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Incorporating Men into Caregiving Tasks

Dismantling Barriers and Reframing Roles in Latin America and the Caribbean

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→ Incorporating Men into Caregiving Tasks: Dismantling Barriers and Reframing Roles in Latin America and the Caribbean

→ The challenge: Male participation in care

Deeply rooted cultural expectations in Latin American and the Caribbean (LAC) society sustain that women should be responsible for the majority of domestic tasks and care. This social perception leads to a skewed distribution of chores – not only in the home but also in the work environment as a whole.

In the family sphere, it is observed that men spend considerably less time than women doing domestic tasks and unpaid care. While, on average, men dedicate about 11 hours per week to these activities, women allocate about 22 hours. The gap gets even wider in homes with children under 5 years, where the difference in time spent in care can add up to 33 hours per week (CEPAL, 2022).

This trend continues throughout the life cycle: women are the main care providers for aging adults in the region. Time use surveys reveal that men represent a minority share of working-age care providers (15–64 years), with 37% in Mexico, 30% in Chile, 22% in Costa Rica, and 16% in Colombia. In addition, their contribution

to hours of prolonged care for elderly adults is significantly less.¹¹ In Costa Rica, for example, men are involved in only 12% of the unpaid prolonged care hours, while in Mexico, this figure rises to 28%. In Colombia and Chile, men's contributions reach 16% and 14%, respectively (Stampini et al., 2020).

In the labor market, the gender gap in labor force participation increases in families with young children, reaching a difference of up to 40 percentage points between men and women. This difference decreases to 28 percentage points in homes without children or where children are over 18 years old (IDB-SIMS, 2023). Regional household surveys show that 78% of women outside of the workforce attribute their non-participation to the weighty demands of their domestic care duties, as compared with only 13% of men (IDB-SIMS, 2023).

The marked gender segregation in the labor market in the LAC region is evident in the limited representation of men in caregiving-related sectors, including education, health, and domestic services. Barely 6% of men are employed in these fields, compared with almost 30% of women (Bustelo, Suaya and Viollaz, 2019). Likewise, labor statistics in countries such as Brazil, Uruguay, Ecuador, Costa Rica, and Chile show that only 12% of paid caregivers for elderly adults are men (Fabiani, 2023).

The region needs policies that actively promote men's participation in care roles both inside and outside of the home. These policies are essential not only to respond to the growing demand for care -- which is projected to triple over the next 30 years due to the growing population of elderly adults (Aranco et al., 2022) -- but also to set the foundation for more inclusive and equitable societies. Equitable caregiving is vital as it supports child development by exposing them to a variety of role models and caregiving styles (Lamb, 2010). It also contributes to a more balanced distribution of household tasks, leading to stress reduction and overall improvement in family health (Craig & Mullan, 2011; Bianchi et al., 2006).



1. In Latin America and the Caribbean, in 2015 there were approximately 8 million adults aged 60 and older living in conditions of dependency on caregivers; that is, they had difficulty carrying out basic daily activities such as getting dressed, bathing, and feeding themselves. The statistic is expected to rise to at least 27 million by 2050 (Aranco et al., 2018). People in conditions of dependency cannot be without the help of others, which involves long-term care services.

Policies are needed to promote male involvement in caregiving roles, both within the home and the workplace. This is crucial for addressing the growing demand for care and laying the groundwork for more inclusive and equitable societies

This document provides a comprehensive review of rigorous academic studies on the subject and examines specific cases where research is needed. In particular, it is focused on discerning the efficacy of different public policies to incentivize men's participation in care work, both in the home and professionally, underscoring the urgent need for a critical approach to this area through rigorous evaluations and detailed research.





What obstacles restrict male participation in caregiving?

The limited presence of men in care and related jobs is not random but rather the result of a complex set of factors. Below, we will explore some of these barriers, although it is important to recognize that, in practice, these variables are interrelated. Public policies should address all these barriers together to bring about real social change, as modifying only one aspect is unlikely to get men to become more involved in care.

