



Canada's Missing Major Project: The Canadian National Care Economy Strategy

Canadian Women's Chamber of Commerce
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Executive summary

Canada's Major Projects Office (MPO) was established in 2025 to identify, coordinate, and expedite nation-building investments that strengthen Canada's long-term economic resilience, prosperity, and security¹. To date, MPO-designated projects have focused exclusively on physical infrastructure such as transportation corridors, energy systems, and resource development.

This proposal is a request for investment in the care economy, without which investments in physical infrastructure are dangerously asymmetrical.

Care systems, including childcare, elder care, long-term care, disability supports, home and community care, and caregiving income supports, are the foundation of economic infrastructure that enables labour-force participation, productivity, well-being, public health, and national economic growth. Without a strong care infrastructure, investments in other major infrastructure are for naught. People build bridges, not the other way around.

Canada already recognizes the importance of social infrastructure through investments in early learning and childcare², healthcare, Statistics Canada³ reporting, and its commitment in Budget 2024 to develop a National Caregiving Strategy⁴. However, care systems remain fragmented, chronically underfunded, and treated primarily as operating expenditures rather than long-term investments.

Canada must move beyond consultation and take decisive action to address the crisis across the caregiving sectors. Practical, evidence-based policy recommendations are available from both Canadian and international sources. The analysis is clear: investment in the care economy will yield short- and long-term benefits, both financial and non-financial. This proposal asks the Government of Canada to designate and adequately fund a Canadian National Care Economy Strategy as a nation-building project under the *Building Canada Act*.

The proposal demonstrates that investments in care infrastructure:

- Strengthen Canada's economic resilience and labour supply;
- Generate significant employment and GDP growth;
- Advance gender equity and economic inclusion;
- Improve outcomes for seniors, children, families, and persons with disabilities;
- Support Indigenous communities and rural regions;
- Reduce future healthcare and social-service costs; and,
- Meet all five nation-building criteria established under the *Building Canada Act*.

A coordinated national care work strategy balances Canada's infrastructure portfolio, recognizing that the purpose of nation-building is to enhance the lives of individual Canadians in their communities and that this depends not only on physical assets but also on the systems that allow people to work, care, age, participate, and thrive.

The Canadian Women's Chamber of Commerce (CanWCC) submits this proposal on behalf of its members and the Canadian public, who will benefit from a significant investment and leadership in implementing a Canadian Care Economy Strategy. CanWCC represents 1 million self-employed women across Canada, of which 20% work in the health and social assistance sector⁵. Our members are disproportionately burdened by unpaid care responsibilities, which negatively impacts their earning potential.

PART ONE: CARE WORK IS INFRASTRUCTURE

The Major Projects Office and Nation-Building Criteria

The Major Projects Office (MPO) was established under the *Building Canada Act* (SC 2025) to evaluate, coordinate, and accelerate projects deemed to be in Canada's national interest.

The MPO provides a centralized federal coordination mechanism for large, complex projects involving multiple jurisdictions, ministries, regulators, Indigenous governments, and private-sector stakeholders.

Under the *Building Canada Act*, projects are evaluated against five nation-building criteria⁶:

1. Strengthening Canada's autonomy, resilience, and security;
2. Providing economic or other benefit to Canada;
3. Demonstrating a high likelihood of successful execution;
4. Advancing the interests of Indigenous Peoples; and,
5. Contributing to clean growth and climate objectives.

To date, MPO-designated projects have focused exclusively on physical infrastructure. However, the *Building Canada Act* does not limit nation-building projects to physical assets. The Canadian National Care Economy Strategy satisfies all five criteria and thus qualifies as a major national infrastructure initiative.

The Care Economy in Crisis

Canada has historically treated ports, rail systems, highways, transmission lines, and resource corridors as strategic national infrastructure. These investments are rightly understood as essential to economic growth, labour mobility, trade, and national resilience.

Yet the systems that allow Canadians to participate in the economy and the care workforce itself have not been treated with the same urgency or coordination. This omission creates a significant structural weakness in Canada's economic development strategy.

Care work systems are not merely social programs. They are economic infrastructure. They determine whether parents can work, whether seniors can age safely, whether individuals with disabilities can participate fully in society, and whether workers can remain attached to the labour market while meeting caregiving responsibilities.

The COVID-19 pandemic exposed the fragility and fragmentation of Canada's care systems. Labour shortages in healthcare and caregiving sectors intensified, unpaid caregiving burdens increased substantially, and weaknesses in long-term care systems produced severe human and economic consequences⁷.

