ASSESSMENT OF CHILDCARE SERVICE NEEDS

FOR COMPANIES AND THEIR EMPLOYEES IN MEXICO'S INDUSTRIAL ZONES

ICRW
INTERNATIONAL CENTER FOR RESEARCH ON WOMEN

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LIST OF ABBREVIATIONS

CECI	Centros de Educación y Cuidado Infantil (Childcare and Education Centers)
ECLAC	Economic Commission for Latin America and the Caribbean
ILO	International Labour Organization
IMCO	Instituto Mexicano para la Competitividad (Mexico Institute for Competitiveness)
IMSS	Instituto Mexicano del Seguro Social (Mexican Social Security Institute)
INEGI	Instituto Nacional de Estadística y Geografía (National Institute of Statistics and Geography)
UNICEF	United Nations Children's Fund

EXECUTIVE SUMMARY

The lack of affordable childcare services for the Mexican population is one of the main obstacles to women's participation in the labor force. In industrial areas where it is difficult to balance childcare responsibilities and work due to incompatible work schedules and shifts, women's entry into and continued participation in the formal labor market are negatively impacted.

ICRW-Americas conducted this assessment to identify the childcare service needs of companies and their employees in the industrial zones of Nuevo León and the State of Mexico, with the aim of proposing a funding model that is viable for both the government and the private sector.

The fieldwork consisted of 23 interviews with key stakeholders in the field of childcare (companies, international organizations, childcare service providers, and trainers), seven focus groups with working mothers and fathers employed by companies, and an online survey.

This research is part of an agreement between the Mexican Social Security Institute and the Ministry of Economy—which have committed to establishing Corporate Childcare and Education Centers (Centros de Educación y Cuidado Infantil—CECI) in industrial zones—to provide evidence for feasibility and impact analyses that will encourage companies to invest in this infrastructure.

Although the focus is on childcare centers, this research explored other services, such as lactation rooms, lactation training, and rest areas.

Although the companies interviewed acknowledge that the lack of childcare services affects their ability to retain and attract talent, they still perceive investing in childcare as an unnecessary expense: Implementation costs, a lack of awareness of available models, regulatory complexity, and a reluctance to take on the direct operation of a center were the barriers mentioned most frequently.

Simply expanding the infrastructure will not be enough to increase the use of childcare services. Focus groups and surveys reveal that childcare decisions are closely tied to social and cultural norms promoting the idea that the best way to care for children is for them to be close to their mothers and grandmothers. Added to this are a lack of trust in childcare centers, the unaffordable costs of private daycare, and the long distances caregivers must travel.

Childcare providers, trainers, and organizations specializing in early childhood education agree on three factors for ensuring and improving childcare: training specialized staff, expanding access to suitable lactation facilities, and raising public awareness about the collective responsibility of childcare.

This shows there is no single solution for expanding access to childcare services in industrial areas. A combination of stakeholders and funding mechanisms with distinct responsibilities is required: on the one hand, the public sector as a provider of infrastructure, funding, regulation, and coordination, and on the other, companies, specialized providers, and international and civil society organizations as contributors to the expansion and operation of services adapted to the needs of employees.

Additionally, this study has identified two mechanisms in the business sector that could help implement CECI in industrial zones. The first involves allocating spots in public childcare centers to companies that have the financial capacity but are not interested in managing the centers themselves. The second proposes a joint investment scheme among several companies, supported by a private provider that facilitates coordination, reduces risks, and ensures regulatory compliance.

Sustaining these models will require ongoing coordination among the Mexican Social Security Institute, the Ministry of Economy, state governments, employers, specialized providers, and business organizations. In addition, the study recommends strengthening policies on work-life balance and shared parental responsibility; expanding lactation facilities in workplaces and public spaces; improving the dissemination and transparency of the CECI model; and designing childcare services whose schedules, locations, quality, and cost meet the needs of employees in different areas and industries.

INTRODUCTION

Various studies agree: When childcare services are available and family-friendly policies are in place, women's participation in the labor force increases. Within companies, this translates to higher productivity and progress toward gender equality **(World Bank, 2022)**. The economic argument is clear: Investment in quality childcare services can generate returns of up to 9 U.S. dollars for every one dollar invested **(International Finance Corporation, 2019)**, suggesting that these services are a key component of economic and social development in today's economies.

In Mexico, however, the reality for women is different. According to figures from Mexico's National Institute of Statistics and Geography **(Instituto Nacional de Estadística y Geografía [INEGI], 2025a)**, the female participation rate in the labor force was 45.7% in 2026 compared to 75.1% for men—a gap of nearly 30 percentage points. There is a clear explanation behind this figure: Women perform three out of every four caregiving tasks and devote an average of 39.7 hours per week to these activities compared to only 18.2 hours for men **(INEGI, 2025b)**. Nine out of every 10 people who leave the labor market due to caregiving responsibilities are women, according to the International Labour Organization **(ILO, 2024)**.

