Indian Economy · GS - III

Distinguish between ‘care economy’ and ‘monetized economy’. How can care economy be brought into monetized economy through women empowerment?

EXAM YEAR	PAPER	SUBJECT
2023	GS - III	Indian Economy

MARKS	WORD LIMIT
15	~250 words

Answer Hint

The care economy produces essential but often unpaid services such as childcare and eldercare, while the monetized economy values activities through market transactions; women's empowerment can convert invisible care work into recognised economic participation through infrastructure, skills, employment and social protection.

Model Answer

Introduction

The **care economy** comprises paid and unpaid activities involving childcare, elderly care, healthcare, household maintenance and support for dependent persons. The monetized economy, in contrast, consists primarily of market-based activities exchanged for monetary compensation.

Body

Distinction

Care economy: Often unpaid, predominantly undertaken by women, performed within households or communities and inadequately reflected in conventional economic indicators.

Monetized economy: Involves paid production and services, generates market income and is directly captured in national income accounting.

The distinction is important because unpaid care work creates economic value by sustaining the productive workforce, despite often being invisible in GDP calculations.

Bringing Care into the Monetized Economy

Care infrastructure: Public childcare centres, crèches, eldercare and disability-care services can shift care from unpaid household work to paid employment.

Women's workforce participation: Flexible employment, safe workplaces, maternity support and equal remuneration can facilitate women's participation in paid work.

Recognition of care workers: Professional training, certification, minimum wages and social security can formalise care occupations.

Skill development: Training women in nursing, childcare, geriatric care and community healthcare can create employment.

Digital platforms: Technology can connect trained care providers with households requiring services.

Time-use data: Systematic measurement of unpaid care work can improve policy recognition and resource allocation.

Social protection: Pensions, insurance and childcare support can reduce the unpaid burden borne by women.

Conclusion

Women’s empowerment should not mean merely transferring unpaid care work into low-paid occupations. The objective should be to **recognise, reduce and redistribute unpaid care while creating dignified and fairly remunerated care employment**, thereby integrating care into the broader economy.