At the same time, Canada faces⁸:

- An aging population;
- Persistent labour shortages;
- Rising healthcare demands;
- Declining quality of care;
- Affordability pressures on families; and
- Ongoing gender inequities in labour-force participation and earnings.

A coordinated investment in care infrastructure addresses all of these challenges simultaneously.

Care Work Is Infrastructure

Social Infrastructure as Economic Infrastructure

Infrastructure investments are typically understood as long-term assets that produce future economic and social benefits. Governments routinely finance physical infrastructure through long-term borrowing because these investments generate future productivity, economic activity, and public value.

Care systems function in the same way. Investments in childcare, home care, long-term care, mental health services, disability supports, and caregiving income supports produce measurable long-term economic returns by⁹:

- Increasing labour-force participation;
- Improving productivity and workforce stability;
- Supporting healthy aging;
- Reducing healthcare system strain;
- Improving child development outcomes;
- Increasing gender equity;
- Reducing poverty and financial insecurity; and
- Strengthening economic resilience during demographic and public-health shocks.

Despite these outcomes, care systems are treated as annual operating expenditures rather than long-term capital investments. This distinction has important consequences. Unlike current expenditures, capital expenditures can be financed through borrowing. This means capital projects do not have the same funding constraints.

While current expenditures are evaluated primarily through short-term fiscal pressures, infrastructure investments are evaluated through long-term cost-benefit frameworks. As a result, care systems are consistently fragmented, underfunded, and vulnerable to political and economic cycles. Recognizing care

work as infrastructure would allow governments to evaluate these investments according to their long-term economic and nation-building impacts¹⁰.

There's no doubt that day-to-day operating costs are involved in the healthcare system and other sectors of care work. Those costs can still be captured and categorized as current expenditures. However, there is also no doubt that, from an economic perspective, investing in preventive healthcare will save future acute healthcare costs in the long run. Nor is there any doubt that, from a job creation perspective, investing in affordable and accessible childcare will increase parents' (especially mothers') labour force participation. These expenditures are investments in complex systems that require capital treatment and federal leadership.

Canada Already Recognizes Elements of Care Infrastructure

The Government of Canada has already begun recognizing care systems as economic infrastructure in theory.

Examples include:

- Federal gender-based analysis frameworks that emphasize participation in the care economy¹¹;
- The Canada-wide Early Learning and Child Care system¹²;
- Long-term care reform initiatives following COVID-19¹³;
- Budget 2024's Sectoral Table on the Care Economy; and
- Commitment to developing a National Caregiving Strategy¹⁴.

International institutions, including the International Labour Organization (ILO), The Organization for Economic Co-operation and Development (OECD), the World Bank, and UN Women, define care systems as core economic infrastructure.¹⁵ The next logical step is to formally integrate care infrastructure into Canada's nation-building and infrastructure planning framework.

Investing in the care economy is not a radical idea; it's a necessary part of sustaining fundamental social cohesion. There are numerous models, research, and best practices to follow. What is lacking is the will and discipline to invest in our most vulnerable communities and to focus on building and maintaining our most precious national resource: our people.

Defining the Care Economy

For the purposes of this proposal, care work includes “the provision of paid and unpaid care work involved in meeting the physical, psychological, and emotional needs of children (under 15 years old) and care-dependent adults or youth (15 years or older) with long-term conditions or disabilities.”¹⁶ This is the definition used by Statistics Canada in its care-economy framework and generally aligns with international care-economy research.

Care infrastructure spans multiple jurisdictions and delivery systems. Federal, provincial, territorial, Indigenous, municipal, private-sector, and community actors all play important roles. This complexity is precisely why MPO coordination is appropriate. The Major Projects Office was created to coordinate complex, cross-jurisdictional projects that require sustained federal leadership. Care infrastructure fits this mandate.

The Economic Importance of Care Work

Care Work Is Already One of Canada's Largest Economic Sectors

Healthcare and social services employ approximately one in four workers in Canada¹⁷. Paid care work in health and education contributes approximately 12% of Canada's GDP, exceeding the economic contribution of several traditional infrastructure and resource sectors, including mining and oil and gas¹⁸.

Canada faces an aging population. Canadians aged 65 and over accounted for 19.5% of the population in 2025, and the population aged 85 and over is projected to rise from 951,833 in 2025 to between 3.3 million and 4.2 million by 2075¹⁹. At the same time, Canada spends less on social services than the OECD average²⁰. Labour shortages in care sectors are already severe and are expected to intensify as Canada's population ages. For example:

- Ontario alone is projected to require more than 50,000 additional personal support workers and more than 33,000 nurses by 2032;²¹
- Demand for home and community care continues to rise rapidly;
- Canadians prefer aging at home rather than in institutional settings; and,
- Family caregivers are absorbing growing levels of unpaid labour.²²

Unpaid Care Work Represents Massive Hidden Economic Value

Statistics Canada estimates that unpaid work in Canada was worth between approximately \$517 billion and \$860 billion in 2019.²³ Unpaid caregiving related to aging, disability, and long-term conditions alone was estimated at approximately \$97 billion.²⁴ This unpaid labour serves as a hidden subsidy to Canada's healthcare and social service systems. Without it, public systems would face significantly higher financial pressures.