During the August 2025 Regional Conference on Women organized by the Economic Commission for Latin America and the Caribbean **(ECLAC, 2025)**, Mexican President Claudia Sheinbaum announced the creation of 1,000 new childcare centers as part of the national care strategy. That same year, the Mexican Social Security Institute (Instituto Mexicano del Seguro Social—IMSS) and the Ministry of Economy signed an agreement to promote Corporate Childcare and Education Centers (Centros de Educación y Cuidado Infantil—CECI) in industrial zones through technical assistance and feasibility studies to incorporate this infrastructure.

In this context, this study seeks to identify mechanisms that incentivize the private sector to participate in the provision of these services. Although this analysis focuses on childcare centers in the State of Mexico and Nuevo León, it also explores other services and infrastructure that support the care and well-being of parents, such as lactation rooms, rest areas, and training programs for mothers and fathers.

The purpose of this report is to provide evidence to support public-sector decision-making on the Employer-based CECI model, with the objective of strengthening both infrastructure development and the design of care models that encourage private investment, thus ensuring the long-term sustainability of these services.

CONTEXT, OBJECTIVES, AND JUSTIFICATION

This project seeks to understand the needs and challenges of childcare in Mexico's industrial areas from the perspective of various key stakeholders. Its goal is to generate relevant information to design a viable and sustainable financial model for both the public and private sectors.

To achieve this, the study gathers the perspectives of the following key stakeholders:

- **Employers and business organizations:** Identify the challenges involved in attracting and keeping talent and addressing their well-being in relation to childcare issues; explore ideal funding models; learn about the Employer-based CECI model; and assess their willingness to manage a childcare center.
- **Company employees:** Understand childcare needs, current childcare options, and the main challenges related to the use or non-use of such services (perceptions of safety, quality, and cost).
- **Private and public childcare service providers:** Analyze the availability, capacity, and characteristics of the services they currently offer, as well as the main gaps and opportunities for improvement.
- **Childcare training institutions:** Understand the needs related to training, certification, infrastructure, adequate facilities, and capacity building for the workforce dedicated to providing childcare within the workplace.
- **International organizations and government entities:** Gather perspectives on policies, regulations, care models, and potential mechanisms for collaboration and support.

SCOPE AND LIMITATIONS OF THE STUDY

This ICRW-Americas paper is based on a preliminary, three-month-long study; therefore, its scope is limited. As of 2026, there are approximately 500 industrial zones spread throughout Mexico, covering about 51,000 hectares. This vast area, combined with high population densities, limited the sample size that could be obtained in this study. For this reason, the sample was limited to only two regions of the country: Nuevo León (northern region) and the State of Mexico (central region).

During the fieldwork, challenges arose regarding access to information and the sample of participating staff. Some companies were reluctant to openly share their position on the Employer-based CECI model, facilitate the application of the survey, or share information about their indicators or available budget. These constraints limited the size and scope of the sample of participating staff in the study.

METHODOLOGY

To understand the problem comprehensively and from different perspectives, this study combined qualitative and quantitative methods. The quantitative data made it possible to identify trends and levels of access to and use of childcare services, while the qualitative data provided deeper insight into the experiences and perceptions of caregivers and experts in the field.

Primary Data Collection

Primary data were collected through three tools:

- **Surveys:** Surveys were conducted among staff at participating companies to understand the realities, needs, perceptions, and challenges related to childcare and its impact on workplace dynamics. The survey consisted of 16 multiple-choice questions and took approximately five minutes to complete. The survey was organized into different thematic sections that addressed sociodemographic and workplace aspects, as well as topics related to the organization of childcare, care preferences, barriers to access, criteria for selecting services, and associated costs.
- **Interviews:** Interviews were conducted with key stakeholders to understand the current state of childcare services in Mexico and in the industrial areas of Nuevo León and the State of Mexico. These interviews revealed the existing supply of public and private services, operational capacity, coverage, hours of operation, costs, and major challenges. They also provided information on family-friendly corporate policies and practices; the challenges companies face in supporting their employees with their caregiving responsibilities; and opportunities for collaboration with providers and the public sector to expand and strengthen the provision of services. Additionally, organizations that specialize in training childcare staff were interviewed to better understand the challenges faced by companies and their employees.
- **Focus groups:** Seven focus groups were conducted with company employees, most of whom were mothers, with a smaller number of fathers. Each session lasted approximately one hour. Each group was asked nine or 10 questions exploring the organization of care at home, criteria for selecting childcare services, barriers to access, and perceptions of the available options.

Literature Review

A review of public documents was conducted to analyze the regulatory framework, public policies, available evidence, and institutional practices related to childcare in Mexico, with a particular focus on their implications for the private sector. The review included an analysis of federal and state legislation, reports and statistics from government agencies, specialized academic studies, reports from international organizations (ECLAC, the World Bank, ILO, and the United Nations Children's Fund [UNICEF]), and publications from national research institutes (INEGI and the Mexican Institute for Competitiveness [Instituto Mexicano para la Competitividad—IMCO]).

The information was organized into a comparative matrix in order to contrast regulatory frameworks, identify gaps between current regulations and observed practices, and recognize differences among various institutional stakeholders.

Selection Criteria for Participants and Industrial Zones

Nuevo León and the State of Mexico were chosen because of their economic importance and concentration of industrial activity.