First, social norms play a decisive role in molding expectations about the masculine role in care.

The conventions of gender, both descriptive (what is traditionally expected from men and women) and prescriptive (how they supposedly should act), are determinants in the distribution of care responsibilities (Bertrand, Kamenica, and Pan, 2015; Okin, 2015). Aligned with global trends, data from Latin America suggests that these norms and perceptions related to gender roles have persisted over time (Williams, Westera, and Fildes, 2019; Araujo, Duryea, and Etcheverry, 2022). At least half of the regional population² shares the belief that preschool-aged children suffer if their mothers work (EMV, 2018), and 40% believe that a woman should work only if her partner does

not contribute sufficient income (Araujo, Duryea, and Etcheverry, 2022).

The media plays a role in perpetuating stereotypes by depicting care professions as typically female roles (Weaver, Borkowski, and Whitman, 2008). Such representation reinforces gender-based segregation in the labor market. For example, the stereotypes of nursing as a career “for women” discourage many men from considering it a professional option (Zamanzadeh et al., 2013). Men in nursing often feel isolated due to their minority status and crave more masculine role models in their education and professional practice. This skewed situation contributes to a higher attrition rate in this career among men compared with their female colleagues (Williams, Westera, and Fildes, 2019; Zamanzadeh et al., 2013). In the workplace, stereotypes of masculinity can make men feel uncomfortable practicing nursing, since they feel that their masculine identity is challenged and they fear the social stigma (Zamanzadeh et al., 2013). To prevent these conflicts, many men opt for technical or administrative positions in the health sector, thus perpetuating gender-based occupation-

2. This percentage is higher among women than men (57% vs. 54%).

al segregation even in fields directly associated with care (Zamanzadeh et al., 2013; Evans, 2002).

Second, the disparity in the recognition assigned to male-dominated occupations compared with female-dominated ones also sheds light on the limited presence of men in the field of care. This phenomenon is not solely rooted in social norms but is also intertwined with factors such as prestige, responsibility, work conditions, and the social valuation of these occupations. Professions with less male representation are often considered to have lower status compared to those where women are in the minority (Croft, Schmader and Block 2015; Ridgeway and Correll 2004). On the other hand, a trend has been observed to more purposefully promote

changes in male-dominated careers, based on the assumption that men have less interest in care roles and that women face discriminatory barriers when entering and advancing in male-dominated fields (Block et al., 2019).

Finally, economic aspects also play a crucial role in limiting men's participation in care: wages in this sector tend to be low, which can be a demotivating factor for men in considering these careers (Block et al., 2019).

The rest of the document will examine the effectiveness of policies to break down the barriers that hinder men's participation in care, both domestically and professionally.



The limited presence of men in caregiving and related jobs stems from a complex network of factors rooted in social norms. To promote greater male involvement in caregiving, it is crucial for public policies to address these barriers collectively, as modifying a single aspect may not be sufficient to encourage greater male engagement in caregiving

→ Policies to empower men's contribution to care tasks within the home

The involvement of men in domestic and care work can be stimulated through effective public policies.

Paternity and paternal leave programs are designed to promote the active participation of fathers, opening their availability to get involved in these essential tasks. Availability of care services for preschool- and school-aged children not only can free up time for the caregivers but can also enable a more equitable reassignment of responsibilities between mothers and fathers. Flexible work is another pillar that can facilitate a more equal division of care labor in the home. In addition, programs focused on fathers seek to cultivate a more egalitarian mentality in terms of gender, incentivizing them a greater involvement in care.

More in-depth studies are needed to fully understand the efficacy of these initiatives and their optimal implementation. Despite the existence of policies and interventions aimed at promoting men's participation in care, data showing their success are still limited. Available studies tend to focus more on how these interventions benefit child development or mothers' labor outcomes, leaving a gap in our knowledge about the direct impact on the participation of fathers in care tasks.

