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South African Women's Movements and the Care Agenda: Achievements, Broken Promises, and the Road to Transformative Gender and Equitable Care Policies

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Introduction

This year marks the seventieth anniversary of one of the defining moments in South Africa's democratic history: the march of 20,000 women to the Union Buildings on 9 August 1956 to protest the extension of the pass laws to African women. Every Women's Day we remember their extraordinary courage. We celebrate the leadership of Helen Joseph, Lilian Ngoyi, Rahima Moosa, Sophie de Bruyn and countless other women whose names history has not recorded, but whose collective action transformed our country.

As we honour their legacy, we are reminded that we do not begin our struggles anew. It is therefore especially fitting that we gather this evening to honour Helen Joseph—teacher, social worker, trade unionist, peace activist and one of South Africa's most remarkable champions of women's rights. Helen understood that women's everyday struggles—for dignity, security, decent work, housing, health care and the wellbeing of their families—could never be separated from the broader struggle for democracy and social justice.

My central argument is that South African women's movements succeeded in placing gender equality, social justice and care at the heart of the democratic project. Their struggles helped secure one of the world's most progressive constitutional frameworks for gender equality and social rights. Yet the promise of a more equitable care society remains only partially fulfilled. Women's unpaid and underpaid care work continues to underpin both families and the economy, while remaining insufficiently recognised, valued and supported.

This is not simply a story of failure. Much has been achieved since 1994, and those achievements deserve recognition. Still, as Amartya Sen reminds us in *The Idea of Justice*,[i] the measure of justice lies not in designing ideal institutions but in reducing real-world injustices. It is in that spirit that I ask three questions: What have South African women's movements achieved? Why have so many constitutional and policy commitments to gender equality and care remained only partially realised? And what would it take to build a genuinely transformative care agenda for the future?

Before proceeding, I would like to briefly explain what I mean by care (see endnote), since it is central to the topic of this lecture.

When we speak of care, we think of caring for one another, an expression of ubuntu. The way it is used in the lecture is a much broader one.

Care encompasses two intersecting kinds of activity: direct, personal and relational care, such as caring for children, older people, people who are ill or persons with disabilities; and indirect care activities, such as cooking, cleaning and other household work that make daily life possible.

Much of this work is performed by women and girls within households, in South Africa and worldwide, is unpaid. It remains one of the most critical barriers to women's economic freedom.

But care is also paid work, undertaken by a wide range of workers, including social workers, nurses, teachers and personal care workers. Domestic workers, who provide both direct and indirect care within households, are also an important part of the care workforce.

I will also refer to South Africa's welfare system. Here I mean both social protection, particularly our extensive social grants system, and the system of community oriented social services for vulnerable groups, including children, older people, people with disabilities and people experiencing gender-based violence among others. Reference is also made to a care system which I take to refer to integration across different sectors and institutions – state, markets, families and communities.

Women's movements have long understood that the struggle for gender equality extends far beyond formal political rights. The Women's Charters of the 1950s and early 1990s articulated an expansive vision of citizenship grounded in equality, social justice, economic inclusion, social protection and social services. Although these documents did not speak of a "care economy", many of their demands were fundamentally about care and a care system: maternity protection, health services, childcare, school meals, housing, water, sanitation and secure livelihoods.

Re-reading these documents after closing the chapter on my own activism in the women's movement of the 1980s,[ii] I was struck again by the moral clarity and emotional power of their language. They spoke of women not only as citizens, but also as workers, mothers, wives, caregivers and community leaders whose contributions were systematically undervalued.

But we should not romanticise this history. Women repeatedly challenged the assumption within the liberation movements, United Democratic Front and trade union movements that women's emancipation could wait until after national liberation.

