

CAREGIVING ADOLESCENTS

AN INVISIBLE WORK

THAT SHAPES THE PRESENT
AND CONDITIONS THE FUTURE



Promoviendo derechos
para la igualdad de género



para cada infancia

CREDITS:

Editorial direction:

Sebastian Waisgrais
Specialist in Social Inclusion and Rights Monitoring, UNICEF Argentina

Natalia Gherardi
Executive Director, ELA

General Coordination:

Delfina Schenone Sienna (ELA)
Mora Straschnoy (ELA)
Alejandra Beccaria (UNICEF)

Authors:

Tania Rodriguez
Florescia Pacífico
Daniela Maciel

General review and content monitoring:

Carolina Aulicino and Alejandra Beccaria (UNICEF), Mora Straschnoy and Delfina Schenone Sienna (ELA)

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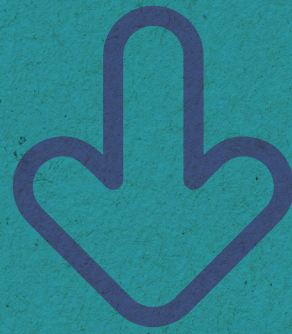
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Intro^oduction



Caregiving and adolescents

Caregiving includes a myriad of small (and complex) actions that happen daily to make life work: providing food, rest, hygiene, education, health care, emotional support, commuting, and movements of the members of a family. All these activities are the result of actions sustained by people who commit their time, dedication, and effort. Traditionally, these tasks are mainly assumed by women, which impacts on their availability of time, energy and mental space to take care of themselves, enter the job market, study and participate in the cultural, social, and political life. A historical paradox is observed in relation to caregiving tasks: although it involves a significant investment of time and effort, and it is fundamental for individual and social well-being, these tasks are not often sufficiently visible and socially recognized.

To make a phenomenon visible, in this case caregiving, and to include it in the public agenda, it is necessary to generate robust evidence that describes it and accounts for its dimensions, aspects, and impacts. Based on this understanding in Argentina and the region, the States, the civil society, academia, and cooperation agencies, among other stakeholders, are promoting the gathering of information on this issue that also allows to generate influence and advocacy actions.

Thanks to these efforts, in recent years, the role of children and adolescents as active caregivers has also been highlighted, challenging the traditional notion that assigns them only the role of subjects to be cared for. This phenomenon, caregiving children, is poorly studied and documented, and scarcely present in the academic and political agenda. A recent UNICEF publication highlights this issue for Colombia and Mexico, and yields strong results. The study conducted on time-use surveys in these countries shows that young and adolescent girls aged 12 to 18 are the second caregivers in their homes, ahead of the parents themselves.¹

On the same line, for Argentina, UNICEF's own analyses of the Time Use Survey (Encuesta del Uso del Tiempo), conducted by INDEC in 2021, show that, for the age group between 16 and 17 years old, women dedicate 5:18 hours per day to caregiving, while men dedicate 3:29 hours.

When adolescents assume intensive caregiving responsibilities, this assignment violates fundamental rights to the extent that it affects their play, rest and study time. Caregiving time compromises educational trajectories and, therefore, the development of childhood and life projects, as the qualitative study will show. In addition, the data show that ado-

1 UNICEF (2022), NIÑOS, NIÑAS Y ADOLESCENTES COMO CUIDADORES: ¿A QUÉ COSTO? HECHOS ESTILIZADOS DE COLOMBIA Y MÉXICO.

lescent girls disproportionately assume the role of caregivers, reinforcing traditional stereotypes that associate caregiving and domestic tasks with the feminine, as the idea that women are the primary caregivers is naturalized.

At the same time, in the case of children who are cared for by adolescents, it also affects their right to adequate care, since adolescents assume responsibilities that are not appropriate to their age and that can even jeopardize the physical integrity of those children. According to data from UNICEF's Rapid Survey (Encuesta rápida de UNICEF), in 2024, 8% of children are placed in the care of a sibling (usually a sister) under the age of 18.

With the aim of contributing to the knowledge of this phenomenon in Argentina and making it visible, ELA and UNICEF have developed the present qualitative research that, through the voices of adolescents, seeks to shed light on the ways they assume caregiving and how it impacts their present and the projection of their future. The findings will show gender, class, and family composition as variables that configure different experiences regarding caregiving.

The evidence shows that, in the absence of sufficient and adequate caregiving policies, families care for their children however and whenever they can. It is urgent that States implement actions to address and modify this reality. The research presented provides strategic tools for a deeper understanding of the phenomenon, thus facilitating the formulation of public policies. The organization of caregiving is not a private matter of individuals or families, but a matter for society as a whole. Without adequate policies, fundamental rights are violated, widening inequality gaps, especially of gender and class, and affecting the future of society.

Research

This research aims to analyze the perceptions and practices of the adolescent population regarding caregiving tasks, in order to make visible the work done by this population group and the way in which it conditions or stresses their well-being and the development of their life projects.

To this end, the research addressed how caregiving interferes with the lives, practices and future projects of adolescents aged between 15 and 17 who live in middle and low-income class neighborhoods in the City of Buenos Aires and the Buenos Aires Metropolitan Area (AMBA), and the city of San Miguel de Tucumán and Gran Tucumán, in Argentina.

The specific objectives proposed in this study were:

- 1 To describe the caregiving tasks performed by the interviewed adolescents.
- 2 To characterize how adolescents think about their caregiving tasks, and how caregiving is integrated and/or generates tension with their life projects based on their own experiences.
- 3 To analyze how caregiving affects the experiences of adolescents in different areas of their lives.
- 4 To investigate how adolescents understand the role of other family members in relation to caregiving (mothers, grandmothers, and sisters, on the one hand, and fathers, grandfathers, brothers, partners, etc., on the other).
- 5 To investigate the knowledge of adolescent girls about available caregiving options and its characteristics.
- 6 To describe and analyze the ways in which adolescents and their families resolve caregiving tasks, and their perceptions of the community, family, market, and State as care-providing spheres in relation to the specific configurations they acquire for them.

2 With regard to the delimitation of the “adolescents” population group, UNICEF’s definitions (2022) are adopted, which indicate the range from 10 to 17 years old as reference ages, contemplating the transition to youth. A distinction can be made between early adolescence, 10 to 15 years old, and late adolescence, from 15 years old. From this perspective, adolescence is recognized as a period of the life cycle and as a conception of progressive development toward adulthood, and comprises a heterogeneous universe intersected by physical, cognitive, and psychosocial dimensions.

The study adopted a qualitative methodological strategy, and the interpretive analysis was carried out based on the information collected through individual interviews and focus groups. The selection of informants for individual interviews (I) and the composition of focus groups (F) were based on socioeconomic status, distinguishing between adolescents from middle-income class (MI) and adolescents from low-income class (LI); gender, forming mixed groups and women-only groups; and region, forming groups of adolescents from the AMBA and groups of adolescents from Tucumán/Gran Tucumán. In September 2023, four focus groups and eleven individual interviews were conducted both face-to-face and virtually (Table 1)³. The voices of adolescents are presented through textual transcripts in dialog with the defined conceptual framework and the interpretation of the data collected.

TABLA 1. Grupos focales y entrevistas individuales.