One of the criteria used to select the regions was the female participation rate in the labor force by region, compiled by IMCO, which indicates that the State of Mexico has a low female labor force participation rate. Nuevo León was included because it is a border region and home to the corporate headquarters of major Mexican companies.

The selection of companies was based on their connections to networks and organizations already working on early childhood issues or family-friendly policies.

Staff participation through focus groups and surveys was coordinated through each company's designated points of contact. The participants were mothers and fathers with children ages 0 to 10. Two types of focus groups were conducted: some composed solely of mothers and others mixed, with both fathers and mothers.

Ethical Considerations

All the information collected was used solely for research and analysis purposes by the ICRW-Americas consulting team.

All participating companies provided informed consent before completing the survey or participating in the focus groups. In the case of interviews, participants were asked verbally before the interview began whether they agreed to provide informed consent and to the use of transcription tools for the session. Permission was also requested to use the person's name in the event they were cited in the report.

The final report presents the results in general terms and does not include names or any type of sensitive information that would allow for identifying participants or companies.

To validate the recommendations and the proposed financial model, five companies were consulted; however, for confidentiality reasons, they are not mentioned in this report, as they chose to remain anonymous.

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THEORETICAL FRAMEWORK

GENDER GAPS IN THE LABOR MARKET AND THE ROLE OF CHILDCARE IN MEXICO

Women in Mexico continue to face structural barriers that hinder their entry into and continued participation in the labor market. Women's labor-force participation rate (46%) is not only lower than men's (75%) **(INEGI, 2025a)** but also below the global average for women (49%) and lower than that recorded in comparable economies in the region, such as Colombia (50%) and Brazil (50%) **(Instituto Mexicano para la Competitividad [IMCO], 2022)**.

Behind this inequality is one key factor: the disproportionate burden of unpaid care work. In Mexico, 31.6 million people ages 15 and older perform unpaid care work, and three out of every four are women **(IMCO, 2025**; **ILO, 2025)**. In the majority of cases, mothers are the primary caregivers during early childhood (82% to 86%), followed by grandmothers (6% to 8%), with the rest being other members of the household or unspecified individuals **(INEGI, 2022)**. When translated into time, the difference is considerable: Women spend an average of 40 hours per week on unpaid care work compared to 18 hours for men **(INEGI, 2025b)**.

The figures show that this burden increases with age and peaks between 25 and 34, a critical period for professional development in the labor market. This burden can result in women having less work experience than men, salary gaps, and interruptions in their professional careers **(ECLAC, 2024**; **INEGI, 2022)**.

In terms of income, the gender pay gap is significant. On average, women earn about 10% less than men in Mexico **(ECLAC, 2024)**, a gap that can reach as high as 15% in some industries. This situation is exacerbated after childbirth: Women with children earn an average of MXN 7,296 per month, while those without children earn up to 16% more and have access to better working conditions **(México, cómo vamos, 2025)**.

In the same way, the "maternity penalty" is also highlighted in a study by **Aguilar-Gómez et al. (2026)**, which shows that 15 months after giving birth, women are 38% less likely to continue participating in the labor market, while men's employment is not affected in any way despite becoming fathers. In addition, a 24% impact on women's salaries was observed for this same reason.

LEGAL CONTEXT

Currently, the Federal Labor Law establishes an eight-hour workday, six days a week, with one day off. This places Mexico among the countries with the highest number of hours worked per person (2,228 per year), above the average of 1,745 for countries belonging to the **Organization for Economic Co-operation and Development (2023)**. In addition to these long workdays, women must also juggle childcare responsibilities, which makes it difficult for them to remain in the workforce and advance in their careers.

In May 2026, a labor reform was passed reducing the workweek from 48 to 40 hours. This change will be gradually implemented, with the workweek decreasing two hours per year until 2030 **(Agencia EFE, 2026**; **Ministry of Labor and Social Welfare, 2025)**. The reform is being approved as part of a broader discussion in the region, which is also reflected in a proposal to reduce the workweek from 44 to 40 hours in Brazil **(Pateo et al., 2026)**.

This labor reform is significant given that ECLAC and the ILO have noted that reducing the workweek could facilitate women's participation and retention in the workforce, as well as create conditions more favorable to an equitable distribution of caregiving responsibilities between women and men. However, for the reform to be effective, it must be complemented by policies that expand access to care services **(ECLAC, 2015**; **ILO, 2024)**. The institutional framework for care has not kept up with the increase in women's workforce participation over the past few decades. Additionally, maternity leave has remained unchanged since 1970 at twelve weeks, while paternity leave (limited to five days) falls short compared to regional standards **(IMCO, 2022**, **2026)**.

PUBLIC PERCEPTIONS ON WHO SHOULD CARE FOR CHILDREN IN EARLY CHILDHOOD

Estimates show that only 44% of children ages 0 to 5 in Mexico attend early childhood care or education programs, leaving a significant proportion of young children without access to these services **(INEGI, 2022**; **Secretaría de Educación Pública, 2024**; **UNICEF, 2023)**.

