

POLICY BRIEF

TIME FOR WOMEN: FROM LOCAL INITIATIVES TO TRANSFORMATIVE POLICIES

Evaluation of childcare experiences
in Río Grande, Argentina

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“Initiatives to strengthen care policies in Latin America and the Caribbean”

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TIME FOR WOMEN: FROM LOCAL INITIATIVES TO TRANSFORMATIVE POLICIES. EVALUATION OF CHILDCARE EXPERIENCES IN RÍO GRANDE, ARGENTINA

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Introduction

The social organization of care constitutes one of the main challenges to advancing towards more equal, inclusive, and sustainable societies. In Latin America and Argentina, care responsibilities continue to be distributed unequally, falling primarily on women, which limits their economic autonomy and restricts their opportunities for participation in different spheres of social life.

In recent years, care has gained increasing prominence on the regional human rights agenda. Advisory Opinion OC-31/25 of the Inter-American Court of Human Rights recognized care as an autonomous human right and reaffirmed the obligations of States—including **subnational and local governments—to guarantee the right to provide care, to receive care, and to self-care. In this context, local governments have the responsibility and obligation to provide concrete responses to families' needs and have the advantage of being the level of government closest to the population.**

Within this framework, the Latin American Team for Justice and Gender (ELA) conducted an evaluation of two care programs implemented by the Secretariat of Gender and Community Development, Municipality of Río Grande. The city's territorial particularities—the presence of migrant families with limited support networks, the considerable distances between neighborhoods, transportation accessibility, and climatic conditions—make it particularly relevant to analyze the factors that facilitate or hinder access to and use of these services.

The evaluation identified that care needs do not automatically translate into the use of available services. The perceptions of user families reveal the **persistence of accessibility, connectivity, climatic, cultural, predictability/stability, and trust-related barriers concerning the spaces and the people working there, which condition access and limit the transformative potential of these policies.** At the same time, the findings show that **care spaces are valued insofar as they enable women to expand their autonomy, strengthen families' support networks, and promote child development.** These lessons provide relevant evidence for strengthening local care policies and guiding the design of similar interventions in other territories.

Methodology

The evaluation was conducted in 2025 by the Latin American Team for Justice and Gender (ELA), in coordination with the Secretariat of Gender and Community

Development of the Municipality of Río Grande, involving technical teams from different municipal areas, those responsible for care spaces, and other key stakeholders involved in policy implementation.

The analysis focused on the following programs:

- **Río Grande, Ciudad que promueve los cuidados igualitarios**, a permanent care space for children aged 2 to 5; and

- **Mujeres Construyendo Futuro**, which included an evaluation of the mobile care space offered as part of vocational training programs in traditionally male-dominated trades for women, aimed at promoting their economic autonomy.

The evaluation sought to identify the main facilitators and barriers families face in accessing and using these services, understand the factors that affect their sustainability, and generate recommendations aimed at strengthening their reach and impact. It also sought to analyze the extent to which these policies contribute to **recognizing, reducing, and redistributing** care work, promoting a fairer and more equitable social organization of care.

The evaluation not only made it possible to assess the performance of these two specific experiences, but also to develop an **evaluation matrix** conceived as a **tool to strengthen the capacity of local governments to design, monitor, and improve their care policies**. The matrix is structured around the combination of the three dimensions of the right to care (the right to provide care, to receive care, and to self-care), the five Rs of care—recognize, reduce, redistribute, reward, and represent—with the three roles that the State can assume—as a service provider, regulator, and promoter of cultural change—and organizes the analysis by considering the different actors involved in the social organization of care: the State, families, the market, and the community. It also incorporates a specific focus on the redistribution

of care responsibilities within households, taking into account the gender inequalities that persist in the allocation of these tasks. Based on dimensions, categories, and indicators developed from the evidence collected throughout the evaluation process, the tool makes it possible to identify progress, challenges, and areas for improvement in implemented policies. Its flexible and adaptable nature also facilitates its use in other municipalities and subnational settings, contributing to the generation of comparable evidence, the exchange of lessons learned, and the replication and scaling of policies aimed at guaranteeing the right to provide care, to receive care, and to self-care.

HOW DID WE DO IT?

The evaluation was conducted between May and September 2025 and combined statistical analysis, in-depth interviews with key stakeholders and with women and men who were users and non-users of care services, focus groups with women and men, and administrative data.

The inputs gathered through the fieldwork also informed the care policy evaluation matrix. In addition, participatory sessions were held with the municipality in April 2026 to validate preliminary findings.

Key Findings

Although the two programs pursue different objectives—one aimed at providing a permanent childcare service and the other at facilitating women's participation in

training processes for economic autonomy by offering mobile care services to ensure completion of the training—the evaluation identified common challenges for the design of local care policies.

Care needs do not automatically translate into effective access to services

The availability of services is a necessary, but not sufficient, condition for guaranteeing the exercise of the right to care. Effective use depends on services being accessible, of good quality, responsive to the needs of individuals and their families, and offering conditions of predictability and continuity that enable relationships of trust to be built.