REGION	FOCUS GROUPS	INDIVIDUAL INTERVIEWS
CABA/ AMBA	(F1) MI mixed, 9 people, face-to-face	(I1) MI woman, virtual (I2) MI woman, virtual (I3) LI woman, virtual
	(F2) LI female, 8 people, face-to-face	(I4) LI man, virtual (I5) LI woman, face-to-face (I6) LI woman, face-to-face
TUCUMÁN	(F3) MI mixed, 7 people, face-to-face	(I7) LI woman, face-to-face (I8) LI woman, face-to-face (I9) LI man, face-to-face
	(F4) LI female, 9 people, face-to-face	(I10) LI woman, face-to-face (I11) LI mother, face-to-face
TOTAL	4	11

Source: self-produced.

The qualitative study is complemented by data from the ENUT Time-Use Survey (2021) on the time allocated by adolescents, which operates as a context. One of the main findings of this research is that the interviewed adolescents perceive mostly the performance of caregiving tasks as their contribution to the daily family organization, becoming more specific according to socioeconomic level, household composition, gender, and the region where they live.

3 See Annex 1. List of focus groups and interviews. Socioeconomic status was defined following the criteria set by the Sociedad Argentina de Marketing based on the educational level of the primary income earner of the household, if they work as an employee or as a self-employed worker, if they have staff in charge, if they have health insurance and how many people live in the home.

Although the interviewed adolescents attend educational institutions, it is recognized that the performance of caregiving tasks has or may have implications in the management of study time, particularly among adolescents from low-income class. These experiences become more visible among adolescent girls when we analyze the division and distribution of tasks in the home, since they believe that, despite defined equitable arrangements and advances in equality at the sociocultural level, **a stereotypical assignment to women in the family as responsible for caregiving persists.** Gender distinctions are also identified in inquiries about future prospects and the possibility of thinking about themselves as caregivers. In relation to this aspect, the shared perception between women and men from different socioeconomic sectors and both regions is highlighted, regarding prioritizing their “own” projects, oriented to study, job placement and/or starting a family. In relation to the regional dimension, although it allowed us to learn about a variety of experiences in the voices of adolescents, it did not become an important marker of differentiation from which to trace trends characteristic for each territory. However, it is an aspect to be made visible in future research to deepen and expand the analysis on the subject.

Based on the objectives, the methodological design that guided this research, and the themes that emerged in the inquiry, this document is organized in five sections. The first section (2.1) covers the assessment and perceptions of caregiving tasks; the second section (2.2) explores the implications of the performance of caregiving tasks on educational trajectories; the third section (2.3) addresses the division and distribution of caregiving tasks in the home; the fourth one (2.4), the perspectives for the future; and the fifth (2.5) the knowledge of care institutions. Then, in (2.6), a summary of the findings and conclusions of the research is presented.

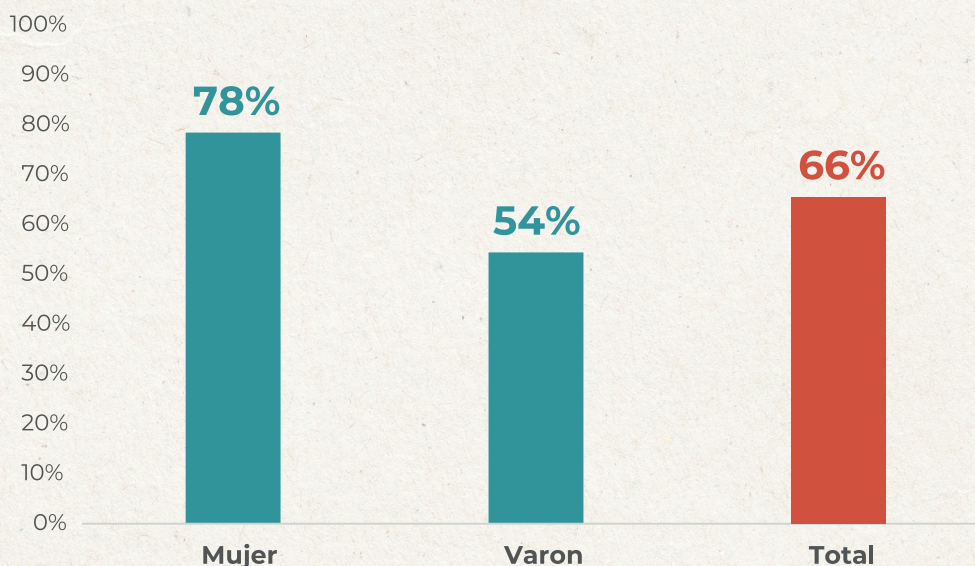
How much time do adolescents spend on caregiving tasks?

According to data from the National Time-Use Survey (ENUT, Encuesta Nacional de Uso del Tiempo) (2021), **66% of adolescents aged 15 to 17 are engaged in activities related to unpaid work**, i.e. unpaid domestic work, caregiving work for household members and support work for other households (family or non-family), community and volunteer work. Specifically, we can say that **almost 7 out of 10 adolescents** spend time every day preparing and serving food, cleaning their homes, washing, ironing or fixing their own or their families' clothes and footwear, repairing and maintaining their homes, making various household payments and errands, shopping, taking care of or supporting various members of the household, and helping their siblings with their homework.

This proportion of adolescents performing various tasks of unpaid work, often simultaneously, shows strong differences between women and men: the proportion among the former is 78%, whereas it is 54% among the latter.

FIGURE 1

Percentage of adolescents aged 15 to 17 engaged in unpaid work.

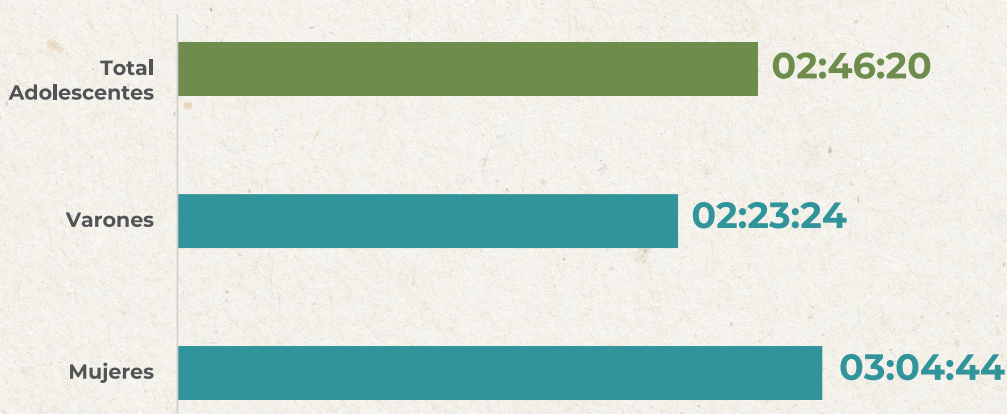


Source: ENUT 2021

In terms of the actual time spent on these activities, it is recorded that adolescents, on average, **allocate 2:46 hours a day to unpaid work**. However, gender differences emerge again: adolescent girls spend more than three hours, and adolescents boys spend little more than two hours and twenty minutes.