Some factors that might explain these figures include bureaucratic requirements, a lack of agreements with state governments, gaps in the quality of care, and deficiencies in infrastructure and training, as well as staff overload and risks of child abuse. Other factors include the social norms and cultural patterns that place the primary responsibility for childcare on women rather than formal services, the lack of awareness of the benefits of early stimulation, the lack of nearby services, and economic constraints **(Arely Villa & Loredo Ramírez, 2025)**.

The National Survey on the Care System **(INEGI, 2022)** demonstrates who the population believes should care for children ages 0 to 5: 82% feel children do not need to attend early childhood education centers or care centers because they are too young; 8% say there are no such centers available; 6% give other reasons (such as schedules that do not fit their needs or illness and disability), and 3% cannot afford the school expenses. Family networks remain the primary means for meeting the needs of young children, and the mother remains the primary caregiver in more than 80% of cases **(ECLAC, 2024**; **INEGI, 2022)**. When formal services are insufficient, or simply unavailable, many working mothers turn to alternative strategies based on local networks and community support, such as neighborhood caregivers or paid caregivers, among other informal arrangements **(World Bank, 2020)**.

CHILDCARE SERVICES

Recent studies have found a link between the availability of childcare services and an increase in women's participation in the labor force. In addition to increasing participation in the formal labor market, these services also enable women to work full-time and increase their productivity, which directly benefits workplace equity within companies **(World Bank, 2022)**. The business model for the private sector shows that for every U.S. dollar invested by companies, there can be returns of up to 9 U.S. dollars **(International Finance Corporation, 2019)**.

Furthermore, when childcare services meet appropriate standards of quality and accessibility, children also benefit from improved development, health, and educational performance, as well as reduced intergenerational inequality **(World Bank, 2022)**. Mexico has its own success story: the Childcare Program. Created in 2007 to support working parents without access to social security, it had a positive impact on female participation in the labor force. Female beneficiaries were more likely to find employment and saw an increase in household income **(World Bank, 2020)**.

Childcare Centers

Currently, IMSS's Daycare and Social Benefits Insurance program offers free childcare services to the children of insured individuals during their workday, starting 43 days after birth and continuing until the child turns 4. Between 2018 and 2024, the installed capacity of daycare centers decreased from 250,404 to 235,708 spots, mainly due to centers closing post-pandemic and contracts expiring with service providers **(IMSS, 2025b)**.

In 2024, IMSS daycare centers in the State of Mexico had approximately 16,568 spots, with an occupancy rate of nearly 59%; meanwhile, Nuevo León had approximately 15,213 spots and an occupancy rate of 69%. In both cases, supply continues to fall short in metropolitan areas **(IMSS, 2025a)**.

Access to these services does not depend on a single factor. On the demand side, other factors play a role, such as available spots, proximity to the service, schedule compatibility with working hours, each household's budget, and the level of trust in the service. On the supply side, international organizations such as the World Bank describe coverage as "limited, fragmented, and heterogeneous." Taken together, these factors influence the use of childcare services and women's participation in the labor force, especially among mothers **(World Bank, 2020)**.

The Mexican government reaffirmed its commitment to building a National and Progressive Care System ensuring the full exercise of rights, inclusion, and non-discrimination for people who require care and for those who provide it **(Secretaría de la Mujer, 2025)**. In 2025, efforts began to expand childcare services for the children of agricultural and garment industry workers, with the goal of expanding coverage nationwide **(ILO, 2025)**.

As part of this initiative, IMSS and the Ministry of Economy signed a collaboration agreement valid through 2030 to promote the establishment of CECIs under the IMSS and Corporate programs. The initiative aims to promote Economic Development Hubs for Well-Being and other industrial and business zones, with the goal of bringing childcare closer to workplaces and making it easier for more women to join the workforce **(IMSS, 2026)**.

The Employer-based CECI model represents a transformation of the traditional childcare center model by integrating an educational, health, and well-being approach. Its design addresses the needs of working parents and, at the same time, seeks to increase productivity, improve job retention, and reduce the impact of not having reliable childcare services **(IMSS, 2026)**.

Progress on this agenda is taking place within a context of growing public investment in care services. The 2026 Federal Expenditure Budget is the first to include an allocation equivalent to 1.2% of gross domestic product in this area. However, institutions such as IMCO continue to lack a unified budgetary framework since programs such as Employer-based CECI or extending school hours are funded within broader budget lines, making it difficult to track and thoroughly evaluate public spending on care services **(IMCO, 2025)**.

Mexico will need to significantly increase investment in care services to meet growing demand and achieve higher levels of female participation in the labor force. According to ILO estimates **(2025)**, it will be necessary to double the current investment to raise the labor force participation rate for women to 58% over the next decade compared to the current rate of 46%.

04

FINDINGS FROM THE ASSESSMENT ON CHILDCARE NEEDS

This study's findings indicate that there is a disconnect between the childcare needs of working families and the availability of services in the industrial areas analyzed. Childcare providers, early childhood organizations, business organizations, employers, and caregivers agree that the main challenges are limited coverage, hours that do not align with work schedules, the location of childcare centers, and a lack of alternatives. They also agree on a deeper issue: The burden of childcare continues to fall disproportionately on women, closing doors to formal employment and hindering their professional development.