Yet unpaid caregiving frequently results in²⁵:

- Reduced workforce participation;
- Lower lifetime earnings;
- Lost pension contributions;
- Increased financial insecurity;
- Mental-health strain; and,
- Negative physical-health outcomes.

These impacts disproportionately affect women.²⁶

The Gender and Equity Dimensions of the Care Economy

The care economy is highly gendered. Approximately 75% of paid care workers are women, many of whom are racialized, immigrant, or low-income workers. Women also perform most of the unpaid caregiving labour.

Statistics Canada²⁷ data show that women are:

- More likely to provide care to both children and adults simultaneously;
- More likely to perform direct and inflexible caregiving tasks;
- More likely to reduce paid work hours due to caregiving responsibilities; and
- More likely to experience financial hardship and stress associated with caregiving.

The impact of unpaid caregiving on labour force participation and earning potential is particularly evident among self-employed women. Healthcare and social services, the largest sector for self-employed women, illustrates this dynamic clearly: while these workers provide paid care to others, their own earning capacity is limited by the unpaid caregiving responsibilities they carry at home.

The effects are also pronounced in non-standard industries such as the arts, where long, irregular hours and location-based work are common. Nearly 72% of artists and arts workers report turning down work due to caregiving responsibilities²⁸, while almost 65% of women in film and television report losing work because of inaccessible, unaffordable, or inflexible childcare.²⁹

Care infrastructure is therefore central to gender equity, labour-force participation, and inclusive economic growth. Investment in care systems produces economic gains in two ways:

1. Direct economic growth through the creation of care-sector employment; and
2. Indirect economic growth by enabling greater labour-market participation among caregivers.³⁰

International evidence consistently shows that investments in care generate higher employment multipliers than comparable investments in construction and other traditional infrastructure sectors. Unlike many infrastructure investments, care-sector investments also create substantial employment opportunities for women.³¹

PART TWO: CARE WORK INFRASTRUCTURE IS A NATION-BUILDING PROJECT

The Case for MPO Designation

Strengthening Canada's Autonomy, Resilience, and Security

Strong care systems strengthen Canada's resilience to demographic, economic, and public health shocks. The COVID-19 pandemic demonstrated that care-system failures can rapidly become national economic and security crises.

A coordinated care infrastructure strategy would:

- Stabilize labour-force participation;
- Improve emergency preparedness;
- Reduce healthcare-system vulnerabilities;
- Support aging populations;
- Improve population health outcomes; and
- Strengthen social cohesion.

Providing Economic Benefit to Canada

Care infrastructure investments generate both short-term and long-term economic returns.

Short-term impacts include:

- Job creation;
- Increased labour-force participation;
- Higher household income stability; and
- Increased consumer spending.

Long-term impacts include:

- Improved productivity;
- Better child-development outcomes;
- Reduced healthcare costs;
- Reduced poverty;
- Increased tax revenues; and
- Improved workforce sustainability.

Care infrastructure also enhances the effectiveness of other major infrastructure investments by ensuring sufficient labour-force participation and worker stability.

High Likelihood of Successful Execution

Canada already possesses many foundational components required for implementation, including:

- Existing childcare agreements;
- Healthcare delivery systems;
- Federal-provincial transfer mechanisms;
- Existing caregiving consultations; and
- Federal gender-based analysis frameworks

The MPO's coordinating role would improve intergovernmental alignment, accountability, labour mobility, data sharing, standards development, and implementation oversight.

Advancing the Interests of Indigenous Peoples

Many Indigenous communities face significant gaps in access to childcare, home care, mental-health supports, disability services, eldercare, etc. The Canadian government is working with Indigenous partners as it implements the Early Learning and Childcare agreements.

Care infrastructure investments can support:

- Community-based care delivery;
- Indigenous-led services;
- Workforce development;
- Improved health outcomes; and
- Greater self-determination in care systems.

Contributing to Clean Growth and Climate Objectives

Compared to many traditional infrastructure investments, care-sector investments have relatively low environmental impacts while generating significant employment and economic returns. Care investments are labour-intensive rather than carbon-intensive.³² They also support climate resilience by strengthening community supports, public health, and local service systems.

