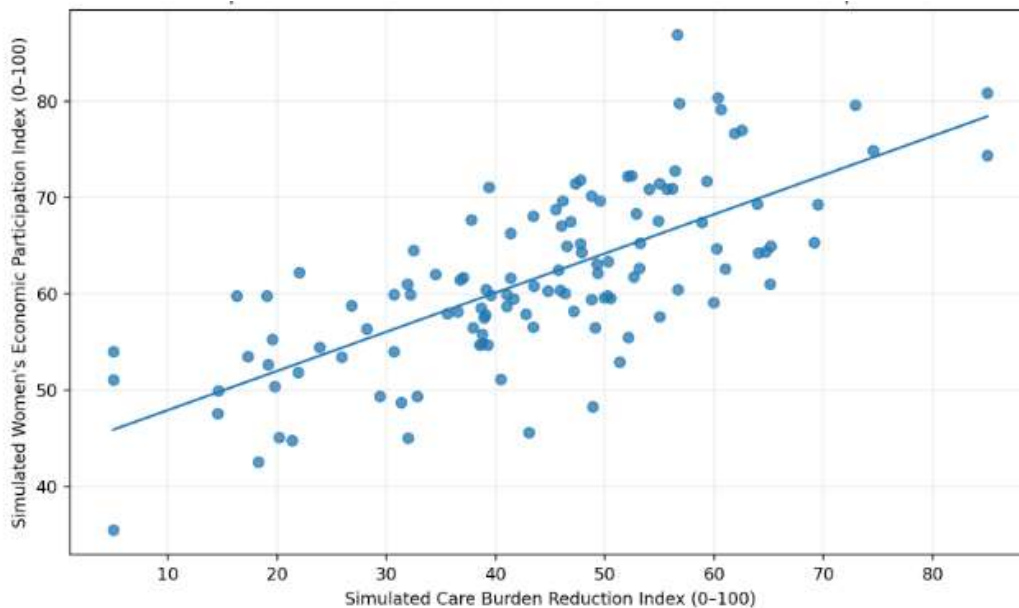
Economic valuation should nevertheless be applied carefully. Assigning a market-equivalent value does not imply that personal relationships or emotional dimensions of care are fully represented by wages. Valuation is principally an instrument for correcting analytical invisibility and improving policy comparison. It should therefore accompany, rather than replace, indicators of time, quality, well-being, accessibility, and distribution.

5.3 Care Burden Reduction and Women's Economic Participation

Across the 120 modeled local planning units, the Care Burden Reduction Index and Women's Economic Participation Index generated a simulated Pearson correlation of $r = 0.717$. This represents a comparatively strong positive relationship within the constructed analytical model.

The relationship is theoretically consistent with evidence showing that unpaid care responsibilities influence women's labor-market opportunities. Charmes' time-use analysis and the OECD's work on unpaid care both emphasize links between care responsibilities and participation in paid work. The present simulation does not independently validate these relationships but demonstrates how they could be incorporated into local development analysis.

Graph 1: Care Burden Reduction and Women's Economic Participation



The scatter distribution shows a general upward relationship while retaining substantial dispersion around the fitted line. This dispersion is analytically important because care-burden reduction is not the only factor shaping economic participation. Employment availability, wages, education, transportation, social norms, health, household structure, and local economic conditions may all affect observed outcomes.

The principal analytical finding is therefore not that a specific reduction in unpaid care produces a predetermined increase in employment. Instead, the study demonstrates that care time should be incorporated into the explanatory architecture of local economic development. Ignoring care can cause planners to misinterpret constraints on labor supply and overlook infrastructure investments capable of expanding economic participation.

6. Discussion

6.1 Reframing Care as Local Productive Infrastructure

The findings support a conceptual shift from viewing care exclusively as a household or welfare matter toward treating it as a component of local productive infrastructure. Roads, electricity, digital networks, water systems, and business facilities are widely recognized because they influence productive capacity. Care services perform an analogous enabling role by sustaining people and affecting whether caregivers can participate in paid work, education, entrepreneurship, and community activities. The ILO's care-economy research explicitly connects care arrangements with the wider world of work.

This perspective does not diminish the interpersonal or social value of care. Rather, it recognizes that the economy depends on activities through which people are fed, educated, supported, and maintained across the life course. Razavi's care-diamond framework is particularly helpful because it prevents local governments from assuming that households alone should absorb care responsibilities. Care provision can be organized through families, markets, public institutions, and community



organizations, with different distributions producing different consequences for access, affordability, quality, and equality.

Local planning can therefore incorporate a care infrastructure test when evaluating investment. A proposed water system may reduce household time devoted to water collection. Public transportation may shorten journeys to schools, health facilities, or care centers. Accessible childcare may expand parents' employment choices. Community eldercare may reduce intensive household supervision requirements. The economic appraisal of such projects becomes more complete when time savings and care effects are explicitly considered.

