

Care provision through cooperatives and the wider social and solidarity economy

A Global South Perspective
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▶ A growing global care crisis

Demand for care is rising

- ▶ In 2015, **2.1 billion people** required care ⇒ 2.3 billion by 2030, driven by rising numbers of children and older persons

Women carry the burden

- ▶ In 2023, **748 million people** outside the labour force due to care responsibilities
- ▶ **95%** are women

Care work is undervalued

- ▶ low wages, long hours, and exposure to occupational risks like violence and harassment.
- ▶ Women make up **65 per cent** of the global paid care workforce

Investing in a comprehensive package of care policies and services could generate up to 299 million jobs by 2035



► Why this matters in the Global South

Structural gaps

- Weak public care systems & underinvestment in infrastructure

High informality

- Care work is largely informal with limited social protection

Gender Inequality

- Women carry unpaid care burden, limiting labour force participation

A key strength

- Strong traditions of solidarity and collective action



▶ The SSE: A People-Centered Approach to Care

The Social and Solidarity Economy

- ▶ Voluntary cooperation
- ▶ Democratic and participatory governance
- ▶ Mutual aid
- ▶ Autonomy and independence
- ▶ Primacy of people and social purpose over capital

SSE includes **cooperatives, associations, mutual societies, foundations, social enterprises, self-help groups** and other entities operating in accordance with the values and principles of the SSE

Global recognition of SSE and Care

ILO Resolution concerning decent work and the social and solidarity economy (2022)

Called for an **inclusive, integrated, and gender-responsive approach to promoting the SSE**, particularly for groups in vulnerable situations, while recognizing the value of care and unpaid work

ILO Resolution concerning decent work and the care economy (2024)

Recognized the role of **cooperatives and other SSE entities**, in the provision of **quality care**, investment in **sustainable and modern care infrastructure**, and provision of **training and employment opportunities**.

Cooperatives: Achieving decent work in the care economy

Community-based care

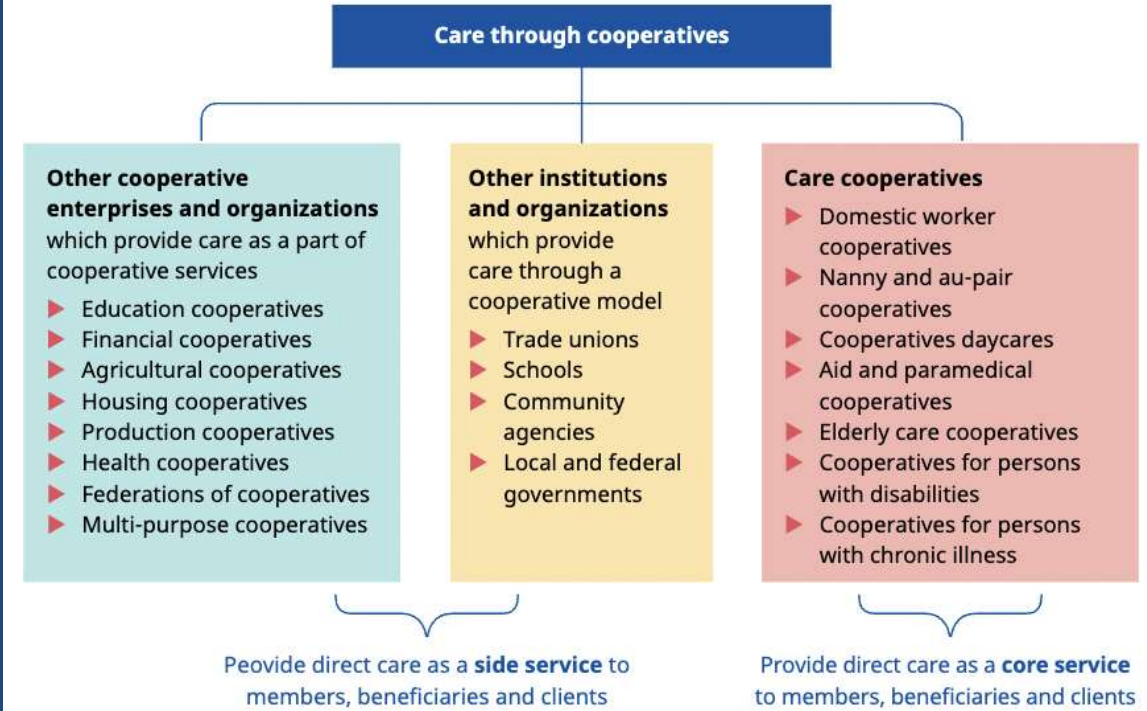
- Locally-tailored, bottom-up solutions
- Participatory and inclusive decision-making
- Interdependence vs. dependence