As Cheryl Walker[iii] and Shireen Hassim[iv][v] have shown, placing women's rights alongside national liberation was neither straightforward nor uncontested. The Women's National Coalition and the 1994 Women's Charter insisted that democracy would remain incomplete without substantive gender equality. Freni Ginwala captured this vision when she argued that national liberation and women's liberation were inseparable.[vi][vii]

The democratic transition created an unprecedented constitutional foundation for gender equality. The Constitution and Bill of Rights entrenched social rights alongside civil and political rights, while legislation expanded women's access to health care, education, social security and political representation.

Yet constitutional recognition is only the beginning of social transformation. Women continue to shoulder a disproportionate share of unpaid care work while confronting persistent poverty, unemployment, gender-based violence and failing public services.

In many communities, contemporary women's activism has shifted from national mobilisation to local struggles over safety, livelihoods, water, energy, housing, childcare and social services. Campaigns such as #TheTotalShutdown Movement[viii] in 2025 during the G20 Summit remind us that women continue to organise collectively when democratic institutions fail to deliver on their promises.

This raises the central question of my lecture. If women's movements were so successful in placing equality, social justice and care on South Africa's democratic agenda, why have these commitments proved so difficult to realise in practice?

Before turning to that question, I want to reflect on Helen Joseph, whose life illuminates both the achievements and the unfinished business of our democratic project.

Helen Joseph's Legacy

For more than two decades this memorial lecture has honoured Helen Joseph's extraordinary contribution to South Africa's democratic struggle. She is rightly remembered as one of our foremost advocates for women's rights, someone whom Nelson Mandela described as "one who has shaped our destiny and who is an indelible part of our history."[ix]

But Helen's legacy extends beyond political leadership.

Helen began her public life as a social worker, helping to develop the community centre model of social service delivery in the Western Cape. Her experience convinced her that meeting people's immediate needs was inseparable from addressing the structural inequalities that produced those needs. This understanding led her into trade union organising and ultimately national politics.

In this respect, her intellectual journey mirrored that of Jane Addams in the United States, the first social worker to receive the Nobel Peace Prize in 1931. Both women recognised that social care and social justice are not separate projects; they are mutually reinforcing.

Helen also listened carefully to ordinary women. Together with Lilian Ngoyi, Rahima Moosa and many others, she understood that women's everyday struggles over housing, food, childcare, health care, decent work and protection from violence were political struggles. These concerns would re-emerge in the community movements of the 1980s.[x] Across these different historical moments, women transformed the private burdens of care into public claims for justice.

One of Helen Joseph's most revealing reflections appears in an interview with Julie Frederikse[xi] during the 1980s, when she described the pass laws as one of the many injustices imposed on Black women, "who suffer as being black, being a woman, and everything else."

That simple phrase—"and everything else"—captures what today we would recognise as the cumulative burdens of race, gender, poverty and care.

The demands submitted by the Federation of South African Women to the Congress of the People in 1955 and endorsed by women's movements of the 1980s[xii] reflected precisely this understanding. In contemporary language, these were demands for a more equitable system of care. As Shireen Hassim[xiii] has observed, they represented an effort to imagine democracy from below.

It is a particular honour for me to deliver this lecture because I speak not only as an academic, but also as a social worker and someone whose own political journey was shaped by the women's movement of the 1980s. I had the privilege of knowing Helen Joseph, albeit not closely, through the Federation of Transvaal Women, or Fedtraw. She served as a patron with Albertina Sisulu and Amina Cachalia.

That experience reinforced a lesson that remains central to my work today: care is never simply a private responsibility.

It is to that unfinished agenda that I now turn.

Welfare and Care Policies after Apartheid – Achievements and Broken Promises

It is no accident that South Africa's post-apartheid welfare and social development policies reflected many of the aspirations women activists articulated during the struggle years.[xiv]

The White Paper for Social Welfare of 1997 was, in many respects, the democratic state's attempt to give institutional expression to that vision.[xv]

The White Paper called for a people-centred, equitable and participatory welfare system aimed at creating a humane, peaceful, just and caring society—one that meets human needs, reduces poverty and inequality, upholds rights and promotes social and economic inclusion.