6.2 Valuation as a Planning Instrument Rather Than a Price on Care

The study also highlights the need to distinguish between valuing care and commodifying care. Monetary valuation is useful because budgetary systems and economic-planning institutions frequently respond more readily to activities expressed in financial terms. If unpaid work is recorded only as an informal household responsibility, its contribution may disappear from cost-benefit assessments. The UNECE framework provides a disciplined means of estimating household-service value without suggesting that household care must necessarily become marketized.

Replacement-cost valuation can be particularly useful for local planning because the required information is relatively intuitive: time spent on specified unpaid activities and an appropriate wage for comparable services. Nevertheless, wage selection substantially affects the final valuation. Using a generalist domestic-worker wage can produce a different value from using specialist occupational wages for childcare, nursing assistance, cooking, transportation, or household management. Transparent assumptions are therefore essential.

Moreover, low prevailing wages in care occupations can lead to low estimates even where the social importance of care is substantial. The valuation exercise must not reproduce the existing undervaluation of paid care labor. This concern reinforces the need for multidimensional indicators. Monetary values should be accompanied by hours, service coverage, caregiver characteristics, quality measures, and labor conditions rather than becoming the sole representation of the care economy.

6.3 Implications for Inclusive Local Development Planning

A care-sensitive development plan can change the sequencing of local economic policy. Traditional programs may begin with job creation and then ask why particular populations do not enter available employment. A care-sensitive approach begins earlier by asking whether residents possess the time, transportation, affordable services, and household support required to accept those opportunities. This approach is consistent with research demonstrating the relationship between unpaid care and labor-market outcomes.

The same logic applies to entrepreneurship. Enterprise-support programs that provide credit, skills, or market access may generate limited benefits for caregivers who cannot secure reliable childcare or who face intensive eldercare responsibilities. Local enterprise policy could therefore coordinate business development with care-service provision instead of treating the two as unrelated portfolios. This does not mean that every care responsibility should be publicly provided; it means that its economic consequences should be visible during policy design.



There is also an employment dimension. Investment in quality care services can simultaneously reduce unpaid household burdens and generate paid local employment. The developmental objective, however, should not be merely to convert unpaid work into precarious low-wage employment. Care-sensitive planning should attend to quality, workforce skills, working conditions, affordability, accessibility, and the needs of care recipients. UNRISD and ILO research before 2021 both emphasized the importance of connecting care provision with decent conditions for paid care workers.

7. Conclusion

Care work is indispensable to the functioning of local economies, yet a considerable portion of it remains weakly represented in conventional development indicators because it is performed outside formal market transactions. This omission has practical consequences. When unpaid care time is invisible, local authorities may underestimate productive activity within households, misinterpret constraints on labor-force participation, overlook deficiencies in social infrastructure, and design employment or entrepreneurship initiatives without considering the time required to perform essential care responsibilities.

The present study developed a simulation-based framework for incorporating care economy valuation into local development planning. It combined time-use recognition, replacement-cost valuation, care-service accessibility, care-burden reduction, employment support, and women's economic participation. The simulated analysis produced a positive correlation of $r = 0.717$ between care-burden reduction and women's economic participation. Average simulated participation increased from 51.2 in low recognition/reduction planning contexts to 71.3 under integrated care-sensitive planning. These figures are analytical illustrations rather than empirical estimates and should not be generalized to actual localities without primary evidence.

The study's main contribution is to position valuation as part of a broader care-sensitive local development architecture. Monetary estimates can improve the visibility of unpaid productive activity, but they are insufficient when used alone. Effective planning also requires data on hours of care, gender and household distribution, service accessibility, infrastructure constraints, paid care employment, and the quality of care provision. Satellite accounting, local time-use surveys, administrative records, and spatial service mapping can therefore be combined to produce a richer evidence base.

There are several limitations. The numerical evidence is simulated, causal relationships are not estimated from real observations, and the model does not capture every determinant of labor participation. Monetary valuation also depends strongly on the wage rate and methodology selected. Future empirical research should apply the framework to actual municipalities or districts using representative time-use data, verified wage schedules, care-service inventories, demographic information, and local labor-market indicators. Longitudinal evaluation would be particularly useful for testing whether investments in childcare, eldercare, water, transportation, health, or other forms of social infrastructure produce measurable reductions in unpaid care burdens over time.

The overarching conclusion is that care should be visible wherever local development is planned. Recognizing unpaid care does not require placing a market price on every human relationship. It requires acknowledging that local economies rely on large quantities of productive time that conventional accounts can overlook. Once this work becomes visible, local authorities can make more informed



decisions about infrastructure, employment, public services, gender equality, social protection, and inclusive economic development.

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