→ Paternity and parental leaves: transforming the participation of fathers

Paternity and paternal leaves, depending on their design, can serve as incentives for fathers to engage more actively in care tasks.³ However, these are rare in the LAC region compared to developed countries. In the LAC region, leaves are focused mainly on mothers (OECD, 2021; Addati et al., 2022), and the existing paternity leaves are generally shorter than the maternity leaves (see Box 1). Only 16 countries in the region offer paid paternity leave, and in six of them, the duration is three days or less. Nevertheless, the last decade has shown a progressive change: Bolivia, Mexico, Nicaragua, and Panama have introduced paternity leaves, and Paraguay, Peru, and Uruguay have extended the duration of these leaves.



3. Paid leave programs allow working mothers and fathers to spend more time caring for their children without risking the security of their job and income. Maternity leave enables mothers to be temporarily absent from their job after the birth of their baby in order to care for their own health and of the baby, with the guarantee of being able to return to their position of employment. Paternity leave, for its part, provides fathers with a generally shorter period of time during which their job position remains secure. Parental leave, which can be divided between the father and the mother, is available after the maternity leave is over.



BOX 1. PATERNITY AND PARENTAL LEAVES IN THE LAC REGION

In Latin America and the Caribbean, only 16 countries have paid paternity leave, which tends to be a very short period of time. In six LAC countries, the leave is three days or less. In contrast, maternity leaves are much more common and also longer: 26 countries offer paid maternity leave for an average length of 14 weeks. This last decade has seen an upward trend in adoption and expansion of paternity leaves. Bolivia, Mexico, Nicaragua and Panama have introduced paternity leaves. Paraguay, Peru and Uruguay have increased the number of days of leave time. However, there are also cases such as Mexico where the length of time has been reduced from ten to five days (Hawley and Carnes, 2021).

Only five LAC countries have implemented a parental leave program (Chile, Cuba, Colombia, Ecuador, and Uruguay). Chile established 12-week paid parental leave in 2011, allowing the mother, after the first six weeks, to transfer half of the time to the father. In 2013, Uruguay introduced a partial and transferable parental leave to care for infants under six months. In 2021, Colombia implemented a 12-week paid parental leave, with the option to transfer six weeks to the father. Cuba offers a 52-week parental leave for either parent, while Ecuador offers a nonpaid 39-week parental leave.

The evidence, although limited in the region, suggests that paternity leaves have a positive impact on the participation of fathers in the care of their children. For example, in Ecuador, the implementation of short paid paternity leave resulted in a 20% increase in the time that fathers spend caring for their children (Etcheverry, 2020). Experiences in developed countries corroborate this trend: paternity leaves that are exclusively for fathers (non-transferable to mothers) promote greater involvement of fathers (Farré and González, 2019; González and Zoabi, 2021).

Developed countries have tried quotas for fathers in parental leaves, with successful results in both the fathers' participation in child care and in domestic chores. In Norway, this measure has increased fathers' participation in certain household chores such as laundry (Kotsadam and Finseraas, 2011). In Quebec, Canada, quotas have had a significant and lasting impact on gender dynamics in families: men have increased the amount of time they spend participating in domestic chores and care without affecting their labor market performance. Women have been able to spend more time doing paid work, and they are more likely to be able to work in a fulltime position (Patnaik, 2019). In Germany, quotas for fathers have also promoted their greater involvement in care and domestic tasks even after the leave period (Tamm, 2019).

Whether or not these policies are effective depends on men actually making use of the leave. Their use of the leave or not is influenced, among other factors, by the predominant gender-based social norms. In India, for example, 40% of men would not be willing to use an extension of the paternity leave (Farooqi et al., 2023), which



could be related to the social norms assigning the main care role to mothers. Similarly, in many OECD countries with prevailing traditional attitudes toward gender roles, more than half the population considers that mothers should be the main beneficiaries of parental leaves (OECD, 2016). Given these conditions, it is unlikely that paternity or parental leave policies will lead to a more equitable distribution of care.