This was, and remains, the promise of South Africa's welfare and care contract. The White Paper recognised women's unpaid care work and its consequences for employment and economic autonomy. Yet it stopped short of placing care and the care economy at the centre of welfare policy.

Nearly three decades later, how far has this vision been realised? I want to make four observations.

First, the expansion of social grants represents one of the most significant achievements of post-apartheid democracy. Today they reach almost two-thirds of South African households and remain one of the most effective poverty-reduction instruments in the Global South.

Second, although grants have substantially reduced poverty, they have not transformed the structural inequalities experienced by women. Women continue to experience higher rates of poverty and unemployment than men, and female-headed households remain disproportionately vulnerable including women living in rural areas. Nor have grants altered the unequal distribution of unpaid care work, which continues to limit women's employment opportunities and economic participation. As the Commission for Gender Equality[xvi] argues, policymakers have been slow to recognise unpaid care as productive economic activity.

The value of the grants also remains inadequate. Both the Child Support Grant and Social Relief of Distress Grant fall below the food poverty line. Even so, they smooth household consumption, improve school attendance, strengthen women's financial decision making and contribute to caregivers' wellbeing.

The Child Support Grant was designed in gender-neutral terms, yet in practice became overwhelmingly associated with women, reflecting persistent social norms that childcare is women's responsibility. This is what feminist scholars describe as a maternalist paradox.

Third, cash transfers alone cannot fulfil the promise of a comprehensive welfare system. Social grants should, I believe, remain the backbone of South Africa's welfare system, but income support must be linked to employment opportunities, psychosocial services, family support and community development. As Tessa Hochfeld[xvii] has argued, the democratic promise requires both cash and care.

This imbalance between cash transfers and social services was not accidental. Social grants are nationally financed and administered through a relatively coherent system, while social services are delivered through a much more fragmented arrangement involving national and provincial government and a large non-profit welfare sector. Although these organisations provide essential services to children, older persons, people with disabilities, families and survivors of gender-based violence, they have remained chronically underfunded.

The result has been a system in which the state relies heavily on non-profit organisations to provide statutory and developmental services, without adequately funding the real costs of providing them. This has contributed to low wages, staff shortages and uneven access to services, while shifting much of the burden of sustaining care onto poorly paid workers—most of whom are women.[xix]

The uneven development of social grants and social services therefore reflects a deeper policy choice: income support was progressively institutionalised as a core responsibility of the state, while care services remained more fragmented, under-resourced and dependent on organisations and care workers expected to do more with less.

Finally, the greatest unfinished task has been the failure to recognise care itself as a public good and a central pillar of democratic social development.

South Africa succeeded in building one of the most extensive systems of income support in the Global South. Yet it did not build, with the same determination, an equally robust system of care and social services.

Why, despite progressive policies and constitutional commitments, has the transformation of welfare and care been so uneven?

Why Has the Transformation of Welfare and Care Been So Uneven?

To understand this paradox, I turn to feminist institutional theory.

Feminist institutionalists such as Fiona Mackay, Georgina Waylen[xviii] and Amanda Gouws[xix] argue that institutions are never gender neutral. Formal institutions—constitutions, legislation and public policy—and informal institutions—social norms, workplace cultures, family expectations and cultural beliefs—both reflect and reproduce historical power relations. Together they shape whose work is valued, whose voices are heard and who benefits from social policy.

South Africa's constitutional protections and gender policies demonstrate a strong formal commitment to equality. Yet formal institutions alone cannot transform deeply embedded informal institutions. Expectations about motherhood, caregiving, women's and men's roles in households and workplaces, and cultural and religious beliefs continue to shape how policies are interpreted and experienced.

These institutional dynamics are reinforced by history. Apartheid left profound inequalities in welfare, education, health care, labour markets and basic infrastructure. The migrant labour system separated families and institutionalised patterns of absent fatherhood, female-headed households and unequal care responsibilities whose effects continue across generations.