The companies consulted recognize the importance of childcare for retaining talent, maintaining operations, and ensuring the well-being of their staff. However, at the same time, they are reluctant to set up their own childcare services or explore the possibility of investing in public-private partnership models. Among the main reasons for this reluctance are investment and operation costs, legal and administrative requirements, and a lack of knowledge about the models that are currently available.

All of these factors clearly demonstrate the need to create childcare solutions that are more accessible, flexible, and designed for industrial areas and the daily realities of parents in Mexico. To achieve this, shared responsibility must be promoted among businesses, the government, and families so that everyone plays an active role in the development and implementation of these services.

PUBLIC AND PRIVATE CHILDCARE SERVICE PROVIDERS

The following analysis brings together the perspectives of institutions that provide childcare services under various formal early childhood care models. These models differ in terms of their scope, operational capacity, level of specialization, funding mechanisms, and coordination with the public and private sectors.

The interviews show that the main obstacles to expanding childcare coverage stem from the fact that companies give low priority to childcare, viewing it as an expense rather than a strategic investment. In addition, social norms persist that place this responsibility on families, particularly women; there is also little awareness of the available models of provision, and the supply of services does not align with the needs of working families.

Private Childcare Service Providers

The private providers interviewed offer early childhood education and care services that combine educational components, child development, care, safety, and support for families. They care for infants from the first months of life through preschool-aged children. Their operations are adapted to each company's specific needs, such as hours, location, and coverage during vacation periods.

Private providers offer services that include both their own childcare centers and partnerships with companies to facilitate access through discounts, subsidies, scholarships, or reserved spots for employees' children.

Key operational and financial challenges include:

- **Low budgetary priority for childcare in companies:** Service providers said companies are now more open to discussing childcare, although it is still not a budget item for companies. Based on their experience, the providers say, the clients for these services are large corporations, such as banks and companies known for their employee benefits, while adoption of the service remains limited among small and medium-sized businesses.
- **Perception of childcare as an expense rather than an investment:** The interviewed providers believe there are challenges in positioning childcare services as an investment linked to productivity, talent retention, workplace well-being, and women's participation in the labor force. They say this is due to a lack of awareness about these services' benefits for families, businesses, and child development, as well as a lack of evidence quantifying their impact and return on investment. Companies view childcare as an additional cost and fail to recognize its contribution to labor market entry and retention, organizational performance, and the early identification of child development needs.
- **Gender stereotypes that limit formal care:** The interviewed providers agree that childcare is perceived as an individual or family responsibility rather than a shared responsibility among families, businesses, and the state. Formal childcare services are viewed as a "Plan B" that is used only when the family support network is no longer available; as a result, employers undervalue these services and do not invest in them. Providers also noted that these beliefs are linked to gender stereotypes that assign caregiving primarily to women. Mothers view childcare services as a means of entering and remaining in the labor market, but fathers tend to delegate these responsibilities to female family networks, considering such services less necessary. This same logic also influences the decision to adopt childcare policies, particularly in companies where decision-making remains in the hands of men.
- **Weakening of care support networks:** According to the interviewed providers, childcare is increasingly limited by the lack of family and community support networks. Parents' increased participation in the labor market, the migration of family members to other cities or states, and the decline in intergenerational cohabitation have reduced the availability of grandparents, aunts, uncles, and other family members to assist with daily childcare tasks. In industrial areas, where work is done in shifts and employees are often far from their family networks, families must take on childcare themselves, making the need to rely on formal services even more urgent.

- **Misalignment between the public supply of care and labor market dynamics:** The interviewed providers noted that the public supply of childcare and the needs of working families often fail to align, particularly due to low coverage for children under age 3, limited hours of care, and long distances between homes, childcare centers, and workplaces. This situation puts pressure on families who, in turn, must find ways to balance work and family life on their own, as well as on companies, which face challenges in attracting and retaining female talent.

Public Childcare Service Providers

Public-sector childcare service providers offer early childhood care programs for the children of working parents with the goal of supporting a balance between work and caregiving responsibilities. The service is provided at daycare centers and early childhood development centers located near workplaces or communities. It includes the Employer-based CECI program, in which the government covers a portion of the cost and the company manages the center through a specialized operator.

Public-sector childcare ensures safe, hygienic, and comfortable conditions and includes care activities such as feeding, early childhood stimulation, and support for the children's holistic development. The model is funded by a contribution of 1% of the base salary used for social security contributions, 80% of which goes toward daycare services.