FIGURE 2

Average daily time with simultaneity dedicated to unpaid work by sex

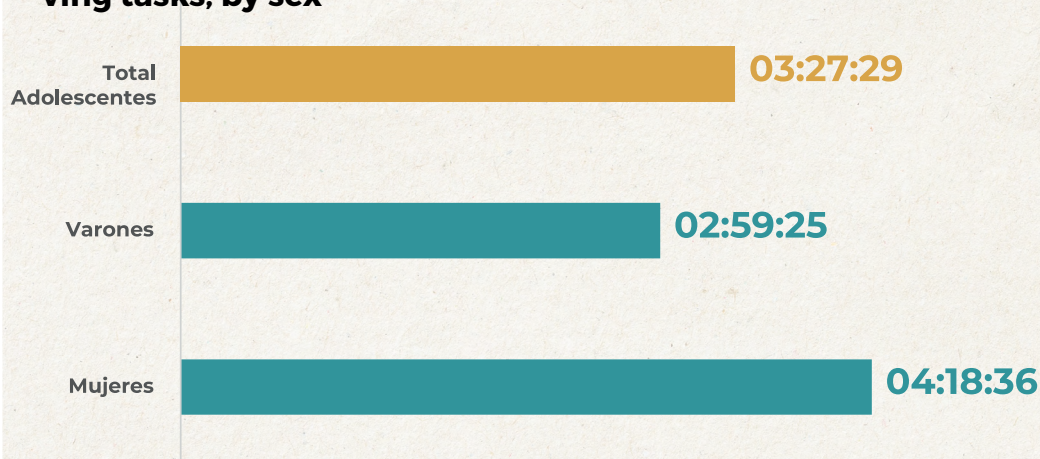


Source: ENUT 2021.

When we focus on adolescents who perform **tasks related to the care** of relatives (whether they are siblings, grandparents, or other members of their household), we observe a **greater intensity in the daily time spent**: it amounts to **an average of 3:30 hours**. However, a difference stands out again between women and men, which is, in this case, more significant.

FIGURE 3

Average daily time with simultaneity dedicated to caregiving tasks, by sex



Source: ENUT 2021.

In this same line, we can identify a sub-group of adolescents who perform these caregiving tasks intensively. Specifically, we refer to 10% of adolescent girls aged 16 and 17 who spend a little more than 5 hours a day on average on these tasks, which interferes with the time available for other educational, leisure, and recreational activities.

The voices of caregiving adolescents



This section presents the interpretative analysis of the selected narratives collected in the field work. The empirical corpus covers key themes and concepts that guided the research and from which recurrent patterns, specificities, and novel aspects are identified in the voices of the interviewed adolescents. The adolescents' names are not real and have been modified to preserve the identity of those who participated in the interviews.⁴

2.1. Assessment and perceptions of caregiving tasks

The permitted learning about the daily involvement of adolescents from different socio-economic statuses in caregiving tasks. Among the activities mentioned are mainly those oriented to indirect care or domestic work, such as cooking, cleaning, shopping, doing the dishes, maintaining common use spaces; and direct care work oriented mainly to early childhood care (siblings and nieces/nephews), elderly people with whom they live, as well as helping with daily hygiene, feeding and caring of pets.

The perceptions of the interviewed adolescents about participation in caregiving in their homes tend to be more associated with ways to "help" or "collaborate" with adults than with unpaid work tasks. These impressions can be interpreted in tune with the low visibility and social recognition of domestic work and caregiving in general (Esquivel, Faur and Jelin, 2012; Batthyány and Scavino Solari, 2018). Likewise, although the interviewees from different socioeconomic sectors said they recognized that these are "important" tasks for daily life, it was recurrent their assessment of their involvement in these tasks as a "minor" contribution in relation to what "they should do". This discourse may indicate the expectations of adults in their families regarding greater involvement by adolescents in "home work".⁵

4 The mother, father or guardian of each adolescent who participated in the interviews signed an informed consent so that the testimonies from this research could be used with the commitment of ELA and UNICEF to preserve their identities.

5 In addition, these demands and expectations regarding the behavior of adolescents can be understood as they relate to certain age stereotypes, according to which this stage of life is usually defined by "inactivity" and associated with prejudices or negative looks such as "laziness" or "passivity". These stigmas tend to focus on those young people who are temporarily disconnected from central institutions in society, such as education and employment (Assusa, 2018).

The type of tasks performed and the number of hours that respondents indicated they dedicate to them varies greatly in relation to socioeconomic status. **In the middle-income class, there is a more recurrent tendency to do mostly indirect care or self-care work**, such as tidying up one's room or preparing their own food and clothing, rather than taking care of other people.



"Mostly, I only cook when I am alone, but for the most part I would say mother and father. But I cook for myself, I cook when I'm alone. There is no one in my house, I cook for myself."
(Oliverio, F1, MI,⁶ AMBA)

"I sometimes help taking care of my brother, other times I cook, but I don't really do much because I spend a lot of time studying." (Mara, E1, MI, AMBA)

"I sometimes clean, but it's not like a regular thing I do. I cook more, because cooking is something that I sometimes enjoy, but I don't usually do it for a matter of time too."
(Verónica, E2, MI, AMBA)

As these testimonies from middle-income class adolescents reveal, the respondents perceive their involvement in caregiving as sporadic or occasional tasks that they assume "when they have time available" and even "for pleasure" or "fun", provided that they do not interfere with other tasks perceived as their primary responsibility, such as studying or attending school.

In addition, among middle-income class adolescents, situations were identified in which their families outsourced care through paid services, a strategy that undoubtedly has a significant impact on the possibility that adolescents in these classes have less time allocated to these jobs:



"Well... My mom cooks, and the cleaning is done by the cleaning lady, but she comes every two days to the house (...) three hours, two hours. Not much." (Tobías, F3, MI, Tucumán/Gran Tucumán)

The lack of familiarization of care through its commodification also emerged as relevant in the childhood memories, as some evoked having been in the care of "babysitters" for some period when they were younger:



"I had a babysitter from the age of 7 to the age of 10". (Matilda, F3, MI, Tucumán/Gran Tucumán)

"I know that my mom told me that when I was born, I spent a month living with my grandparents and they took care of me and everything, but then she got a babysitter and we started living alone" (Clara, E5, MI, CABA)

As for low-income class adolescents, their experiences contrast with those of the middle-income class both in the way in which daily life is organized, as in the perception that the respondents have regarding their "available" or "free" time. **More often than in the case of middle-income class adolescents, low-income class respondents stated that they had**

⁶ MI refers to middle-income class.

regular responsibilities for caring for children in their families, usually younger siblings, nieces or nephews; or even older adults with whom they share the land or housing. The performance of these tasks usually conditions the possibility for another adult in the family to perform paid work. Below, we share three reflections regarding the use of time that are significant in this sense:

"Sometimes I have to take care of my nephew because his mother works, so she brings him to my place and I take care of him, so that's my afternoon. I do the homework, if I have any, and so are my days. (...)

Sometimes it's twice, three times, or at times he stays the night, and she comes to pick him up the following day because there are times when she has to work at night." (Fara, I3, LI, 7 AMBA)

"As I am with my grandmother, I would say as much as three or two hours, because I have to help her and the like; I have to cook, clean my room, tidy up things and her room, and the house too. Because she has a puppy, so it doesn't get bored." (Manuel, I9, LI, Tucumán)

"I do most [housework] because my mom leaves at night and comes back at 10 in the morning. I feed her, [the sister] I tidy up the kitchen, so I do not leave it dirty, and that's it; we go to bed. And then at noon, sometimes my mom comes back and feeds her, and I take her to school, nothing else." (Alan, I4, LI, AMBA)



These interview quotes particularly highlight the perception of involvement in these caregiving tasks as a way to contribute to sustaining the paid work of other adults. By concluding the enumeration of his daily care tasks with the clarification "nothing else", Alan seems to downplay all of his actions. On several occasions throughout the interview, this assessment reappeared: while he stressed that his contribution to the care of his sister and the cleaning of the home were important so that his mother is not "so tired" when she returns from work, he also clarified that he performs these tasks because "he had no other occupations", unlike his other brother who works (on a paid basis) and therefore he was "busier". Manuel shared reflections in a similar direction as he argued that it was he and his mother who took care of most of his grandmother's needs because they were the ones "not working" and who "spent more time at home." In this sense, we can affirm that the circulation of imaginaries that associate "work" with remuneration intervenes on the ways in which adolescents develop perceptions regarding unpaid caregiving.