Men's decisions to take advantage of the paternity leave or parental quota also depend on economic incentives. In Quebec, Canada, for example, prior to the reform, the policy allowed parents to share the leave with their partners, and the wage compensation was about 50%, which meant the household's income was severely impacted if the father chose to take the leave. Under this policy, fathers' participation

barely rose to 30% (Patnaik, 2019). However, after the reform, which introduced five weeks of leave exclusively for fathers and also raised compensation to 70% of their regular salary, use of the leave by men shot up to 70%, and they used an average of three more weeks of leave time (Patnaik, 2019).

Similarly, in Germany, after the reform, adherence to a paternity leave quota along with higher compensation during the leave boosted paternal participation from 3% to 15% in the first generation and to about 34% for those with children born seven years later (Tamm, 2019). Despite this upward trend, more than half of German fathers continued to refuse to use the leave. Other studies indicate that fathers who opt for leave in Germany have a selective profile: men with higher education levels, older, in households where mothers worked prior to giving birth and/or worked longer hours are more likely to use the leave (RWI, 2008; Reich, 2011).

Rigidly structured leave programs can also discourage their use. Many men refuse paternity leave or long parental leave because they are afraid it could damage their careers (OECD, 2003, 2007). The possibility of a flexible leave, such as taking one or two days per week, could encourage its use. In Belgium, for example, 75% of those who take parental leave do so at the rate of one day per week, as fathers find this to be the most convenient arrangement (Merla and Deven, 2015). In addition, a legal reform in Sweden enabled both parents to take leave simultaneously along with the option to take personal days, which increased the probability that fathers would take more than ten days in the first 60–80 days after birth by 50% and 24% of the cases, respectively (Pers-

Policies and programs, such as paternity and parental leave, childcare services for infants and school-aged children, flexible work arrangements, and programs targeted at fathers, can stimulate male participation in household and caregiving tasks. More rigorous research is needed to fully understand the effectiveness of these measures and their optimal implementation in the region

son and Rossin-Slater, 2019).⁴ Although such flexibility can promote the parents' sharing the use of the leave, it can also reinforce the traditional domestic gender roles where the fathers continue to play a secondary role in care (Axelsson, 2014).

These findings indicate that policies combining financial incentives with normative changes can have a significant impact on the father's commitment to child care. More studies are needed, however, to fully understand the effectiveness of different policies and how to better implement them in different cultural and social contexts. It is crucial to note that these policies are only available for formal workers, a factor that is especially significant in LAC due to its high rate of informal employment.

→ **Transforming family dynamics: The role of child-care policies (preschool- and school-aged)**

Child-care policies play a key role that goes beyond supporting child development and building human capital; these policies can also reshape the distribution of care responsibilities within the family. Although there is substantial evidence on how these policies affect mothers' participation in the labor force (see Text Box 2), their impact on the division of care between mothers and fathers has not yet been fully explored.

The few studies that are available suggest that these policies can encourage men to increase the amount of time they spend on caregiving tasks or to reduce their contribution to a lesser degree compared with women. A study by Kozhaya and Martínez Flores (2022) on the impact of full-time schools in Mexico showed that, besides increasing the hours children spend in school, these policies increased the labor market participation

4. It is important to remember that the study also indicated that this reform had positive effects on the mothers' mental and physical health indicators. This shows that greater participation by fathers in the first months of a newborn's life helps balance a more equitable distribution of the couple's responsibilities in care, providing the mother more time to tend to her own health and postpartum recovery.

of mothers and led to a slight increase in the amount of time that fathers spend on unpaid work, both domestic and caregiving.

Similarly, in Mexico, the Estancias Infantiles program for children 1–4 years old led to a reduction in hours of care by both parents, especially for women, which resulted in a more equitable distribution of care in the home (Calderón, 2014). Amarante et al. (2023) found a positive relationship between children attending preschool and reduced gender differences in unpaid work at home, mainly due to a more pronounced reduction in the hours women dedicate to these tasks.