Key operational and financial challenges faced by public childcare providers include:

- **Low participation of companies in the Employer-based CECI model:** According to the provider, the main challenge is that companies are unfamiliar with the Employer-based CECI model, largely due to its recent implementation. The companies consulted have questions about the program's operation, requirements, and financing mechanisms, making it difficult for them to accurately assess whether the program aligns with their needs and capacities. Added to this is the perception of reputational risks in the event of potential operational failures and the low priority that childcare typically has within human resources and investment strategies.
- **Business concerns about taking over the operation of childcare centers:** The provider noted that companies are not interested in assuming operational responsibility for daycare centers under the Employer-based CECI model, mainly due to a lack of knowledge about how to manage them. Furthermore, knowledge about the available specialized operators and how to access them is quite limited. Taken together, these factors lead companies to consider the model less viable.
- **Cultural perceptions and lack of awareness of public childcare services:** According to the group of providers, there are cultural perceptions that place the responsibility for childcare on the family, particularly the idea that children are best cared for by close relatives, such as grandparents or caregivers at home. Many families also do not turn to public daycare centers because they are unaware of where to find them. Both factors limit the demand for and use of these services.

Lactation Booth Providers

The interviewees in this group support the continuation of breastfeeding by supporting mothers and families, in addition to promoting lactation-friendly work environments. Their work focuses on supporting families through counseling, guidance, and support networks, as well as collaborating with companies and hospitals. Some offer solutions for the workplace, such as lactation rooms: modular spaces designed to facilitate the pumping and storage of breastmilk in private, hygienic, and appropriate conditions, and whose flexible installation reduces infrastructure barriers for organizations.

These services support breastfeeding continuity once women return to work. This is especially important in Mexico, where maternity leave ends before the baby turns 6 months old. Providers of lactation rooms agree that it is not enough to have adequate spaces for pumping and storing breastmilk; it is also necessary to create working conditions that allow mothers to find a balance between motherhood and their professional lives. This requires family-friendly policies, awareness-raising efforts, and support to build environments where motherhood and work can coexist.

Key operational and financial challenges faced by lactation room providers and lactation educators include:

- **Gaps in training for healthcare workers:** The providers interviewed agree that there is little training for healthcare staff on breastfeeding. This is reflected in outdated hospital practices, such as the premature separation of mothers and babies, the lack of immediate skin-to-skin contact, and the recommendation of infant formula. These practices limit support during the early stages of breastfeeding and reinforce myths about breastmilk production.
- **Challenges in adapting lactation rooms to different work environments:** According to the interviewed providers, returning to work early makes it difficult to continue breastfeeding because there are not always adequate spaces to pump and store milk and because the time available during the workday is limited. In some cases, lactation rooms do not meet standards for hygiene, ventilation, refrigeration, or adequate equipment. Furthermore, there is no single model of lactation cabin that works in all contexts: In manufacturing plants, for example, limited space and operational dynamics complicate their installation. Breastfeeding women are typically entitled to two 30-minute breaks for lactation, but in industrial settings, the distance between the work area and the lactation rooms reduces the time available for pumping and storing milk.
- **Discriminatory practices that limit lactation in the workplace:** The interviewed providers said the lack of awareness campaigns on the benefits of breastfeeding limits the use of lactation rooms in the workplace. In addition, they noted that prejudices persist on mothers' commitment to their jobs, leading some women to avoid using these spaces for fear of being perceived as less productive or less committed to their work responsibilities. These cultural barriers result in discriminatory practices: performance evaluations that disadvantage women, workplace harassment, stigma surrounding motherhood and lactation, and even obstacles to professional growth or advancement to leadership positions.

- **Cultural, commercial, and institutional barriers to breastfeeding:** Breastfeeding faces multiple barriers, according to the interviewed providers. Breastfeeding has not yet been normalized in public and workplace settings, which leads to discomfort, stigma, or even discouragement of the practice. Added to this are the lack of adequate lactation rooms and the fact that both staff and employers are often unaware of labor rights related to lactation. The high cost of breast pumps and restrictions on milk storage at some childcare centers also make it difficult to continue breastfeeding after returning to work. The interviewees noted that advertising and the ease of obtaining infant formula influence how families feed their children, especially when conditions do not allow for lactation.
- **Regulatory gaps and lack of oversight in lactation areas:** The providers interviewed said the lack of a robust regulatory framework and effective oversight mechanisms limit the widespread adoption of lactation rooms and booths, especially in work environments with high operational demands.

COMPANIES AND BUSINESS ORGANIZATIONS

This section compiles the perspectives of companies and business organizations on childcare services. It is based on interviews with representatives of companies of various sizes and from various sectors operating in Mexico, with the aim of understanding the role of the private sector, its willingness to implement family-friendly policies, and the main challenges to expanding support for these services in the workplace.

The participating industries represent more than 36,000 companies of various sizes and across different sectors, primarily small and medium-sized businesses, and together account for more than 99.8% of the country's economic units. Collectively, they account for nearly 30% of the national gross domestic product and generate approximately 5 million formal jobs. The study reveals that small and medium-sized enterprises lack the budget for employee childcare and do not clearly understand the importance of childcare services, which limits their ability to cover the costs involved in providing them.

Meanwhile, the interviewed companies operate in strategic sectors, such as the pharmaceutical, medical, transportation, construction, and consumer goods industries, with workforces ranging from 5,000 to 100,000 employees in Mexico. These corporations do have greater capacity to finance childcare center infrastructure, but they are concerned about operational management, service administration, and everything else involved in running these types of models.