Quality and affordability

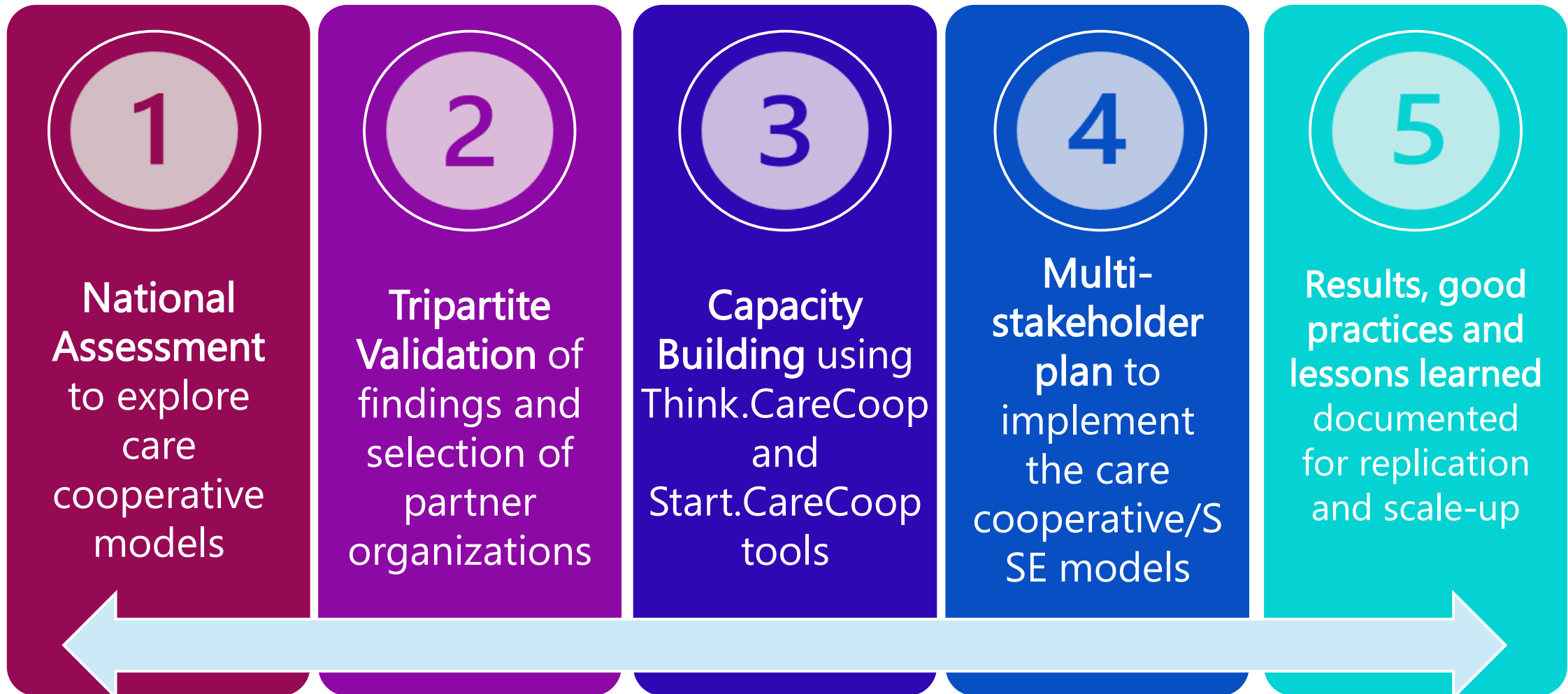
- Lower cost compared to the private sector
- Better quality compared to the public sector
- More sustainable compared to non-profit sector