→ Work flexibility: a tool to help men share care responsibilities

Flexible work arrangements are emerging as a promising strategy that helps fathers become more involved in child care, although concrete evidence for LAC is not yet available. The COVID-imposed need to adopt distance working arrangements has served as a natural experiment in this respect.

Studies conducted in the UK and Italy have shown that work flexibility has enabled parents to spend more time caring for their children. In Italy, both men and women working flex arrangements increased their time in caregiving tasks in a similar manner. In England, this increase was less marked among women (Sevilla and Smith, 2020; Angelici and Profeta, 2020). These findings suggest that work flexibility could be key to balancing gender care responsibilities, although it is clear that culture and country-specific labor policies influence family dynamics (see Box 2).





BOX 2. IMPACT OF POLICIES ON MOTHERS: AN ANALYSIS FOR THE REGION

The length of maternity leave in Latin America and the Caribbean is notably shorter than in OECD countries, where the average is 50 weeks. In the LAC region, the average is just 14 weeks, with significant variability among countries in the region. Jamaica, for example, offers only eight weeks of maternity leave, while Venezuela offers up to 26 weeks.

Recently some countries have increased the length of maternity leave, impacting the work environment of mothers. In Chile, Colombia and Brazil, the increased amount of leave has been associated with fewer mothers participating in the work force and an increase in informality and self-employment among those who do continue to work (Faundez, 2019; Ramírez Bustamante et al., 2016; Machado and Neto, 2016). It has also been pointed out that returning to work after long periods of maternity leave is linked to wage sanctions in the region (Poblete y Rau, 2018). These consequences are not unique to LAC, since they have been identified in developed countries such as the United States, Canada and France (Boeri et al., 2008; Espinola-Arredondo and Mondal, 2009; Kunze, 2022; Joseph et al., 2013; Canaan, 2019). Wage penalties are also evident when parental leave is used exclusively by mothers (Olivetti and Petrongolo, 2017). This suggests that extended maternity leave may help reinforce traditional gender roles in households, limiting women's participation in the labor market. Thus, it is important to weigh the effects of the design of these policies and their possible unintended consequences on women's labor outcomes.

Alternatively, care policies for preschool and school-age children often have positive effects on mothers' participation in the work force without negative impacts on fathers' work activities. The implementation of free or low-cost preschool education services has positively influenced the employment of mothers in some LAC countries (Berlinski and Galiani, 2007; Berlinski et al., 2011; Rosero and Oosterbeek, 2011; Hojman and Lopez Boo, 2022), although cases with neutral effects have also been reported (Medrano, 2009; Encina and Martínez, 2009; Nollenberger and Perazzo, 2019; Attanasio et al., 2022). With regard to the extension of primary education services, it has been shown that it increases participation in the work force of mothers and grandmothers of the benefited children (Padilla-Romo and Cabrera-Hernández, 2019; Cabrera-Hernández and Padilla-Romo, 2021; Berthelon et al., 2015; Contreras and Sepúlveda, 2017; Martínez and Peticara, 2017), with no significant impacts on fathers' labor outcomes.

It is important to point out that flexible employment arrangements such as part-time work, flexible hours or working from home may restrict women's opportunities for career advancement and for accessing higher wages (Berniell et al., 2013; Arntz et al., 2016). Although these options may be attractive to women seeking to reconcile paid employment with their care responsibilities, if they are adopted predominately by women, they could perpetuate rather than mitigate gender inequalities. These options therefore need to be available to both women and men and used by both genders in order to attain greater gender equity in the workplace.

→ Parental programs: promoting gender equality in the home



Parental programs have emerged as a valuable tool for promoting gender equity in the domestic sphere. Although more studies in LAC are needed, these programs have the dual purpose of enhancing child development and promoting gender equality between parents. In more advanced countries outside of the LAC region, studies indicate that these programs help increase parental involvement in child care (Doyle et al., 2018; León-Himmelstine and Salomon, 2020).