Involvement in different caregiving tasks influences their daily lives as those assigned responsibilities as caregivers of children and older adults on a regular basis and in support of the work strategies of adults or other members of the household are the ones who most often need to delay the realization of activities oriented to their own recreation or sociability. The following testimonies from low-income class adolescents in AMBA and Tucumán about their participation in the care of younger siblings recognize the responsibility and time involved in these tasks in their daily routines:

7 It refers to low-income class.



"Sometimes, I would want... Like, I want to go to my girlfriend's house, but I can't because of the time and because I have to take care of my sister. Or I have to miss training also to take care of her." (Alan, I4, LI, AMBA)

"When I'm in school the boys, more than the girls, say 'Should we go to the park after school?' I say, 'no because if I go to the park, my little brother won't eat'. I have to go back home, it's like a mandatory routine that I come from school and I start cooking so that the others eat (...). Men do not have the responsibility to come home and cook." (Fermina, F3, MI, Tucumán/Gran Tucumán)

"For example, what I do the most is taking care of my siblings, so I always have to take them to practice, to school, and so on. If they need to buy something, I'm in charge of it. So, **sometimes, I even forget about my own things because, well, we do what they need first, and then we see.** But yes, it takes me quite a while." (Zaira, F1, MI, AMBA. The highlighted is ours.)

These experiences show that, in the same way that it has been analyzed in relation to the intersection of class and gender in the experiences of women as caregivers, the availability of income and the possibility (or not) of using paid care services are central variables for the analysis. In addition, this organization of caregiving tasks acquires specific characteristics linked to the composition of the family group. The number and age of people living in the home and the number of working hours and shifts of parents are factors that influence the experiences of adolescents in relation to caregiving. **In the low-income class, living with older adults and/or with children translates into a greater burden of caregiving work for adolescents, due to difficulties to access paid caregiving services and because people who do paid work sometimes have longer working hours.** However, this correlation between family composition and distribution of caregiving workload was also evidenced in interviews conducted in the middle-income class, in these cases referring to the widespread distribution of these tasks. Of the total of these interviews, **adolescent girls belonging to single-parent families with several siblings or whose parents are separated showed a more frequent involvement in direct and indirect caregiving work.**

The following testimonies from adolescent girls from different socioeconomic sectors reflect the way in which family composition and gender relations have an impact on the distribution of caregiving work.

Zaira lives in a middle-income class neighborhood with her mother and younger siblings, and Sofía, with separated parents, lives in a low-income class neighborhood:



"Well, in my house the situation is a little more complex. It used to be all equal between my dad and my mom, but well, my dad passed away and now we do everything 50-50 with my mom. That is, we both do everything because my brothers are younger, so they help in what they can, but they are little, so it is between us." (Zaira, F1, MI, AMBA)

*"I mean, at least at my dad's house, things like **cooking takes up a lot of my time, or even my sleep**, because I have to prepare food for the night and for the next day, to take to school, so it takes me a lot of time. Then, I don't know, maybe I spend time doing the groceries, and, yeah, it takes up my time. (...) Like, I know my mom sometimes spoils me because she does everything for me, but my dad, it's not that he does it with a bad intention, like he says "no, I am a man" or something like that, but he does it because... Because he doesn't feel like it, and even if I insist, he doesn't do it. Yeah."* (Sofía, 16, LI, AMBA)



Sofía's experience is significant in showing the existence of gender inequalities derived from the traditional sexual division of labor, an aspect which we will explore further later on.

To sum up, the perspectives of adolescents show that participation in direct and indirect caregiving tasks in some cases conditions the availability of time and even affects the ways of approaching their studies, particularly among adolescents in low-income class.

2.2. Educational trajectories

One of the aspects that emerged in the research refers to the way in which the performance of caregiving tasks intersects with the educational trajectories and experiences of adolescents. First, it should be noted that, when asked about their educational situation, all respondents answered that they attended school at the time of the interview. Different testimonies were collected that, among adolescents both from middle and low-income classes, highlighted the continuity of their schooling as a priority when organizing the times of their daily lives. As illustrated by some quotes from the interviews that were reconstructed in the previous section, among the middle-income class there was a recurrent reference to the fact that the performance of caregiving work depended on availability and on it not interfering with their own education.

However, despite these initial clarifications, when investigating and re-inquiring about the reconciliation of caregiving tasks, study, and recreational and leisure activities, some specific experiences emerged in which adolescents had to suspend or miss non-formal training activities (such as sports and community center attendance) due to having assigned responsibilities of caring for younger siblings. These situations were most frequently found among the low-income class population, as already anticipated by the Alan's experience, from AMBA, who mentioned that he had been absent from his soccer training when they coincided with his mother's working hours and when he was in charge of taking care of his sister.

In the situations reported in the focus groups, they were present in the exchange and conversation between adolescents. Specifically, there were instances in which several girl respondents had to suspend or miss school and recreational activities, as shown in the following extract corresponding to the focus group 1, from the middle-income class from AMBA.



"The other day, to take care of her [my youngest sister] I had to miss PE (...), sometimes I miss hanging out with my friends or talking to them. Those things. Nothing very serious, I never had to miss school." (Gisella, F1 MI, AMBA)

"Sometimes my friends say 'come to my house' or something like that, and it's like 'No, I have to take care of my sister'..." (Zaira, F1 MI, AMBA)

These dialogs between adolescents show that, while being absent from school in the scheduled time is perceived as a serious situation to which they "do not get to," involvement in caregiving work may condition participation in certain school or extra-school activities that take place during the after-school hours. In addition, the need to organize schedules and make plans in advance to participate in recreational spaces stands out. While adolescents in this research can keep the continuity of their studies, the way of experiencing socialization spaces and the availability of time to study or participate in other training activities are in many cases conditioned by the performance of caregiving work.

In some instances, having time to study, prepare for exams, or do school projects involves negotiating with other adults in the household, which becomes especially complex in cases of single-parent households. Sofía's testimony demonstrates instances in which taking indirect care work, such as cleaning the home or preparing meals, is perceived as a factor that makes educational trajectories more complex. She splits the time of her week between being at her mother's and her father's house, who are separated, and she stopped, specifically, to highlight some tensions that arose from living with them:



"I told him a lot of times [to the father] that maybe there are little things that my dad can help me do and he does not do them because... I say, 'I have to go to sleep because if not, I won't sleep at all and I won't do well in school' but no, he doesn't do it." (Sofía, separated parents-I6, LI, AMBA).

This **tension between the time required to study and the time they should devote to care emerged** as a recurring reflection when inquiring, as discussed below, about the expectations for the future and the reconciliation between studying and the caregiving of dependents. This is the testimony of one of the respondents, who is the mother of a child:



"I'm in my third year; it lasts two years. (...) I go to school in the afternoon and my mother stays with him, or his father comes and stays with him." (Romina, mother, I11, LI, Gran Tucumán).

The quote shows the family strategies that the adolescent-mother must implement to continue her studies in the absence of policies of care articulated with the educational offer; at the same time, it can be noted that the first option of care is the child's grandmother and not the father.

When reconstructing the reasons why she had abandoned her studies for a while, Romina specifically emphasized that, although she had the intention of continuing her studies in an expedited secondary-education program and of graduating with her classmates, the lack of offer of this type of study modality conditioned her possibilities:

"The plan was that I would continue studying after his birth. But my school discontinued the expedited program. I was going to do that and graduate with who were my classmates, but the principal had already discontinued the expedited program because nobody was attending. So I missed a year, and my mom had to search for another school. It turned out that there was a place near home where they were offering an expedited program, and I ended up studying there." (Romina, mother, I11, LI, Gran Tucumán).