PART THREE: THE CANADIAN CARE ECONOMY STRATEGY

Proposed Components of a Canadian National Care Economy Strategy

This proposal does not attempt to define every policy required for a comprehensive care strategy. Instead, it identifies several foundational pillars that could serve as the starting point for MPO-supported national implementation.

The table below lists broad categories and recommended policies and best practices that should be part of a comprehensive National Care Economy Strategy.

Categories	Recommended Policies and Best Practices
Income Supports for Caregivers	<ul style="list-style-type: none"> ● Universal parental income support program³³ ● Expanded caregiving income supports ● Portable caregiving benefits for self-employed workers ● Pension credits for unpaid caregiving periods ● Tax reforms recognizing unpaid care contributions ● Flexible caregiving leave programs.
Universal Affordable Childcare	<ul style="list-style-type: none"> ● Expansion of childcare spaces ● Workforce recruitment and retention ● Wage stabilization ● Rural and Indigenous access ● Quality assurance ● Accessibility ● Long-term implementation accountability
Aging in Place and Home Care Supports	<ul style="list-style-type: none"> ● Expanded home-care services ● Caregiver respite programs ● Home accessibility supports ● Community-based care systems ● Integrated mental-health supports ● Workforce expansion in home and community care
Decent Work and Workforce Stabilization	<ul style="list-style-type: none"> ● Competitive wages ● Workforce training and credential recognition ● Labour mobility supports ● Safe staffing standards ● Mental-health supports for care workers ● Immigration pathways for care workers informed by the experiences, challenges, and needs of workers ● Career advancement opportunities

<p>Mental Health and Preventive Care</p>	<ul style="list-style-type: none"> ● Move forward with Bill C-201 (or similar) to add mental, addiction, and substance use health services to the definition of “insured health services”.³⁴ ● Cover a wide range of services and modalities, including culturally appropriate services. ● Focus on preventative, community-based care and harm-reduction interventions.
<p>Key Principles</p>	<ul style="list-style-type: none"> ● ILO’s Core principles supporting transformative care policies³⁵: <ul style="list-style-type: none"> ○ Social dialogue and representation ○ Gender responsive and human-rights-based ○ Universality, adequacy, and equity ○ Overall and primary responsibility of the State ● The 4As as Policy Pillars: Availability, Accessibility, Affordability and Accountability and their collective impact.³⁶ ● The 5R Framework for Decent Care Work for gender equality and social justice.³⁷

Models and Policy Guidance

Canada does not need to build a Care Economy framework from scratch. Extensive research and policy tools already exist.

Key international sources include:

- International Labour Organization care-economy models;
- UN Women care-policy frameworks;
- OECD caregiving and pension-credit models;
- World Bank care-investment analyses;

Key Canadian sources include:

- Canadian Centre for Caregiving Excellence;
- Canadian Centre for Policy Alternatives;
- Canadian Women's Chamber of Commerce advocacy;
- Moms at Work research and advocacy;³⁸
- Canadian childcare advocacy organizations,³⁹ and more.

Other countries have implemented:

- Caregiver pension credits;
- Paid family caregiving programs;
- Public home-care compensation systems;
- Community-based aging models; and
- Long-term care workforce strategies.

Canada can adapt and scale these approaches within a national care infrastructure framework.

Initial Costing

Initial cost estimates, drawn from the International Labour Organization's (ILO) Working Paper 55, indicate that the ideal investment in long-term care (LTC) is approximately 3% of GDP by 2035; however, close to 30% of the initial investment may be recouped in the short-term through increased tax revenues.⁴⁰

These estimates are confirmed by the ILO Care Policy Investment Simulator, which allows for country-specific inputs and modelling.⁴¹ A Canadian simulation was performed on May 7, 2026. For simplicity, the ILO-recommended LTC recipient-to-carer ratios, pay levels, and early childhood care and education (ECCE) enrollment percentages and child-to-staff ratios were used. The additional investment required to achieve the results by 2030 was \$75 billion (US) per year, with 30.13% of the investment recouped by tax revenue. The return on investment for the

Parental Leave and ECCE policies (only) is \$1.58 US per \$1 invested. Projected net job creation for Leave and ECCE is over 1 million jobs.

It is reasonable to assume that the net job creation would be significantly higher if the long-term care (LTC) element were included in the analysis. This would presumably yield a higher ROI, though the full magnitude of the increase would be somewhat offset by significant LTC expenses.

See Annex A: ILO Care Policy Investment Simulator Results for additional details.