In LAC, although a range of different parental programs have been implemented, evaluations rarely differentiate between the effects on mothers and fathers in terms of their role in child care (Berlinski et al., 2021; Barrera et al., 2020; Lichand and Christen, 2020). It is important that future research further explores this distinction for a better understanding of how these programs can contribute to a more egalitarian family dynamic.

The limited indirect evidence from LAC does not indicate successful results. A study in El Salvador, using WhatsApp, evaluated a program that sought to reduce parental stress and child violence (Amaral et al., 2022). The findings showed an increase in stress and anxiety of fathers but not mothers and a reduction in the interaction of fathers with their children, suggesting a greater dependence on mothers for caregiving tasks. By comparison, an intervention in Mexico aimed at children in rural and marginalized areas managed to improve communication and motor skills but showed no significant impact on fathers' involvement in education since they are usually off working and absent from the home (Cárdenas et al., 2017). In Bolivia, Programa P sought to strengthen parental skills and promote equity within couples. Although an increase in joint decision-making was observed, there were no changes in gender norms or in the distribution of domestic chores (Alemann et al., forthcoming).

→ Policies to increase men's participation in care sectors

Occupational segregation by gender is evident in the limited male representation in traditionally care-focused areas, such as early childhood education and health. To challenge gender stereotypes, enrich occupational diversity, and meet the growing need for trained professionals, some developed countries have identified objectives and strategies to increase the number of men in these sectors (OECD, 2019; Litjens and Taguma, 2017; Lawton, 2023).

A notable example is the recommendation of care experts from the European Commission that “20% of staff employed in collective childcare services should be men” (European Commission Network on Childcare, 1996). Although no country has fully met this target, some, such as Denmark and Norway, have made progress through specific policies and programs (Oberhuemer, 2011; Peeters, 2007). The 2022 European Care Strategy also makes recommendations for overcoming gender bias and combating occupational segregation, seeking to improve working conditions and attract qualified professionals.⁵¹ Likewise, the OECD underscores the importance of increasing men's participation in these areas through its guidelines for staff recruitment and retention (OECD, 2019).

In line with these international recommendations, some advanced countries have implemented a variety of national initiatives that seek to increase men's participation in caregiving. These initiatives include targeted recruitment campaigns, creation of support networks for men in the sector, and equal opportunity policies to facilitate men's entry into and retention in the sector. Text Box 3 presents some case studies for each type of strategy. While not accompanied by rigorous evaluations, they may be of interest. It is important to highlight that these programs may not be easily adaptable given the characteristics of the region and that we need further studies on the effectiveness of these policies.

5. In 2022, the European Commission has presented the European Care Strategy to ensure quality, affordable and accessible care services across the European Union and improve the situation for both care receivers and the people caring for them, professionally or informally. More information about this strategy at: <https://ec.europa.eu/social/main.jsp?langId=en&catId=89&furtherNews=yes&newsId=10382#navItem-relatedDocuments>



TEXT BOX 3. CASE STUDIES: DEVELOPING STRATEGIES TO INCREASE MEN'S PARTICIPATION IN CARE SECTORS

• Recruitment campaigns: an emerging approach

Efforts to increase men's presence in the care sectors include promotional strategies that emphasize the range of job opportunities for men. Although there is little data yet on the impact of these strategies, qualitative research suggests that when campaigns use inclusive language and equitable visual representation, they can change gender perceptions associated with these professions and potentially influence a man's career choice (Office for Students, 2020; Lawton, 2023; Litjens and Taguma, 2017).

For example, in 2002 the program "Men in Child Care" launched by the Flemish Community of Belgium aimed to increase the visibility of men in child care. They used eye-catching advertising, disseminated a manual on the male recruitment process, held events to discuss the role of men in caregiving, among other strategies. After one year, the number of male students in training centers rose (Peeters, 2007). However, more research is needed to determine the causal relation between the campaign and career decisions (Litjens and Taguma, 2017).