This testimony serves as an example of the difficulties that emerge when reconciling care-giving work with the educational trajectories of adolescent girls. Romina's reflection shows that the strategies offered by the educational system to help students, both in relation to the educational offer and care services, present a challenge when it comes to guaranteeing the continuity of adolescent mothers' schooling. These shortcomings often result in intermittent educational trajectories, which depend to a large extent on the resources available to each family to support access to educational services (in her case, the help of her own mother, her sister and, occasionally, with the collaboration of her child's father).

2.3. Division and distribution of **care tasks** at home

When asking about family organization and the distribution of tasks, it is important to note the presence of certain stereotypes and inequalities associated with the traditional sexual division of labor. While early responses in both focus groups and individual interviews often pointed to a "distribution of tasks" "among all," when inquiring about what tasks each household member performed, differences often emerged between the tasks assumed by their mothers and those performed by their fathers; or even tensions arose in relation to the divi-

sion of tasks between brothers and sisters and the way in which gender inequalities shape this distribution. Below, we share some illustrative testimonies of this situation that emerge from the focus groups:



"I think that the vast majority, for me, in general, it is always the mother who does almost everything. Maybe it can be distributed, from time to time." (Valeria, F1, MI, AMBA)

"My mom does most of the cleaning. My sister helps her, but my mom does most of it, and I help her with something else." (Daniel, F3, MI, Tucumán/Gran Tucumán)

"My mom always did everything, she took care of the house, cooked. And my dad did not. No, he never did. I mean, before, when he lived with my grandmother, she did everything; and, when he became independent, no, it was like living with an adolescent. Like, he did not keep... And nowadays it's the same thing. He does not maintain order nor cleanliness. Also with cooking. He knows how to cook, but the basics. And that's all." (Sofia, I6, LI, AMBA)

The assessments that emerge from these testimonies show that, in the daily distribution of tasks, arrangements replicate the traditional sexual division of labor, expressed in the tendency for women to take over most of the caregiving work. When investigating the ways in which this distribution is constructed on a daily basis and how it functions, perceptions emerged that tend to associate cleanliness and order as more "typically feminine" characteristics, suggesting, for example, that women tend to be "more detail-oriented" and are the ones who perform these tasks more adequately, as illustrated in the following fragments of focus groups statements:



"Because women themselves pay more attention to details, they tend to worry more about cleaning. Men don't pay... They don't pay that much attention." (Alicia, F3, MI, Tucumán/Gran Tucumán)

"I think it's more for the female role and the cleaning role because it is detailed-oriented, which is more present in women than in men (...). And well, I share tasks with my mom. She does it when she is back from work and my little brother helps me." (Matilda, F3, MI, Tucumán/Gran Tucumán)

As analyzed in the following section, **it was more frequently women who identified their participation in caregiving work as a formative and "preparatory" contribution for adult life, suggesting that they imagine themselves doing this work in the future. In the case of men who perform caregiving tasks, they experience it more often as a temporary situation, which could change in the future when they start having paid work.** When adolescent girls reflected on the decision to have or not to have children, they evoked on different occasions the "big responsibility", the necessary workload and resources, and even the "burden" that implies motherhood. These reflections can be thought of as ways of processing the experiences they live in their homes, in relation to the conditions in which they are raised, marked by the distribution of tasks at home with a strong gender inequality and the availability (or not) to each household of policies guaranteeing time, money and services for childcare.

While this last point does not appear as a problem, the adolescents girls do reflect on how gender stereotypes and the sexual division of labor are constructed:

"Men are always given balls and all that as presents when they are little. And what do women receive? Kitchens, dolls, babies and all those things". (Matilda, F3, MI, Tucumán / Gran Tucumán)

"Because women raise them. Since you are a little girl, you are taught that you must perform caregiving tasks. That is, women have more responsibility than men, than boys. In other words, men are more into playing, that is, having fun, and women are more into... I don't know, women are taught, since they are little, about things an adult woman should do, as a general responsibility. They are taught that, I don't know, they have to cook, they have to take care of themselves..." (Tobías, F3, MI, Tucumán/Gran Tucumán)

"I feel that there are some tasks that, for example, my brother could do, but he doesn't... That task is not assigned to him because he is a boy. (...) They always assign household chores or caring for children and stuff to women, but men are also able to do what women do. Being male doesn't mean that they cannot set the table, wash dishes or help with some tasks, even if it is a simple one." (Nahir, I8, LI, San Miguel de Tucumán)



In addition, they highlight changes with respect to gender stereotypes in their generation compared to that of their parents and grandparents.

"My grandmother tells me 'serve some tea to you brother,' and I say, 'but he has hands, let him do it!'" (Fermina, F3, MI, Tucumán/Gran Tucumán)

"Nowadays, this has changed. Before, going back to my mom's example, in her house, she had to tidy up, take care of her brothers and maybe, as her siblings were boys, it was like 'chill out, she has to do it because she is a woman', and well, today at home, even though my brothers are younger, they do what they are able to do. There is no difference because I am a woman or because they are men, but perhaps more than anything because of our age, and there are things that I can do and they can't. In that sense it has changed." (Zaira, F1, MI, AMBA)



Tensions regarding the possibilities of reconciling caregiving work with other expectations for the future, such as work and educational trajectories, emerged as a relevant aspect in the reflections about life projections of adolescents.

2.4. Perspectives for the future

Faced with the question of how they imagine their lives in the short- and mid-term future, most of the respondents from different socioeconomic sectors and in the two regions analyzed highlight their plans of having a university degree, finding employment and having a professional career, and/or starting a family and a home of their own. Both in AMBA and Tucumán, the testimonies refer to the vocation to favor “their own projects”, defined in terms of autonomy in decision making and the expectation of developing work, training and family plans at different stages or moments of their lives. It is interesting to note that the plan of “continue studying” was expressed by adolescents from different socioeconomic classes, and was not something exclusive of the middle-income class. This finding allows us to reflect on the positive opinion that adolescents have of their own training as a desirable means to access a better life.

Uriel is the second of three brothers; they all live together with his mom and dad, although sometimes, his father has to leave for some time to take care of the paternal grandmother. Uriel considers that he does most of the household chores, and sometimes takes his brother to school. When asked how he saw his life in 10 years, the answer was as follows:



“Well... I want to have my own life. A job, a career. I want to think of me first.” (Uriel, F3, MI, Tucumán/Gran Tucumán)

In the same focal group as Uriel, there were other interventions sharing the expectation of prioritizing their “own” projects in the future, and the desire for economic independence, as goals to be achieved before undertaking a family project or being able to assume caregiving responsibilities as parents. During this exchange, the conversation goes round the **expectation of prioritizing the development of personal projects when making decisions regarding their own training and job placement before “starting a family”**:



“Having children and a family never caught my attention as something I would want, but having a partner or being independent does. I would want to get a professional degree.” (Fermina F3, MI, Tucumán/Gran Tucumán)

“Me too, to have a job after finishing my studies, and to have a partner, and then to start a family.” (Débora, F3, MI, Tucumán/Gran Tucumán)

“Right, me too. When I have a job and my things, then I would start thinking of having a partner and a family.” (Matilda F3, MI, Tucumán/Gran Tucumán)

In the interview with Alan, who has already been quoted, a similar reflection is observed:

"I would like to have my own things first, and then I would have children, and start a family. (...) finish doing everything, and have a permanent job, my house and my things. And then, I would."
(Alan, I4, LI, AMBA)



In the case of the testimonies of adolescent girls from low-income sectors of AMBA, this expectation of studying at university and developing professionally was also identified:

- (I imagine myself) studying what I want, graduating, and maybe then starting a family, if at that moment, I am sure of it. I don't know, at the moment, I don't think so [laughter]." (Mariel, F2, LI, AMBA)

I want to have a life of my own, be independent. To work or do what I like. And maybe start a family at 26 or 27 years old. (...) I don't know, it could be, but more than anything, I want to do what I like and to be able to study and work in something I like. (Nina, F2, LI, AMBA)



While some of the participants imagine the possibility of reconciling these projects with "starting a family", others indicate that they are not sure of assuming that responsibility without achieving economic stability first. This is connected to assessing the time and effort involved in caring, but also to the higher expenses associated with having a family:

"I would like to have my house. I want to become independent as quickly as possible. Having a family... I don't see myself in that. [laughs] It's a responsibility you have and..." (Lucrecia, F2, LI, AMBA)

"You have to be economically well positioned. You need to have a house." (Dalia, F2, LI, AMBA).



The testimonies gathered in both regions help to identify the shared opinion of adopting strategies that would allow them to develop initiatives and projects for their careers, their jobs and their families, although not simultaneously. Particularly, when considering themselves as potential future caregivers, and specifically, with regard to the decision of having or not having children, **there are recurrent reflections showing the perception that reconciling or combining family projects with professional or work expectations is a difficult matter to overcome.** The idea that caregiving, and especially caring for kids in early childhood, involves a great responsibility that takes time and is difficult to delegate or externalize was evident in the interactions, particularly with adolescents girls.

The following testimony highlights the connection between the difficulty of reconciling university studies and childcare, and the expectations of not repeating the experience lived by the mother of the respondent:



"My mom left her career when I was born. That's why I wouldn't like to do it myself, because I would like to have children after I've finished my studies. My mom has just finished her career, she graduated just now, and well, I feel like it's like a bigger sacrifice because then you have to start over and you don't know... I prefer to finish with that and then have a child or something like that.

(...) having children is a very big responsibility that consumes a lot of your time, and if you study at the same time... I mean, I wouldn't have so much time to study, and that is really important to me." (Mara, E1, MI, CABA)

In terms of gender, some of the **respondents identify the distribution of tasks as a desirable goal if they were to live with a partner and/or with more people in the household.** The majority of the interviewed women, from different socioeconomic sectors in AMBA and Tucumán, said the following.



"It would be important that (the partner) likes to cook, I mean, to take care of the house. It's ok if they don't do it because they are working, if they are working, you know? But then they do it when they arrive, so... 50 and 50." (Ana, F1, MI, AMBA)

"If I ever live with a friend or with a partner, it's the same thing. I think we should share the tasks. For example, are we going to rent a place? Let's say I have an apartment of my own, so I tell my friend: 'one day we could move in together', right? Well, the two of us work, pay the bills, cook, set the table, and so on, between the two of us. Or with my partner, if I have one at that moment." (Zenía, F2, LI, AMBA)

"I say it would have to be 50/50. Not doing too much or too little. Like, distribute each task for each person. For example, if there are four people, you could, I don't know, it depends on the tasks, you could assign two tasks each. Or sometimes if one person is busier than the other, it is okay for the others to take on those tasks. The point is that they should help live together better." (Gimena, F4, LI, Tucumán)

Other testimonies highlight the learning that derives from performing caregiving tasks for a future stage (for "adult life"). This appreciation of the formative contribution of caregiving work as a preparatory stage towards the future can be observed in the testimony of one of the interviewees from AMBA, who lives with her parents and two older brothers, with whom they take turns to do domestic chores such as cleaning the house, clearing the table, cooking or washing the dishes. When asked about the importance of these tasks, she replied:



"They are important for when I have my house and my things, and I need to have everything in place." (Fara, I3, LI, AMBA)

In the case of the testimonies of two of the men interviewed, it is worth noting that they perceive that they perform caregiving tasks in their homes "because they are not working", but that they would prefer not to perform them in the future. One of the interviewees said that he plans to do the training course to enter the Airport Police when he finishes secondary

school. He is “super decided”. When asked particularly about future expectations, regarding home care arrangements, he said:

*“It would depend on my job, because **if I’m all day at work and I can’t (do chores at home), it will have to be done by the girl I’m with.** She would have to take care of it.”* (Alan, I4, LI, AMBA)



When asked about the caregiving tasks he imagines performing, and those he might delegate to someone else (his partner), Alan emphasized: “I don’t want to cook anymore.”

Manuel, from Tucumán, shared a similar opinion regarding the division of tasks in the future home. He would like to pursue a career in professional soccer in the future and hairdressing as a part-time occupation. When asked about the organization of the household and caregiving tasks in the house, he replied:

“I think my wife would be the housewife, or maybe I won’t have a permanent job, and I would be the one doing the housework, but I think that, having a permanent job and depending on the schedules of that job, I would continue helping and everything, whether my wife is a housewife or else. I think I would continue to help.” (Manuel, I9, LI, Tucumán)



The assessments of these adolescent boys about the caregiving work they perform themselves can be thought of as the reproduction of certain senses of masculinity and the duties of the man as a provider, and as mandates linked to contributing to the household mainly with an economic income.

Finally, **with reference to the question on strategies for future care of children, different opinions of respondents from the middle and low-income class coincide in that they would not outsource the care of a child to a nanny but would solve it through family arrangements: “I would ask my mom or sister for help.” In the case of middle-income class, the possibility of outsourcing paid indirect care is mentioned: “hire someone to help me with the cleaning.”** Among adolescents from low-income class, the resolution of home care through family arrangements was frequently mentioned.

“I think that I would hire someone for the cleaning, and I would take care of my child or my partner.” (Mara, I1, MI, CABA)

“I wouldn’t like someone else to take care of them because I’d rather do it myself than someone else (...). I think most people who hire nannies... You have a child, don’t you? You’re not at home all the time and, then, there’s the nanny. It’s like you miss that bond with your child. You miss that, you do not know very well what they like, what they don’t like, whether they are allergic or not, or if something happens at school, or the like. That is why I prefer to stay at home and from time to time go out, but I would teach them the basic things.” (Milena, I7, LI, Tucumán)



These testimonies account for the **assumption that good care is the one provided by women in domestic spaces, naturalizing a form of motherhood in which they are the main responsible and best trained people to care for children, especially during early childhood.**

This “maternal” representation and the tasks assumed to be of “the mother” have an impact in those respondents who answered that they would want to be mothers in the future, even if not in the immediate future. The example below illustrates this:



Interviewer: Would you take them to a childcare center?

Paulina: No, no, I guess that's what I'm for. I am the mother, well, I would be the mother. No, I would take care of them.

Interviewer: In your opinion, would you have to do those tasks or would you distribute them?

*Paulina: No, obviously **he could help me, but I think I would have to take care of them, because I am the mother.** And I would have to take care of everything. That they are at school, that they do the homework, that they are bathed, that they eat. For me, that is my duty. Well, it would be my duty. Beyond being a woman, in my opinion, although it is a little sexist, I think I am responsible for that. It seems to me the most normal thing to do.” (F4 LI, Tucumán)*

The opinions describe the responsibilities of caregiving as a mandate of the mother, whereas the man occupies a secondary place of “help”.