The MPO should coordinate with relevant Ministries and departments to conduct a detailed gap analysis and cost analysis as part of the planning process. The ILO and UN Women have a policy tool to guide this process.⁴²

Governance and MPO Coordination

A Canadian National Care Economy Strategy would require coordinated governance across multiple jurisdictions and sectors.

Potential MPO functions could include:

- Intergovernmental coordination;
- National standards and accountability frameworks;
- Workforce planning and labour mobility coordination;
- Data collection and evaluation;
- Indigenous partnership frameworks;
- Funding coordination;
- Public reporting and transparency; and,
- Long-term strategic planning.

Given the scale and complexity of Canada's care systems, centralized federal coordination through the MPO would significantly improve implementation effectiveness.

PART FOUR: CONCLUSION

Canada's infrastructure strategy must evolve to reflect the realities of a modern economy. Nation-building is not limited to roads, pipelines, railways, and transmission lines. It also depends on the systems that allow Canadians to work, raise families, care for loved ones, participate in their communities, and age with dignity. Care work is economic infrastructure.

The Canadian National Care Economy Strategy meets the nation-building criteria established under the Building Canada Act by:

- Strengthening Canada's resilience and labour-force capacity;
- Delivering substantial economic and social returns;
- Building on existing policy foundations;
- Supporting Indigenous communities and underserved regions; and
- Advancing low-carbon, inclusive economic growth.

Adding care infrastructure to the MPO portfolio would rebalance Canada's infrastructure investments and recognize the central role that care systems play in economic development, productivity, gender equity, and national well-being.

The Government of Canada has already acknowledged the importance of the care economy through consultations, pilot programs, and targeted spending. **The next step is to formally recognize care work as nation-building infrastructure and provide the coordination, scale, and long-term investment necessary to build a resilient Canadian care economy for future generations.**

APPENDIX A: ILO Care Policy Investment Simulator Results

Total - all care policies	
Investment requirements	
Baseline public spending ECCE and LTC (% GDP)	1.60%
Baseline public spending health and primary and secondary education (% GDP)	10.83%
Gross additional annual investment (NCUm)	99,844
Gross additional annual investment (US\$m)	75,252
Gross additional annual investment (% GDP)	3.72%
Annual incremental investment to projected year (% GDP)	0.47%
% Gross investment recouped in tax revenue	30.13%
Net additional annual investment (% GDP)	2.60%
Net additional annual investment (with induced effects) (% GDP)	2.00%
Return on Investment (ROI)	
ROI (ECCE and Leave): US\$ GDP increase per US\$ spent	1.58
Job generation	
Net total employment generated (without induced effects)	1,050,131
% direct	83.62%
% women	87.25%
% formal (all)	97.54%
% formal (women)	98.37%
Early childhood care and education (ECCE)	
% children in ECED	60.00%
% children in pre-primary	100.00%
Hours per week per child in ECED	40.00
Hours per week per child in pre-primary	40.00
Child/staff ratio (ECED)	4.00
Child/staff ratio (pre-primary)	8.00
Long-term care (LTC)	
Recipient-to-carer ratio 15-64y	2.50
Recipient-to-carer ratio 65y+	2.50
Share of personal care workers (% of LTC workers)	100.00%
Pay level of personal care workers (% nurses' wage)	75.00%
Pay level of other LTC workers (% minimum wage)	120.00%
Childcare-related paid leave (maternity, paternity and parental leave)	
Class of worker entitled to paid leave	All
Rate of parental leave payment (mother - % average wage)	100.00%
Number of weeks	Varies

Source:

International Labour Organization (n.d.). ILO Care Policy Investment Simulator. International Labour Organization, Geneva.