Marketing campaigns are complemented with direct experience through volunteer programs and internships that provide those interested with a realistic view of the sector. A volunteer senior-care program in Australia received positive feedback from the male participants, although more data is needed on the program's effectiveness (WGEA, 2017).

• Mentoring and networking: fostering male inclusion

Mentoring programs and support networks are crucial for encouraging men to enter and stay in the care sector. While there is no solid evidence on the effectiveness of these programs, they have the potential to increase men's entry to the sector (OECD, 2019; Sinéard, 2023) and the likelihood they will remain in the sector (Cole et al., 2019).

Initiatives such as [NY Men Teach](#) (launched in 2015 in New York City), for example, seek to recruit men of color (Afro descent, Hispanics, and Asian Americans) into teaching by providing mentors and support to ensure their success and retention (Schaeffer, 2021). Similar strategies exist in England and Ireland. However, rigorous studies are clearly needed in order to determine the effectiveness of such strategies.

• Affirmative actions: Nordic experiences

Although few in number, some countries have experimented with affirmative action to encourage men's participation in education and professional work in care sectors. Finland and Norway stand out for their pioneering policies in this area.

Finland took a bold step to balance primary education classrooms by implementing a quota policy that reserved 40% of student spaces for male applicants. Until 1989, this approach caused highly qualified women to be displaced in favor of male candidates, thus altering the professional demographics, which had a positive impact on the educational achievements and career development of their future students. According to Schaeede and Mankki (2022), students who had more class time with the male teachers selected under the new policy were able to achieve higher educational levels, had greater success in the labor market by age 25, and were more inclined toward STEM (Science, Technology, Engineering and Mathematics) careers. However, this gender quota did not raise male students' interest in teaching.

Instead, the policy addressed a shortcoming in the country's teacher-selection process, enabling recruitment of men who perhaps do not show outstanding qualifications during the admissions process but who have other assets – such as non-cognitive skills – that could have influenced student development (Schaeede and Mankki, 2022).

For its part, Norway set an ambitious target in 1997 for men to make up at least 20% of the workforce in education and child care by the year 2000. Although that target has not yet been reached, Norwegian strategies have been multifaceted, including incentives for secondary students to gender-preferential recruitment policies in case of equal qualifications (Engel et al., 2015; OECD, 2019). From 2003 to 2022 the presence of men in the sector grew significantly, from 5.7% to 10.8% (Engel et al., 2015; SSB, 2023), demonstrating significant, albeit gradual, progress.

→ How to move forward?: the need for rigorous research on policy effectiveness

The goal of integrating men in care roles in the region has not yet been achieved. Meticulous research is needed to assess the effectiveness of policies aimed at redefining gender roles and facilitating equity in caregiving. The limited presence of men in these activities may be evidence of shortcomings in the implementation and scope of current measures.

Parental leave, including paternity leave, aims to increase fathers' involvement from the beginning of family life. Although such leave programs exist, they have limited impact due to their short duration and the absence of mandatory quotas for fathers. Men's skittish acceptance reflects the weight of cultural norms and prevailing job expectations, limiting the desired change.

Child care services are potential catalysts for an equitable distribution of domestic work, although it is important to clarify how these services affect men's involvement in care.

In the professional area, improving gender representation in the media is critical to changing perceptions about caregiving. However, male role models and support networks are needed to challenge occupational segregation in female-dominated care sectors. Strategies must be refined to overcome the barriers preventing men from entering and remaining in these professions.

An examination of successful strategies, such as European recruitment campaigns and affirmative policies, indicates men's participation in caregiving has increased. However, lack of rigorous research studies prevents a thorough understanding of the real impact of these policies.

This document reveals a lack of solid evidence on the effectiveness of similar programs. In the future, priority must be given to research that supports policy reforms and the development of more equitable care.

While LAC strives for deeper gender equality in care, it is critical that policies be effective in both theory and practice. In-depth research will help orient our actions toward a future where care roles are shared equally between the genders, overcoming obstacles and redefining roles for a more inclusive and equitable society.

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