Black African women remain disproportionately responsible for unpaid care while often having the least access to quality childcare, health services, transport and other public support.

Implementation has also been constrained by the fragmented organisation of the state. Care is not the responsibility of a single department. It depends on coordinated action across health, education, social development, labour, justice, policing, the National Prosecuting Authority, public works and the National Treasury. Yet these institutions frequently operate in isolation. Chronic vacancies, weak coordination and persistent underinvestment in developmental welfare services have undermined implementation.

The response to gender-based violence illustrates these challenges. Despite repeated policy commitments, victim empowerment programmes remained inadequately funded for many years. Only after renewed mobilisation by #TheTotalShutdown Movement and government's declaration of gender-based violence as a national crisis did significantly greater resources begin to flow towards implementation. The National Treasury's 2026 Gender Budget Review[xx] marks an important shift in recognising these funding gaps.

The lesson is important: implementation has often followed sustained public mobilisation rather than policy commitments alone.

Informal patriarchal rules also frequently override formal rights. Fathers may be entitled to parental leave but feel unable to use it. Mothers are still expected to reduce their participation in paid employment after childbirth. Daughters remain primary caregivers for ageing parents. Women tend to preserve family unity over safety. Laws may change far more quickly than the social norms governing everyday life.

Political priorities matter equally. Welfare and care continue to be framed as social expenditure rather than productive social investment. As a result, care services and gender equality

institutions often receive lower political priority and fewer resources than sectors more readily associated with economic growth.

South Africa therefore faces a persistent gap between policy adoption and implementation: strong constitutional commitments coexist with patriarchal norms, historical inequalities, fragmented institutions and uneven state capacity.

This brings me to the question of women's political representation.

South Africa is rightly recognised for achieving high levels of women's representation in Parliament, provincial legislatures and local government although the numbers are declining. Fewer women candidates were fielded in the recent local government elections than previously.

But descriptive representation cannot be assumed to translate automatically into substantive representation. Since 1997, for example, the Department of Social Development has had eight ANC ministers, seven of whom have been women.[xxi] Yet the gender of political leaders has not ensured that welfare and care receive sustained political priority.

This became increasingly evident towards the end of the first decade of democracy, as many feminist leaders who had driven the gender equality agenda exited public office and national women's movements disbanded. Gender equality has increasingly become the domain of party structures, political institutions and public bureaucracies.

These developments coincided with a broader shift in political priorities, culminating in the era of state capture. Within this changing landscape, gender equality, social rights and the transformative vision embodied in the Constitution gradually lost political salience. **An elite**

model of gender transformation increasingly prioritised women's representation in political office over sustained investment in policies addressing the everyday realities of care, poverty and inequality.

Some women political leaders continued to champion gender justice. Others were constrained by party discipline, institutional cultures and shifting priorities. These developments illustrate how changes in political power can weaken the capacity of formal gender equality institutions to sustain transformative agendas.

But what do we know about the agency of women voters and their electoral choices? It is often assumed that women vote for the ANC because it pays a social grant with 98% of women being Child Support Grant recipients. Our five waves of research suggest that receiving a social grant does not determine party support in any simple way. Women grant recipients' electoral preferences shifted amid changing leadership such as at the end of the Zuma era and reflected concerns about corruption and assessments of government performance.

The global literature and comparative research by Htun and Weldon[xxii] helps explain the limits of women's policial representation further. Their analysis of gender policy reform across more than seventy countries including South Africa, challenges the assumption that increasing women's representation is by itself sufficient to advance gender equality. Women legislators are most effective when supported by strong, autonomous women's movements capable of mobilising public opinion and holding governments accountable.

South Africa's experience reflects this pattern. #TheTotalShutdown movement demonstrates how sustained feminist mobilisation helped move gender-based violence higher up the political agenda and secure greater public investment.

