The ongoing COVID-19 pandemic has revealed the dependence of our societies on systems of care and caregiving to survive and thrive. This support system, however, has been mostly unpaid if not totally unrecognized for far too long. Its resulting negative effects have disproportionately affected women and girls around the world, especially in the Global South.

Oxfam has actively worked on context-specific evidence on care work by engaging with communities, governments, the private sector, and civil society through their Women’s Economic Empowerment and Care (WE-Care) Program since 2013. This research is part of Oxfam’s ongoing reflection and work on care that examines conversations and debates on care infrastructure and care infrastructure investments in the Philippines. The study also discusses the connection between care infrastructure investments and macro-level socioeconomic policies and civil society initiatives. Through four case stories, the research outlines examples of care infrastructure (non)investments and its influence to women’s economic empowerment.

To examine (non)investments in care infrastructure is to understand how key actors of the society and community members understand and pay attention to it. Conscientization is vital in this regard since it opens-up pathways to transform our consciousness concerning care. Continuously educating the population about care and why we need to value care can define clear demands surrounding care infrastructure investments. Otherwise, the public-private divide on care provision, and the deeply-ingrained binary perspectives on sex and gender roles on care will continue because we are socio-culturally conditioned to accept it.
In combination with the desk review, the study conducted key informant interviews to build case stories demonstrating how investments in care infrastructure have affected women’s lives and livelihood across four types of pre-selected communities: (1) WE-Care program area, (2) non-WE-Care program area, (3) urban community, and (4) rural community.

**KEY FINDINGS**

**WE-Care areas**
Care infrastructure investments in place due to Oxfam’s initiative show how such investments address women’s needs and potentially contribute to women’s economic empowerment.

**Non-WE-Care areas**
Limited care infrastructure investments and only a few of such focus on women’s needs and their economic empowerment.

**Urban and rural communities** (both non-WE-Care areas)
The understanding of respondents of what care infrastructure investments entail to women’s economic empowerment is also limited. They were unable to perceive if care infrastructure investments have specific impacts on women’s needs and their economic empowerment because they view such investments supporting the needs of the general population and not just of women.

**KEY INSIGHTS**

a. In the Philippines, national and local policy conversations about care infrastructure is limited. Care infrastructure is always understood in the context physical infrastructures, either buildings or facilities.

b. Civil society organizations and women’s rights movements have a clearer articulation on the links between the issue of care and women’s economic empowerment. CSOs and WROs recognize the value of women’s unpaid care work and its vital role to economic development, as women remain to be absorbers of care related tasks needed to fuel the economic system.

c. The appreciation, understanding, and explicit articulation on the role of care for the country’s well-being has been lacking in public policy, although care and care-supporting policies exist. This situation is also reinforced by the assumed public-private divide, wherein care is situated in the private so it is rarely given attention in the public, political sphere.

d. The current understanding of care work in general, and of unpaid care work in particular, is closely linked to the expectation that care work is a woman’s job. This is further reinforced by existing socio-cultural conditioning that providing care is the natural role of women and girls.

e. The current care infrastructure investments in the country are a by-product of other ongoing policies or programs by the civil society, the government, and the private sector.

f. Existing care infrastructure investments, despite being a tangential outcome of government policies and programs, have the potential improve the lives of women in the community.

g. Lastly, based on current investments and articulated demands on care, the study identifies five broad types of care infrastructure investments in the Philippines: physical care infrastructure, care services, care policies and regulations, employment-related care provisions, and norm-reorienting investments.

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Scan to access full report written by Joshua Angelo E. Bata and Mariel S. Quiogue of Field Work PH for Oxfam Pilipinas.

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