

# Gender and Care. Transforming rights and policies in the EU.

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We Frame Seminars

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# Care agenda

Care **and the private sphere**

Care **and the public sphere**

Care **and public policies**

Care **and rights**

**Do we have a right to be cared by  
someone else?**

**Do we have a right to care?**

**The value of care**

# Care impacts on politics, institutions, economy and society

## What does care mean?

preserving

understanding

empathising

responsability and compromise

**Relations** explain care better than thinking about isolated individuals

**Distribution of care**

**Thesis to be developed:**

**Introducing care involves  
reviewing the legal framework**

Individualism

Public-private distinction

Full autonomy

**Towards the transformation better than  
adaptation of legal thinking**

**After the Covid pandemic, the world realized about the importance of care work**

## **2022. The European care strategy**

**A coordinated plan to address care challenges**

**The strategy intends to provide a common direction for member states**

# EUROPEAN CARE STRATEGY

**two main areas**  
at the centre  
of the EU  
strategy

**Early childhood**  
education and care

High-quality **long-term**  
care

# Early childhood Education and care

## Targets:

- \***Remove disincentives to women** joining the labour market
- \*pay particular attention to **VULNERABLE SITUATIONS**  
Children at risk of poverty, children with disabilities, Roma children, children with migrant background, refugee.
- \*provide care for a **sufficient number of hours** per week
- \*enable parents, particularly **mothers**, to engage in paid work

# Long-term care

## Targets:

- \*according to the *Charter of Fundamental Rights*: **the rights of older people to lead a life of dignity and Independence and to participate in social and cultural life**
- \*provide **home care and community-based** services  
(transition from institutional care)
- \*upskilling opportunities in **the care sector**
- \*supporting **informal carers**

# “towards person-centred integrated care”

## Reforms

policy reforms (international cooperation)

digital transition (telecare, telehealth, robotics)

## Investments

National, regional, local level

# Strategies in the labour sector

- \*Improving **working conditions** and **make care jobs more attractive**
- \*Create more jobs and **increasing wages**
- \*Recruiting **more men** to reduce segregation and counter stereotypes

# Difficult working conditions in the care sector

\*physical and psychological **health risks**

\*challenging social behaviour: **violence, bullying and sexual harassment** are frequent problems, in particular for long-term care workers

\*atypical contracts, **limited access to social protection**

**Many care workers are women and migrant**

“Care workers are essential to meet society’s care needs, but **their work is undervalued**”

p. 12/23

**“Policies to formalise  
informal care...can benefit  
informal carers and their  
dependents and help  
recognise and value  
better care giving”**

“investments should take place... that take into account **the social value of care services** and the need to uphold the **fundamental rights of persons in need of care**”

p. 19/23

The strong differences in time devoted to care by women and men “can only be tackled by taking a **transformative approach that aims to revalue care work**”

# The **value of care** in constitutional systems

- \*Is it possible to link care to fundamental rights?
- \* Human rights can be understood as social purposes to be implemented by the institutions
- \*Are the constitutions receptive with care?

# ADVANCES IN FEMINIST CONSTITUTIONALISM

Tribe. The silencies of the Constitution

Rights

Participation

Institutional reforms

Case by case RBG

# **persistence of constitutional and institutional inequalities**

Jaramillo: material inequality

Pou: inflation in normativity

persistent violence against women

constitutional corset

public-private

decontextualized individualism

full autonomy

## **Transition towards transformative constitutionalism**

**Mackinnon:** “Constitutionalism is too narrow and formalist a container to address the problems posed by feminism”

Beyond the corset of liberal politics and institutions:

- relational perspective
- the value of care

# Proposal (I)

## 1. **Relational perspective**

Autonomy-vulnerability

Independence-dependence-interdependence

From the perspective of the isolated individual towards  
relational approach

# Proposal (II)

## The value of care

Gilligan (*In a different voice* 1982)

**\*Women's approach based on relations, context, interdependence**

**\*Focus on family life, intimacy**

**\*Vulnerability hidden behind women's care work**

**The public citizen and the private caregiver model**

# 1. The market of care

\*nowadays care work has entered into the market

**Transition from the family-affective sphere to the contractual-labour sphere**

\*Sandra Fredman: deficit in valuing care as an object of labour contracting

**\*Need to redefine labour relations**

# Care management(i)

**Different facets of caregiving:**

**+those who need care,**

**+those who are primarily responsible for care, primarily women**

**+paid caregivers**

**Alliances emerge among women caregivers (Kittay, secondary dependency)**

**A chain that links vulnerability, dependency, care, and caregivers, who are often migrants and racialized.**

# Care management(ii)

**Kittay: The uniqueness of care, caregivers who care, with empathy, observation, emotional intelligence**

**How is care managed in liberal constitutionalism?**

**Parental leaves**

**Private employment**

**Public services**

## 2. Parental leaves

- biological approach
- Difficulties of universalization
- Inclusion of men. The case of Spain
- Models in tension:** expansion vs. female predominance

**How to manage care?**

**Trough the market**

**Trough public policies**

**Common goods management**

# **Reproductive commons: an alternative model**

**Reproductive commons as social practices, processes and relationships essential for human reproduction (Di Masso Tarditi et al.)**

- \*departure from domestic, family and feminized scenarios**
- \*collective and shared resolution of care management**
- \*decommodification**
- \*self-management strategies**

# **Reproductive commons: a tertium genus?**

**+To socialize domestic work (Federici)**

**+Beyond redistribution (Ezquerro)**

**+To democratize care work and abandon its historical configuration (C. Vega)**

# How then to approach care management?

**I have explored**

**\*Care market**

**\*Parental leaves legislation**

**\*Common goods management**

**Feminist constitutionalism has  
explored:  
care rights  
care policies**

**but it's not enough**

**The problem is not the available resources but the structure and values that support them.**

**Nedelsky: To imagine that even available and optimally funded day care centers could solve these problems greatly underestimates their extent.**

## Care as a constitutional value

Before tackling management, the value of care must be consolidated in the political and legal system, as a value on a par with other constitutional values.

Care must be understood as something worthy, on a par with freedom or equality.

**Nedelsky: There is a link between rights, respect, economic success, and the gender division of domestic labour**

**It is necessary to rethink the constitutional structure and overcome the public-private division, while proposing an original reflection on the value of caring.**

**Only after this reflection takes place may care management be addressed within an axiological framework that incorporates it into politics, regulation and cooperation.**

# Thank you!

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