2.5. Knowledge of caregiving institutions

This section addresses the knowledge of adolescents about the available caregiving offer and its characteristics. Particularly, when asking about the knowledge of caregiving institutions or spaces, there was a lack of information about them. Several of the interlocutors responded, first, by referring to the institutions that they were involved in as caregiving recipients, mainly by describing elementary and secondary schools that they had attended or knew in the vicinity of their neighborhoods. In general, there is less knowledge about the provision of care and support for older adults and people with disabilities.

In relation to educational institutions, they mentioned the need to improve the infrastructure and services provided by these schools, emphasizing the quality of food, hygiene and bathroom supplies, or highlighting relevance of expanding the educational offer and the vacancies.

"More state schools, yes. And better schools, like, the state of the building. At least in my case, I attend a state school that is falling to pieces. The food could be way better. All those things should be improved. To tell the truth, the cleaning too... At my school, for example, you can't go to the bathroom because of how dirty they are." (Mara, I1, MI, AMBA)

"The truth is I do not know, in the case of the state schools I think of myself... Because I went to an elementary school near my house, but not high school. I'm thinking about attending high school near my house. There wasn't enough space, there were too many kids, too many vacancies and not enough room. It was very full. I think that, for state schools in general, that's the case. They need a little more budget for the building, too." (Verónica, I2, MI, AMBA)

"At my school, they don't even have toilet paper or anything to wash your hands. You don't even feel like going to the bathroom [laughter]." (Lucía, F4, LI, Tucumán)



Regarding other caregiving or support services, such as those aimed at older adults or people with disabilities, some interlocutors talked about spaces that provide this type of care, referring to relatives who had needed them. The testimonies suggest a knowledge of caregiving spaces mostly linked to their own experiences and to the emerging needs in their family, but little knowledge of these institutions in a broader sense. The following quotes refer to public management institutions:

"My uncle is disabled, so he's like in... It's not, it's not domestic chores. My dad takes care of him because he is in an institution. I mean, he handles those things, he goes to visit, gets him medicine, things like that (...). I'm not very aware of the subject, no, that's... He takes care of that." (Verónica, I2, MI, CABA)

"He (his brother) goes to a CET (Early Stimulation Center), a place with many children with disabilities, where he learns how to do things, because he is young, he is only 10 years old (...). And there, they teach him to do things, to paint, a lot of things. I have been there. It is very clean. I don't know why, but it's very clean. I think it's public (...). I think there should be a hospital nearby, because there isn't a hospital nearby actually. It's far away. There should be a hospital, at least a CAPS (Primary Health Care Center), or something." (María, F4, LI, San Miguel de Tucumán)



One of the respondents, an adolescent mother, identified the demand for a "day care center" or early childhood center in the neighborhood:

"There should be a public day care center... because usually in the neighborhood only the dads work. So the moms are always at the house (...). The neighbors want to do a day care center, but it's difficult because they are required to have this and that. And as they also have children, it is already hard for them to organize themselves (...) because everyone has children, and they are very close in age. Some are only months apart, or a year at most; they are all very young. (...) most are moms between 13 and 17 years old; they are young moms. In my opinion, it would be a good idea for the commune to organize it." (Romina, mother, I11, LI, Gran Tucumán)



Unlike other respondents in Tucumán who live downtown, Romina lives in a rural commune located 45 kilometers from the provincial capital. This is key to highlight some of her concerns regarding the provision of caregiving institutions for young children, which is generally the responsibility of women in the community. In addition, her testimony is an example of the inequalities when comparing urban centers and rural areas throughout the country. In addition to the difficulties mentioned by Romina to find a solution for the care of young children, commuting from the town where she lives is difficult, conditioning access to public health care services, as the community has only one “dispensary” with specific working days to get care, and the nearest hospital is more than 30 km away:



“I have the dispensary near my house, where the pediatrician works (...). There are certain days that the doctor goes, and everybody goes. There is the pediatrician, the obstetrician, and so on.”
(Romina, mother, I11, LI, Gran Tucumán)

In the case of some adolescents from low-income class, their experiences in different community-based caregiving spaces emerged, as well as forms of neighborhood organization and voluntary work carried out thanks to religious institutions. Among some examples it stands out the participation of some respondents from AMBA and Tucumán/Gran Tucumán in spaces for childhood recreation, houses for youth, maintenance of public spaces carried out among neighbors, preventive talks on drug consumption:



“I am like... It is not the exact word, but like a coordinator of a group of 12- and 11-year-old children. Every Saturday, I prepare recreational activities for them. We give them both games and education. I am Jewish, so it is a Jewish community where we provide that, Jewish education and also value formation. And well, we teach them through play so they do not get bored. I do it every Saturday. We go camping, summer camp, winter camp, and my friends do the same too.” (Sofia, I6, LI, AMBA)

“At a nearby park, some days a [political] organization offers snacks, and all the kids go there, and they stay there for a while (...).” (Romina, mother, I11, LI, Gran Tucumán).

“I think the school (...) that is near my house. They are in charge of the center of people with disabilities and the like (...). They have like a home (...). They get housing and everything, and they provide care and those things. I also saw that sometimes they go out and distribute food for poor people.” (Manuel, E9, SP, San Miguel de Tucumán)

There was also a concern about the vacancies of caregiving spaces aimed at older adults:

"In caring for the elderly, because there are many older people who live alone in the neighborhood, and well, sometimes their children come to visit them, to take care of them (...). Some older ladies live alone, maybe because they are widows, and they live alone. And it would be, I think, it would be beneficial if they had some company." (Manuel, 19, SP, San Miguel de Tucumán)

"They could add one, as I said, there is no nursing home for either children nor the elderly nearby. They could add one because, maybe there is nobody in the neighborhood who needs it, but somebody else might, and we could help them, even if they are not from the neighborhood. Also, there could be a community kitchen, among all the neighbors." (Nahir, 18, LI, San Miguel de Tucumán)



The findings reveal that adolescents from different socioeconomic sectors identify educational institutions as spaces of caregiving, where they are recipients, and, in some cases, where they contribute to the well-being of students and the educational community. When inquiring about other institutions, some respondents from middle and low-income class mentioned childcare institutions, nursing homes for older adults and persons with disabilities, although they did not know about their functioning and management. Community participation in the neighborhoods they live in (through voluntary days, diners, coordinating recreational spaces for children) became more frequent among the low-income class. These experiences show that **adolescents recognize social organizations as providers of care and, in some cases, even have an active role in generating community care.**

Findings and conclusions



The study shows that adolescents play an active role as contributors to the caregiving strategies of their homes. This evidence breaks with the historical view of understanding this age group only as people to be cared for. The findings allow us to understand the involvement of adolescents identified in tasks of direct and indirect care, with consequences for the current and future development of their lives. The ways schedules are organized, and the way they perceive their contribution of caregiving work are marked by class and gender, and become more specific according to the family composition.

One of the main aspects covered in the research was oriented to the analysis of the implications of care in the educational trajectories of adolescents. In relation to this issue, the initial responses in middle and low-income class share that school continuity is a priority in the development of their life projects. **Although all of the adolescents interviewed were attending school, their ways of experiencing educational trajectories vary according to their involvement or not in caregiving work.** The burden of caregiving tasks has an impact on their study time (to perform schoolwork and prepare for exams, among other issues), on their school performance and on the time available for rest and leisure, affecting the quality of life. In this sense, differences are observed depending on the socioeconomic sector. In some of the testimonies gathered among **adolescents from the middle-income class, they are involved in indirect caregiving tasks as long as it does not interfere with activities defined as priority, such as study, or even with leisure and recreation activities. Contrary to this dimension are adolescents from low class, whose participation in caregiving tasks is interpreted as support for an adult to work a paid job.** This situation, detected in the two regions, tends to be identified mainly in single-parent households with one or more children, and in households with mothers and/or fathers who work long hours outside the home, and where there is no possibility of outsourcing paid caregiving services.