End Notes

- ¹ Government of Canada (2026). *About Us*. Major Projects Office.
- ² Michalyshyn, K. & Nicol, C. (2022). Cost Estimate of the Federal National Child Care Plan. (Ottawa, Office of the Parliamentary Budget Officer).
- ³ Wray, D., Badets, J., Keating, N. & Fast, J., 2023. Canada's Care Economy: A Conceptual Framework. Statistics Canada Catalogue no. 89-652-X2023002
- ⁴ Employment and Social Development Canada (2025). *Sectoral Table on the Care Economy*. ESDC programs and policy development.
- ⁵ Statistics Canada, 2023. Table 98-10-0592-01. Class of worker by industry groups, labour force status, age and gender: Canada, provinces and territories and census divisions.
- ⁶ *Building Canada Act*, SC 2026, c 4, ss 4.1(6).
- ⁷ Estabrooks CA, Armstrong P, Bourbonnais A, Donner G, Flood, CM, Keefe J, Pringle D, Silvius J, Straus S, Wolfson M. Repair and Recovery in Long-Term Care: Restoring Trust in the Aftermath of COVID-19 (2020-2023). Royal Society of Canada. 2024.
- ⁸ Canadian Institute for Health Information (2025). Recent staffing and quality indicator trends in Canadian long-term care. News.
- ⁹ Himmelweit, S. (2025). 'Care as investment in infrastructure', Oxford Review of Economic Policy, 2025, 41, 688–701.
- ¹⁰ Himmelweit, 2025.
- ¹¹ Women and Gender Equality (2026). Government of Canada's approach on Gender-based Analysis Plus.
- ¹² Employment and Social Development Canada (2026). Progress and impact of Canada-wide Early Learning and Child Care. Federal Secretariat on Early Learning and Childcare.
- ¹³ Estabrooks CA, et al. (2024).
- ¹⁴ Department of Finance Canada. *Budget 2024: 2.1 Taking Care of Every Generation*. Federal Budget.
- ¹⁵ For example: World Bank (2024), 'Addressing Care to Accelerate Equality', World Bank Group Gender Thematic Policy Notes Series: Evidence and Practice Note, Washington, DC: The World Bank.
- ¹⁶ Wray, et al., 2023.

¹⁷ Khanam, Farhana, Manon Langevin, Katherine Savage and Sharanjit Uppal. 2022. “Women working in paid care occupations”. Insights on Canadian Society. January. Statistics Canada Catalogue no. 75-006-X

¹⁸ *The Care Economy Statement (2021)*. The Care Economy.

¹⁹ Statistics Canada, 2026. Population Projections for Canada (2025 to 2075), Provinces and Territories (2025 to 2050). Statistics Canada Catalogue no. 17-20-0003

²⁰ *The Care Economy Statement (2021)*.

²¹ Jones, A. (2024 May 13) ‘Ontario will need tens of thousands of new nurses, PSWs by 2032’. CBC News: Toronto.

²² “More than half of women provide care to children and care-dependent adults in Canada, 2022” The Daily, November 2022. Component of Statistics Canada catalogue no. 11-001-X.

²³ Wray, et al., 2023.

²⁴ Fast, 2024.

²⁵ Himmelweit, 2025.

²⁶ Battams, N., & Mathieu, S. (2024). Family caregivers are playing an increasingly important role. In Families count 2024, The Vanier Institute of the Family.

²⁷ Wray, 2024.

²⁸ Ong, M., Scannell, J., Namasivayam, K., Wolf, H., & Davis, J. (2019). Behind the Curtain: A mixed methods study exploring barriers to and strategies for managing competing roles and work-life balance of performing arts workers and caregivers. The School of Occupational Therapy, University of Toronto.

²⁹ Brinton, S. (2021). Who Is Responsible? The Family Care Project: Towards On-Set and On-Demand Family Care in Canada’s Screen Industries. Women in Film and Television Canada Coalition.

³⁰ De Henau, J. 2022. Costs and benefits of investing in transformative care policy packages: A macrosimulation study in 82 countries, ILO Working Paper 55 (Geneva, ILO).

³¹ *Ibid.*

³² De Henau, 2022.

³³ See <https://canwcc.ca/advocacy>

³⁴ *An Act to amend the Canada Health Act (mental, addictions and substance use health services)*, Private Members Bill C-201, First Reading May 2025.

³⁵ Addati, L., Cattaneo, U., Esquivel, V. & Valarino, I. (2018) Care work and care jobs for the future of decent work. (Geneva, ILO).

³⁶ National Seniors Council, 2024.

³⁷ ILO, Decent work and the care economy, ILC.112/Report VI (April 2024).

³⁸ Venditti, A. (November 21, 2024). "Want More Babies? Fix Parental Leave." *Macleans*.

³⁹ See *Buliding Blocks for Childcare (B2C2) and Child Care Now*.

⁴⁰ De Henau, 2022.

⁴¹ International Labour Organization (n.d.). ILO Care Policy Investment Simulator. International Labour Organization, Geneva.

⁴² UN Women & International Labour Organization (2021). UN Women - ILO Policy Tool: A Guide to Public Investments in the Care Economy.

References

Addati, L., Cattaneo, U., Esquivel, V. & Valarino, I. (2018) Care work and care jobs for the future of decent work. (Geneva, ILO).

<https://researchrepository.ilo.org/esploro/outputs/report/Care-work-and-care-jobs-for/995218954802676>

Addati, L., Cattaneo, U. & Pozzan, E. (2022). Care at work: Investing in care leave and services for a more gender equal world of work (Geneva, ILO).

https://www.ilo.org/sites/default/files/wcmsp5/groups/public/@dgreports/@dcomm/documents/publication/wcms_838653.pdf

An Act to amend the Canada Health Act (mental, addictions and substance use health services), Private Members Bill C-201, First Reading May 2025.