Challenges Identified by Employers

- **Gaps in corporate policies on employee well-being and work-life balance:** The interviews revealed two types of companies: those with formal work-life balance policies and those addressing these issues reactively and in isolation.

  In the second group, needs related to childcare, leave, or absences are managed through informal agreements between employees and their supervisors. This system shifts the responsibility to families, and particularly women, who frequently request leave—even unpaid leave—to fulfill these responsibilities without any institutional recordkeeping or monitoring.

  In the first group, companies have policies that promote shared responsibility and support a better work-life balance. Notable measures include maternity and paternity leave that go beyond what is required by law. For example, one of the companies offers 42 additional days of paid maternity leave and between 20 and 25 days of paternity leave. Seven out of 10 men take advantage of this benefit, reflecting a cultural shift toward a more equitable distribution of childcare responsibilities. There are also flexible schedules, hybrid or temporary remote work arrangements, paid leave, and access to external childcare support services. According to the companies interviewed, the results of their internal satisfaction surveys show that these policies contribute to families' well-being, greater male involvement in caregiving, and the retention of female talent.

  One of the most notable practices involves support for lactation. Several companies already have rooms set up for this purpose and guarantee breaks during the workday; some even provide breast pumps or run internal campaigns to raise awareness among staff. They also offer flexible arrangements for returning to work after maternity or paternity leave.

- **Budgetary and operational constraints in small and medium-sized enterprises:** Business organizations point out that small and medium-sized enterprises are focused on day-to-day survival, which makes it difficult to allocate resources to childcare policies. The lack of resources limits their ability to offer flexible schedules, lactation rooms, or childcare support. Added to this are recent labor reforms and rising operational costs, which leave little room to absorb new expenses.

  Union leaders acknowledge the desire to support employees but note a lack of clarity on how to implement these changes without risking business stability. Small and medium-sized enterprises view care policies as costly and risky due to the lack of tax incentives or government support to facilitate their adoption.

- **Impact of the lack of formal childcare services on business operations:** The interviewed companies noted that the lack of formal childcare services increases absenteeism and staff turnover, in addition to making it difficult to retain women after they give birth. In sectors with on-site and shift work, daycare hours are not always compatible with operational needs.
  Added to this are commute times and the lack of support networks, which complicate the work-life balance. Companies note that, given the lack of alternatives, female employees may even consider leaving their jobs.

  Likewise, companies point out that childcare continues to fall primarily on women, which affects their retention and career development, especially outside major cities. Furthermore, there are concerns about the quality, hygiene, and safety of childcare services, as well as the lack of lactation facilities, which makes it difficult to return to work after maternity leave. Until there is a greater supply of these services and policies that facilitate a better work-life balance, it will be difficult to retain staff and reduce turnover.

- **Lack of awareness about caregiving in small and medium-sized enterprises:** Company representatives highlight a cultural gap in small and medium-sized enterprises, as many do not view childcare as a strategic necessity for their operations but rather as an exclusively family matter. There is a need to raise awareness among decision-makers, so they recognize that childcare is a matter of collective responsibility.

  Several companies said they still struggle to build a workplace culture that recognizes employees' caregiving needs and also promotes equal opportunities. Gaps persist in women's access to development and leadership roles, and there remains a lack of awareness on diversity, inclusion, and shared responsibility. All of this hinders companies' cultural transformation and limits their ability to create work environments that promote employee well-being, talent retention, and business performance.
- **Incompatibility between the public daycare system and companies' needs:** The interviewed companies noted that the reduction in IMSS daycare coverage has led many families to seek private services, resulting in higher expenses. As a result, the public model remains difficult to implement due to bureaucratic procedures, requirements, and the perception of risk it generates.

  Business organizations also pointed out that the locations of childcare centers, commute times, and operating hours do not meet the needs of working families. This lack of coordination makes it difficult to use these services, especially for those who travel long distances between home, work, and the childcare center.

Lack of Awareness of the Employer-based CECI Model and Barriers to Business Participation

The interviews indicate that the new Employer-based CECI model is still not widely known among companies. Although several organizations expressed interest in public-private partnership schemes, they still have doubts about how the model works and whether it is feasible to implement it. These doubts center on the following aspects:

- **Funding mechanisms:** The required investment and financial sustainability model are unclear.
- **Technical requirements:** There are no clear guidelines on the characteristics that land and infrastructure must meet.
- **Management models:** It is unclear what responsibilities the company and the public sector will have.

Without this information, companies do not know whether the plan is compatible with their resources and existing infrastructure

Barriers to Collaboration Within Public-Private Partnerships

Some of the institutional and operational factors that make it difficult for companies to incorporate childcare projects include:

- **Urban infrastructure priorities:** Companies in industrial zones focus their resources on meeting basic needs, such as road maintenance and public spaces, so childcare centers often take a back seat.
- **Regulatory complexity:** The procedures for collaborating with the government are often lengthy and bureaucratic, which discourages large-scale projects due to the difficulties in obtaining permits and coordinating among institutions.
- **Institutional inconsistency:** Businesses perceive that the standards required of them are not always applied to public institutions, which reduces trust in these policies.

