## MAIN CAREGIVERS IN THE HOUSEHOLD ACCORDING TO SEX

## AVERAGE TIME SPENT ON CARING OR NURSING ACTIVITIES



|  | The number of caregive rs <br> (thousa nd) | Particip ation rate (\%) | Average time spent by all caregiver s (hours:mi nutes) | Total tim $(10,000)$ | (\%) |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Female | 3,329 | 38.6\% | 1:00 | 333 | 76.4\% |
| Male | 2,008 | 21.4\% | 0:31 | 104 | 23.8\% |
| Both sexes | 5,336 | 32.2\% | 0:49 | 436 | 100.0\% |

Data: "Comprehensive Survey of Living Conditions,"
Ministry of Health, Labor and Welfare (2007)

Data: Survey of working conditions of care workers, Care Work Foundation (2006)

## CARE WORKERS ACCORDING TO SEX AND THEIR EMPLOYMENT SITUATION

|  | N | Regularly <br> employed | Part-time <br> employees | Unknown |
| :---: | ---: | ---: | ---: | ---: |
| Female | 23,330 | $60.7 \%$ | $39.2 \%$ | $0.1 \%$ |
| Male | 5,681 | $86.9 \%$ | $12.9 \%$ | $0.1 \%$ |
| Both sexes | 29,124 | $65.8 \%$ | $34.1 \%$ | $0.1 \%$ |

Data: Survey of working conditions of care workers, Care Work Foundation (2006)

## CONTRACTUAL CASH EARNINGS ACCORDING TO SEX

|  |  | Ave. age | Ave. service years | Contractual cash earnings | Without overtime allowance | Other allowance ('000yen) | Estimate of annual earnings ('000yen) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| All | Male workers | 41.9 | 13.3 | 372.4 | 336.7 | 1078.4 | 5118.8 |
|  | Female workers | 39.2 | 8.7 | 241.7 | 225.2 | 568.4 | 3270.8 |

Data: "Basic Survey on Wage Structure," Ministry of Health, Labour and Welfare (2007)

## IV Proposals by the Council for Gender Equality (2008)

- Promotion of employment and social participation of elderly people of both sexes
- Improvement of systems and environment that increase the economic independence of elderly people
- Support for the independent living of elderly people within families and communities
- Ensuring initiatives in medical services and preventive care taking into account differences between women and men
- Constructing foundations for quality healthcare services
$\Rightarrow$ Those proposals were carefully taken into account at the formulation of the Third Basic Plan for Gender Equality.