Decent Work Outcomes

- Stronger bargaining power
- Better wages and working conditions
- Increased formal employment and protection
- Professionalization of care work



A structured approach to promoting care cooperatives





Think.Care.COOP

One-day orientation tool designed to help understand the cooperative model in the care economy to make an informed decision on its suitability as a business option for providing care solutions



Start.Care.COOP

Five-day training which guides participants through the process of starting a care cooperative by helping them defining their business idea and developing a business plan



Country Spotlight - COLOMBIA

JOSA Women Peacebuilders organization

- Network of 250 indigenous women weavers focusing on developing community-based childcare services in their region: **Renovating a community care center for children**

ASOREDIPAR midwives association

- Professionalizing traditional midwifery: Established a **dedicated midwifery space for 250 women** and explored the **creation of a midwives' union**.

COLOMBIA: Multi-stakeholder approach

National Government

- National Women's Fund Program promoted by the Ministry of Equity and Equality.
- SENA (National Learning Service)
- ICBF ((Colombian Institute for Family Welfare)
- DNP (National Planning Department)

Local key stakeholders

- Indigenous authorities
- Local municipalities and regional governments
- Private Sector
- Chocó Care Alliance (UN Agencies and governments)

Other partnerships

- Trade Unions - ISP
- International Cooperation: FESCOL (Friedrich Ebert Stiftung Colombia) CARE
- Intersectoral Working Group on the Care Economy and Feminist Economy Coalition



Country Spotlight – PALESTINE

•Cooperative registration is in progress, with official approval expected by June 2025.

Cooperative board is formed

Nursery licensing is ongoing; documents are ready and renovation works to meet Ministry of Social Development standards are underway

Website (www.kidsspace.ps) is live, providing information and registration

Awareness campaigns are active

Capacity-building

Staff hiring and onboarding have not yet started

PALESTINE: Multi-stakeholder Approach

Diverse Membership & Core Group of Member-Owners:

- Working women and families from sectors like electricity, Nablus governorate municipality, and agriculture/food unions.
- Includes employees from the electricity company, Nablus Municipality, PGFTU, and agriculture/food industries.

Support Organizations:

- PGFTU provides childcare facility for free, while the ILO will contribute initial operational support, start-up costs, technical assistance, and capacity-building to pilot the model.

Founders' Interest:

- Confirmed by trade unions and PGFTU representatives, focusing on improving working conditions, especially for women.



Enabling factors for successful care cooperative models

Stakeholders	Responsibility / Supportive Actions
Coop / SSE Movements	<ul style="list-style-type: none"> • Peer support and resource sharing through federations • Secondary organizations provide technical support and enable new cooperatives • Collaboration across cooperatives reduces costs and strengthens capacity
Care Sector Providers	<ul style="list-style-type: none"> • Awareness and training on cooperative models among care professionals
Government including local govs	<ul style="list-style-type: none"> • Supportive legislation • Access to funding and resources • National social protection schemes
International Organizations / Partners	<ul style="list-style-type: none"> • Provide access to knowledge, resources, and funding • Facilitate partnerships and contracts • Promote good practices and share global lessons

Conclusion

- **SSE entities**, including care cooperatives, are not complementary—they **are essential, and inclusive, solutions to the global care crisis**
- They offer **locally driven, people-centered models** that are gender-responsive, equitable, and sustainable—especially where gaps public and private systems exist.
- The experience from Colombia and Palestine demonstrates that:
 - Care solutions must be **co-created with communities**
 - **State investment, legal support, and multistakeholder coordination** are key
 - SSE models can **formalize care work, protect rights, and redistribute unpaid care responsibilities**