Htun and Weldon also show that different gender issues encounter different political constraints. Violence against women and workplace equality are often advanced through collective mobilisation and international advocacy. Reproductive rights encounter resistance from religious and cultural institutions. Redistributive policies such as childcare, paid care services and family support depend more heavily on fiscal capacity, political priorities and sustained public investment.

The authors find that representation therefore matters most when combined with political commitment, institutional capacity and an active feminist civil society.

Feminist institutionalism nevertheless has limitations when applied to the Global South. Much of the literature implicitly assumes a state with sufficient administrative capacity to implement policy once political commitment exists. South Africa's experience suggests otherwise.

Shahra Razavi's[xxiii] concept of the care diamond offers a valuable complement. It recognises that care is shared among four interdependent institutions: the state, markets, families and communities. When one corner of the diamond fails—particularly the state and markets —the burden is redistributed to the others, most often to women within households and communities.

Taken together, these perspectives suggest that transformative gender policy rests on four mutually reinforcing pillars: progressive laws, capable institutions, sustained public investment

and autonomous women's mobilisation. South Africa has made remarkable progress in establishing the first. The remaining three have proved much more difficult.

Reimagining the Care Economy: A Pathway to Transformative Gender Justice

So where might we bring the four pillars that I mentioned together?

I suggest that one of the most promising opportunities lies in reimagining the care economy—not as a residual welfare concern, but as integral to a developmental welfare approach and as productive social and economic investment capable of advancing gender equality, creating employment and strengthening social cohesion.

For too long, care has been viewed primarily as a private responsibility carried by women within households. Yet care is the foundation on which every economy depends. Children cannot learn, older people and persons with mental illness cannot live with dignity, people with disabilities cannot participate fully in society, and workers cannot be productive unless care is available.

Investing in care is therefore not simply a social policy choice. It is an economic development strategy and a democratic imperative.

South Africa is particularly well placed to pursue this agenda. Our exceptionally high levels of unemployment coexist with enormous unmet care needs.

Expanding access to early childhood development, community health services, school based social work services, long-term care for older persons, quality protective care for persons with mental illness, disability support and developmental social welfare would improve the quality of life of millions of South Africans.

It would also create decent employment opportunities, many of them for women and young people.

Properly recognised, trained and fairly remunerated, care workers are not a fiscal burden. They are an investment in human capabilities and in a more inclusive economy and society.

This requires a different way of thinking about public expenditure.

The question should not be whether South Africa can afford to invest in care, but whether it can afford not to. The conversation then shifts to how best this may be achieved.

A society that underinvests in care transfers the costs to households and communities, where they are borne disproportionately by women through unpaid labour, reduced employment opportunities and deepening inequality. All of which impacts women’s mental health.

By contrast, investment in care generates multiple returns. It supports children's development, enables women's economic participation, improves their health and wellbeing, strengthens families and communities, and contributes to more sustainable and inclusive growth. But care is not only an economic and political imperative, it also requires changing social norms that will lead to a more equitable distribution of care responsibilities between men and women.

Helen Joseph understood that democracy would have little meaning if it failed to transform the conditions of everyday life. She knew that freedom could not be measured only by political rights, but by whether people were able to live with dignity, security and hope.

That remains the challenge before us today.

South Africa's experience reminds us that constitutional rights cannot realise themselves. They require capable institutions, adequate resources, competent and ethical political leaders and sustained citizen mobilisation. It also means that women voters would need to use their collective agency to place care at the centre of their political claims for equality.

But for care to advance as a societal issue, it will require a collective commitment to value care—not as invisible work performed quietly by women, but as the social foundation on which both democracy and the economy depend.

If we are serious about building a more equal, caring and inclusive South Africa, then investing in the care economy is not simply one policy option among many. It is one of the most powerful ways of realising our constitutional promise and our gender social contract.

I can think of no more fitting way to honour Helen Joseph's legacy than to continue the work to which she devoted her life: **building a society in which justice is measured not only by the rights we enshrine, but by the care we extend to one another.**

END