<https://www.parl.ca/legisinfo/en/bill/45-1/c-201>

Battams, N., & Mathieu, S. (2024). Family caregivers are playing an increasingly important role. In Families count 2024, The Vanier Institute of the Family. <https://vanierinstitute.ca/families-count-2024/family-caregivers-are-playing-an-increasingly-important-role>

Brinton, S. (2021). Who Is Responsible? The Family Care Project: Towards On-Set and On-Demand Family Care in Canada's Screen Industries. Women in Film and Television Canada Coalition.

https://wiftcanadacoalition.ca/wp-content/uploads/2021/10/TFCP_WIFT_Final_English.pdf

Building Blocks for Childcare (n.d.) *B2C2 helps people build non-profit child care*. Homepage.

<https://b2c2.ca/>

Building Canada Act, SC 2026, c 4, ss 4.1(6).

<https://laws-lois.justice.gc.ca/eng/acts/B-9.89/index.html>

Canadian Centre for Caregiving Excellence, 2024. *Caring in Canada: Survey insights from caregivers and care providers across Canada*. (Toronto, CCCE).

https://canadiancaregiving.org/wp-content/uploads/2024/06/CCCE_Caring-in-Canada.pdf

Canadian Centre for Caregiving Excellence, 2025. *A National Caregiving Strategy for Canada*. (Toronto, CCCE).

<https://canadiancaregiving.org/national-caregiving-strategy/>

Canadian Institute for Health Information (2025). *Shift toward community care for young people living with mental health disorders in Canada signals cautious optimism for the future*. News.

<https://www.cihi.ca/en/news/shift-toward-community-care-for-young-people-living-with-mental-health-disorders-in-canada-signals>

Child Care Now (n.d.). *Keep the Child Care Promise: Why \$10aDay Child Care is at Risk – and How We Can Protect it: Federal investment is needed to protect and expand affordable child care, which is crucial to both families and the Canadian economy.* Homepage.

<https://childcarenow.ca/>

De Henau, J. 2022. Costs and benefits of investing in transformative care policy packages: A macrosimulation study in 82 countries, ILO Working Paper 55 (Geneva, ILO).

<https://webapps.ilo.org/static/english/intserv/working-papers/wp055/index.html>

Department of Finance Canada. *Budget 2024: 2.1 Taking Care of Every Generation.* Federal Budget.

<https://budget.canada.ca/2024/report-rapport/chap2-en.html>

Employment and Social Development Canada (2025). *Sectoral Table on the Care Economy.* ESDC programs and policy development.

<https://www.canada.ca/en/employment-social-development/programs/care-economy-table.html>

Employment and Social Development Canada (2026). *Progress and impact of Canada-wide Early Learning and Child Care.* Federal Secretariat on Early Learning and Childcare.

<https://www.canada.ca/en/employment-social-development/programs/early-learning-child-care/progress-impact.html>

Estabrooks CA, Armstrong P, Bourbonnais A, Donner G, Flood, CM, Keefe J, Pringle D, Silvius J, Straus S, Wolfson M. *Repair and Recovery in Long-Term Care: Restoring Trust in the Aftermath of COVID-19 (2020-2023).* Royal Society of Canada. 2024.

<https://rsc-src.ca/en/research-and-reports/covid-19/long-term-care/repair-and-recovery-in-long-term-care>

Himmelweit, S. (2025). 'Care as investment in infrastructure', *Oxford Review of Economic Policy*, 2025, 41, 688–701.

<https://doi.org/10.1093/oxrep/graf034>

Fast, J. et al. (2024). Valuing the Contributions of Family Caregivers to the Care Economy. *Journal of Family and Economic Issues* (2024) 45:236–249.

<https://doi.org/10.1007/s10834-023-09899-8>

Government of Canada (2025) *Early Learning and Child Care Agreements.*

<https://www.canada.ca/en/early-learning-child-care-agreement/agreements-provinces-territories.html>

Government of Canada (2026). *About Us*. Major Projects Office.

<https://www.canada.ca/en/privy-council/major-projects-office/about-us.html>

International Labour Organization (2024). *Decent work and the care economy*, ILC.112/Report VI, Geneva.

<https://www.ilo.org/resource/conference-paper/decent-work-and-care-economy>

International Labour Organization (n.d.). *ILO Care Policy Investment Simulator*. International Labour Organization, Geneva.

<https://webapps.ilo.org/globalcare/>

Jones, A. (2024 May 13) 'Ontario will need tens of thousands of new nurses, PSWs by 2032'. CBC News: Toronto.