The third objective addressed refers to family organization, and the division and distribution of caregiving tasks. Regarding this aspect, references to "collaboration" with the caregiving management at home were recurrent among the respondents from both regions. Other recurrent responses were that their homes had gender-equitable organizational schemes ("sharing of tasks", "altogether"). However, when inquiring about what tasks are carried out and who is in charge of them, the testimonies showed the inequality in the distribution and the schedule, identifying the women in the household, mainly the mothers, as those who assume the responsibility of care.

Another trend identified in relation to perceptions on participation in caregiving tasks at home is one which associates these tasks with a formative process for a future stage of their lives. This finding refers us to the fourth aspect addressed in the research objectives, in which we inquired about the perceptions of the future of caregiving adolescents. The notion that performing caregiving work is a way of "preparing" for adult life appeared, particularly, in the testimonies of adolescent girls, with a tendency to think of themselves as caregivers in the future, and also revealing a perception of the difficulties that can entail reconciling paid work, education and care. The views of adolescent boys on this issue, including those assigned direct or indirect caregiving tasks, pointed out that they imagine themselves working on a paid basis in the future, and that this job would take time away from caregiving activities, so they would delegate caregiving to other people with whom they could potentially live, mainly women.

Also, gender specificities were identified when analyzing how they imagine the management of future caregiving tasks. Some of the testimonies of adolescent girls warned of the tensions and difficulties in reconciling the “burden” of taking on the tasks of caregiving and the possibility of undertaking future projects (“it takes time”, “first start a career, and then have a family”). In other quotes, personal projects associated with traditional logics of the sexual division of labor are manifested.

While care appeared mostly as a private problem of each family, when specifically asked about the policies and institutions in place, adolescents reflected on several occasions on the relevance of these institutions, and their vacancies as an issue that harmed the organization of family care. This appeared with greater relevance in adolescents from low-income class, who depend to a greater extent on public and community services, and tend to have a greater territorial settlement.

Finally, the research paper exposes that performing caregiving tasks has implications in the development of life projects of adolescents, which cover their educational experiences, time of self-care, leisure and recreation. The regional dimension in these cases allows us to know the subtleties of a variety of experiences and care practices in adolescence. However, it does not show specific differences in family strategies and arrangements for home care, nor in future prospects among adolescents from different socioeconomic sectors. More research is needed, especially on the differences between urban and rural areas. Regarding the socioeconomic dimension, the insights of adolescents show that, while for the middle-class sectors the tasks of caregiving are carried out as long as they do not interfere with recreation, leisure and study, for the low-income class, they assign responsibilities that must be prioritized to guarantee the organization of families and that adults can go out to work.

Lastly, the gender dimension in this analysis was relevant. The unequal impact of caregiving tasks was most strongly manifested in how they condition future projects. As for the interviews with boys, many of them have assigned caregiving tasks that they assume without this questioning their masculinity, but these are seen as activities that will become the primary responsibility of their female partner when they have their own family. In addition, adolescent girls have expressed their expectations that indirect caregiving tasks (shopping, cooking, cleaning, washing, etc.) will be shared with those living with them in their adult life (whether they are partners or friends); however, in relation to the care of children, the idea of assuming the role of main caregiver appears in the stories, highlighting the tension with other training and work projects.

In summary, this study contributes to placing on the agenda the role of adolescents as caregivers, and the effects that assuming these responsibilities has on their present and future trajectories. It is a reference to inform this debate and support the decision-making that will guarantee the rights of all adolescents.

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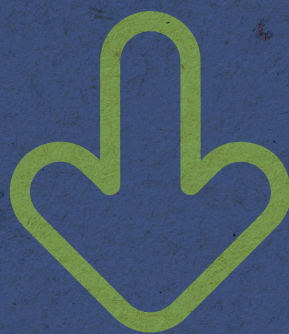
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Anexes



1. LIST OF FOCUS GROUPS AND INDIVIDUAL INTERVIEWS

DATE (DD/ MM/YY)	TYPE	REFERENCE	SOCIAL STATUS	GENDER	AGE	MODALITY	REGION
6/9/23	Focus group 1	F1	Middle-income class	Mixed	Between 15 and 17 years old	Face-to-face	GBA
7/9/23	Focus group 2	F2	Low-income class	Female	Between 15 and 17 years old	Face-to-face	GBA
11/9/23	Individual 1	I1	Middle-income class	Woman	15 years old	Virtual	GBA
12/9/23	Individual 2	I2	Middle-income class	Woman	15 years old	Virtual	GBA
18/9/23	Individual 3	I3	Low-income class	Woman	17 years old	Virtual	GBA
18/9/23	Individual 4	I4	Low-income class	Man	17 years old	Virtual	GBA
19/9/23	Individual 5	I5	Low-income class	Woman	17 years old	Face-to-face	CABA
19/9/23	Individual 6	I6	Low-income class	Woman	17 years old	Face-to-face	CABA
26/9/23	Focus group 3	F3	Middle-income class	Mixed	Between 15 and 17 years old	Face-to-face	Tucumán/ Gran Tucumán
26/9/23	Individual 7	E7	Low-income class	Woman	15 years old	Face-to-face	San Miguel de Tucumán
26/9/23	Individual 8	E8	Low-income class	Woman	15 years old	Face-to-face	San Miguel de Tucumán
26/9/23	Individual 9	E9	Low-income class	Man	16 years old	Face-to-face	San Miguel de Tucumán
27/09/23	Focus group 4	F4	Low-income class	Female	Between 15 and 17 years old	Face-to-face	San Miguel de Tucumán
27/09/23	Individual 10	E10	Low-income class	Female	17 years old	Face-to-face	San Miguel de Tucumán
27/09/23	Individual 11	E11	Mother Low-income class	Woman	17 years old	Face-to-face	Gran Tucumán

2. FOCUS GROUPS AND INTERVIEWS TRANSCRIPTIONS

The following files are attached:

- I1.** CABA Individual interview 1 MIDDLE-INCOME CLASS WOMAN.
- I2.** CABA Individual interview 2 MIDDLE-INCOME CLASS WOMAN.
- I3.** GBA Individual interview 3 LOW-INCOME CLASS WOMAN.
- I4.** GBA Individual interview 4 LOW-INCOME CLASS MAN.
- I5.** CABA Individual interview 5 LOW-INCOME CLASS WOMAN.
- I6.** CABA Individual interview 6 LOW-INCOME CLASS WOMAN.
- I7.** TUCUMÁN Individual interview 7 LOW-INCOME CLASS WOMAN.
- I8.** TUCUMÁN Individual interview 8 LOW-INCOME CLASS WOMAN.
- I9.** TUCUMÁN Individual interview 9 LOW-INCOME CLASS MAN.
- I10.** TUCUMÁN Individual interview 10 LOW-INCOME CLASS WOMAN.
- I11.** TUCUMÁN Individual interview 11 LOW-INCOME CLASS MOTHER
- F1.** GBA Focal Group 1 MIXED MIDDLE-INCOME CLASS.
- F2.** GBA Focal Group 2 FEMALE LOW-INCOME CLASS.
- F3.** TUCUMÁN/Gran Tucumán Focal Group MIXED MIDDLE-INCOME CLASS.
- F4.** Gran Tucumán Focal Group MIXED MIDDLE-INCOME CLASS.