Strong cultural barriers to redistributing care persist

Women continue to be perceived as primarily responsible for care, associated with a mandate linked to motherhood. Delegating care to institutions often generates feelings of guilt and, in many cases, criticism from their social environment. At the same time, the scarcity of family and community support networks limits opportunities to share and redistribute care responsibilities.

The quality and scope of services are key determinants

The presence of professional teams, safe infrastructure, clear information, and predictable operating rules are essential for building trust and fostering sustained use of care spaces. It is also essential that care spaces respond to families'

needs in terms of operating hours, taking into account working schedules and routines in ways that effectively allow families to free up time and expand their opportunities for education, employment, or self-care (leisure, physical activity, healthcare, among others).

Territorial barriers condition access

Based on families' perceptions and experiences, the evaluation found that long distances, connectivity difficulties, transport (in)accessibility, and climatic conditions affect regular attendance. These challenges highlight the need to bring services closer to neighborhoods, increase the number of care spaces, and adapt provision to the characteristics of the territory.

Identifying age-related gaps is key to expanding coverage

The evaluation demonstrated the importance of analyzing which age groups are excluded from the existing provision and which care needs remain unmet. This exercise makes it possible to identify coverage gaps, prioritize interventions, and design strategies that continuously support families' care trajectories, preventing certain groups from being excluded from public policies.

Care spaces promote child development

Families positively value the contribution of care spaces to children's holistic development and early stimulation. They report improvements in language development, with

children beginning to speak more, as well as improvements in socialization, interaction with peers, and the development of cognitive and emotional skills.

Care spaces improve women's well-being and opportunities

Families report perceiving that these services contribute to reducing social isolation and physical and mental overload. The time freed up has enabled many of the women interviewed to resume or begin educational trajectories, participate in learning activities, develop entrepreneurial initiatives, and strengthen their economic and personal autonomy.

The care agenda promotes cross-departmental coordination

Care has become an agenda capable of generating consensus and promoting cross-cutting collaboration among different municipal areas, strengthening government capacities for the design, implementation, and monitoring of public policies.

Evidence generation strengthens the scalability and replicability of policies

Evaluation constitutes a strategic tool for identifying which components of policies work, which require adjustments, and under what conditions they produce better results. Systematizing these lessons makes it possible to inform decision-making, optimize the use of public resources, and strengthen the capacity of local governments to sustain and expand these initiatives.

At the same time, the experience of Río Grande provides valuable insights for other municipalities facing similar challenges. Identifying cultural, territorial, and operational barriers, as well as the factors that facilitate families' uptake of services, generates valuable knowledge for other governments and contributes to building a care agenda and promoting evidence-based decision-making.

Lessons Learned

The availability of care services does not, in itself, guarantee their use. The study shows that the use of these services is conditioned by multiple factors, including the characteristics of service provision (quality, predictability/stability, accessibility, and responsiveness to users' needs), territorial inequalities, prevailing social norms surrounding care (a familistic and maternalist approach or a paradigm of co-responsibility), and the trust that institutions are able to build with families and communities.

Care policies are not solely about creating services. Their effectiveness depends on ensuring that services are accessible, relevant, and of good quality, as well as on the capacity of different levels of government to reduce access barriers and guarantee the effective exercise of the right to care. Evidence generation is a fundamental tool for strengthening, scaling, and adapting these policies to different territories, contributing to the development of sustainable and evidence-based responses.

Policy Recommendations

Strengthen the State's role as a service provider

- Ensure the quality, continuity, and predictability of services through stable and extended operating hours, trained staff, clear protocols, and accessible information for families.
- Decentralize and territorially adapt service provision, taking into account the specific characteristics of Río Grande and mobility and climatic barriers.
- Systematically identify gaps in care coverage, particularly among age groups not reached by existing policies, in order to guide the expansion of service provision and ensure continuous care trajectories throughout the life course.

Strengthen the State's regulatory role

- Strengthen the 5Rs approach in the design, implementation, and monitoring of policies.
- Consolidate permanent information, monitoring, and evaluation systems to inform decision-making, optimize public resources, and strengthen institutional capacities.
- Promote the systematization and dissemination of local experiences to facilitate their scalability and replicability in other municipalities.

Strengthen the State's role as a promoter of cultural change

- Deepen cultural transformation strategies that promote care as a human right and a shared social responsibility among the State, the market, communities, and families, while promoting the redistribution of care responsibilities between women and men within households.
- Strengthen the capacities of municipal teams to promote men's involvement in care work, incorporating tools and strategies that challenge traditional gender mandates, promote new ways of exercising fatherhood, and foster a more equitable distribution of care responsibilities.
- Strengthen trust-building with families through transparent information on the functioning, benefits, and conditions of care services.
- Strengthen intersectoral and cross-departmental coordination to consolidate a comprehensive approach to family well-being.