<https://www.cbc.ca/news/canada/toronto/nurses-psws-ontario-foi-document-1.7202282>

Kabeer, N. (2025), 'A Foundational Asymmetry? Gender, Unpaid Care Work and the Market Economy', *Oxford Review of Economic Policy*, 41(3).

<https://doi.org/10.1093/oxrep/graf052>

Khanam, Farhana, Manon Langevin, Katherine Savage and Sharanjit Uppal. 2022. "Women working in paid care occupations". *Insights on Canadian Society*. January. Statistics Canada Catalogue no. 75-006-X

<https://www150.statcan.gc.ca/n1/pub/75-006-x/2022001/article/00001-eng.htm>

McKinsey (2015). *The Power Of Parity: How Advancing Women's Equality Can Add \$12 Trillion To Global Growth*. McKinsey Global Institute (MGI) Report. (London and Shanghai, McKinsey Global Institute).

<https://www.mckinsey.com/featured-insights/employment-and-growth/how-advancing-womens-equality-can-add-12-trillion-to-global-growth>

Michalyshyn, K. & Nicol, C. (2022). *Cost Estimate of the Federal National Child Care Plan*. (Ottawa, Office of the Parliamentary Budget Officer).

<https://www.pbo-dpb.ca/en/publications/RP-2122-028-S--cost-estimate-federal-national-child-care-plan--estimation-couts-plan-national-garde-enfants>

"More than half of women provide care to children and care-dependent adults in Canada, 2022" *The Daily*, November 2022. Component of Statistics Canada catalogue no. 11-001-X.

Wray, D., Badets, J., Keating, N. & Fast, J., 2023. *Canada's Care Economy: A Conceptual Framework*. Statistics Canada Catalogue no. 89-652-X2023002

<https://www150.statcan.gc.ca/n1/pub/89-652-x/89-652-x2023002-eng.htm>

Morrissey, R.J., Chair (2023). Seventh Report of the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities: Labour Shortages, Working Conditions, and the Care Economy. Office of the Speaker of the House of Commons.

<https://www.ourcommons.ca/DocumentViewer/en/44-1/HUMA/report-7/>

National Seniors Council, 2024. Final report of the Expert Panel: Supporting Canadians aging at home: Ensuring quality of life as we age. (Gatineau, Employment and Social Development Canada). <https://www.canada.ca/en/national-seniors-council/programs/publications-reports/aging-home.html>

Ong, M., Scannell, J., Namasivayam, K., Wolf, H., & Davis, J. (2019). Behind the Curtain: A mixed methods study exploring barriers to and strategies for managing competing roles and work-life balance of performing arts workers and caregivers. The School of Occupational Therapy, University of Toronto.

Rocard, E. and Llana-Nozal, A., 2022. Supporting informal carers of older people: Policies to leave no carer behind, OECD Health Working Papers No. 140 (OECD).

<https://dx.doi.org/10.1787/0f0c0d52-en>

Statistics Canada, 2023. Table 98-10-0592-01. Class of worker by industry groups, labour force status, age and gender: Canada, provinces and territories and census divisions.

<https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=9810059201&geocode=A000224>

Statistics Canada, 2026. Population Projections for Canada (2025 to 2075), Provinces and Territories (2025 to 2050). Statistics Canada Catalogue no. 17-20-0003

<https://www150.statcan.gc.ca/n1/pub/17-20-0003/172000032026001-eng.htm>

The Care Economy Statement (2021). The Care Economy.

<https://thecareeconomy.ca/statement/>

UN Women & International Labour Organization (2021). UN Women - ILO Policy Tool: A Guide to Public Investments in the Care Economy.

<https://www.unwomen.org/en/digital-library/publications/2021/04/policy-tool-care-economy>

Venditti, A. (November 21, 2024). "Want More Babies? Fix Parental Leave." *Macleans*.

<https://macleans.ca/society/want-more-babies-fix-parental-leave/>

Women and Gender Equality (2026). *Government of Canada's approach on Gender-based Analysis Plus*.

<https://www.canada.ca/en/women-gender-equality/gender-based-analysis-plus/government-approach.html>

World Bank (2024), 'Addressing Care to Accelerate Equality', World Bank Group Gender Thematic Policy Notes Series: Evidence and Practice Note, Washington, DC: The World Bank.
<http://hdl.handle.net/10986/40184>

Wray, D., 2024. "Sandwiched" between unpaid care for children and care-dependent adults: A gender-based study. Statistics Canada Catalogue no. 89-652-X2024002.
<https://www150.statcan.gc.ca/n1/pub/89-652-x/89-652-x2024002-eng.htm>