Operational and Financial Limitations for the Development of Childcare Centers

The demand for childcare services exceeds current capacity, so there is a need to work together to address limitations such as:

- **Operational and financial constraints:** High costs and logistical challenges mean that most companies do not consider it feasible to develop their own facilities, especially when their operations are decentralized.
- **Need for incentives:** Companies believe that tax incentives would attract the private sector to invest in these types of projects.

- **Quality and usefulness of the service:** Having available space is not enough. A CECI works if it offers hours that are compatible with the workday, is located near the workplace, provides child development programs, and offers a service that families trust—a key factor when they have support networks.

Faced with a lack of sufficient and accessible public options, several companies have chosen to address the issue on their own through agreements with private providers, financial assistance and subsidies for daycare for employees' children, and other flexible care arrangements.

STAFF WITH CHILDREN AGES 0 TO 10 WITH CAREGIVING RESPONSIBILITIES

This section presents the findings on the experiences, needs, and expectations of employees at companies in Nuevo León and the State of Mexico regarding childcare. To this end, 102 employees (mothers, fathers, and caregivers) were surveyed, and seven focus groups were conducted with approximately 60 total participants.

The findings reveal the level of satisfaction with available services, the factors that influence the choice of childcare services, the costs assumed by families, and the support they consider necessary to facilitate a balance between work and family life.

Staff Surveys

The survey was organized into three thematic sections to determine the participants' profiles and how they arrange childcare for their children. The first section addressed the sociodemographic profile and family context of the participants. The second section focused on the types of care families use, their preferences, and their perceptions of the available options. The third section addressed the financial barriers to accessing services, the support families consider necessary, and the impact that childcare has on their participation in and retention of employment.

Section 1

Profile of Participants and Family Context:

The survey gathered 102 responses from employees with parental responsibilities, 79% of whom are women (81 people) and 21% of whom are men (21 people). The majority of respondents (79%) are between the ages of 25 and 44. Regarding marital status, 66% are in a relationship (46% married and 20% living with a partner), 31% are single, and the remaining 3% are separated or widowed.

The sample covers different hierarchical levels. The most represented positions are analysts and administrative staff (26%) and managers with team leadership responsibilities (25%). The remaining participants consist of operational staff (25%), along with coordinators, junior employees, interns, and C-level executives.

Most respondents have one or two children, mainly between the ages of 3 and 10; some have children under age 3, and some have teenage children. For this study, only staff members with at least one child between the ages of 0 and 10 were included.

Section 2

Parents' Access to, Use of, and Experiences with Childcare Services

The results make it clear that childcare depends, above all, on family support networks: 62% reported that their children stay at home under the care of relatives—in most cases, their grandmother. Other arrangements include private daycare centers (16%), hiring babysitters (9%), public daycare centers (5%), and community or neighborhood support networks (6%). In some families, both parents share caregiving responsibilities, with greater involvement from the father (13%) or the mother (12%).

This approach to care is reflected in high satisfaction with care. A total of 92% said they are satisfied or very satisfied with their current arrangement, primarily because of their trust in the person or institution responsible for their care (50% of responses) and the emotional peace of mind this provides them (44%). This satisfaction, however, coexists with a limited range of services, as 26% said they had turned to their current arrangement due to a lack of other available options. Schedules and cost were important factors in this decision.

The results suggest that high satisfaction does not necessarily indicate that there is a sufficient or high-quality supply; rather, it reflects how families adapt by choosing the alternatives they trust most within a context of limited options.

When analyzing the criteria mentioned in the focus groups for choosing a childcare service, the following stand out as the most highly valued: proximity to home (57 mentions), safety and the educational approach (51 mentions), and staff training (37 mentions). By contrast, aspects such as availability of spaces or care on weekends carried less weight. In short, trust, service quality, and geographic accessibility matter more than other logistical factors when choosing a childcare option.

Perceptions of the services available in Mexico paint a different picture: 46% of survey respondents said they find it difficult to find a care arrangement that meets their needs, and 39% find it very difficult. The main reasons are the cost of services (73%) and schedules that do not always align with working hours (72%). The lack of options offering safety, quality, and available spots is also a factor. As a result, many families continue to rely on relatives and other close friends and family members.

This preference is also reflected when asked about the ideal care arrangement. Half of the respondents (50%) indicated that they would prefer care to be provided by the mother, while 25% chose other relatives such as grandparents, aunts, uncles, or cousins. By contrast, public and private daycare centers and babysitters were significantly less preferred. These results reveal that the ideal care arrangement remains tied to the family environment and that institutional services play a complementary role.

Section 3

Economic Barriers, Support Needs, and Employment Impact Related to Childcare Services

Regarding childcare costs, 33% of survey respondents consider it appropriate to spend between MXN 1,000 and MXN 2,500 per month. By contrast, 28% do not pay for or do not need these types of services, and 21% would be willing to pay less than MXN 1,000. Only 11% would pay between MXN 2,500 and MXN 4,000, and just 7% would consider paying more. These results show a limited ability to pay and point to the need for support measures that reduce the cost of accessing childcare services.

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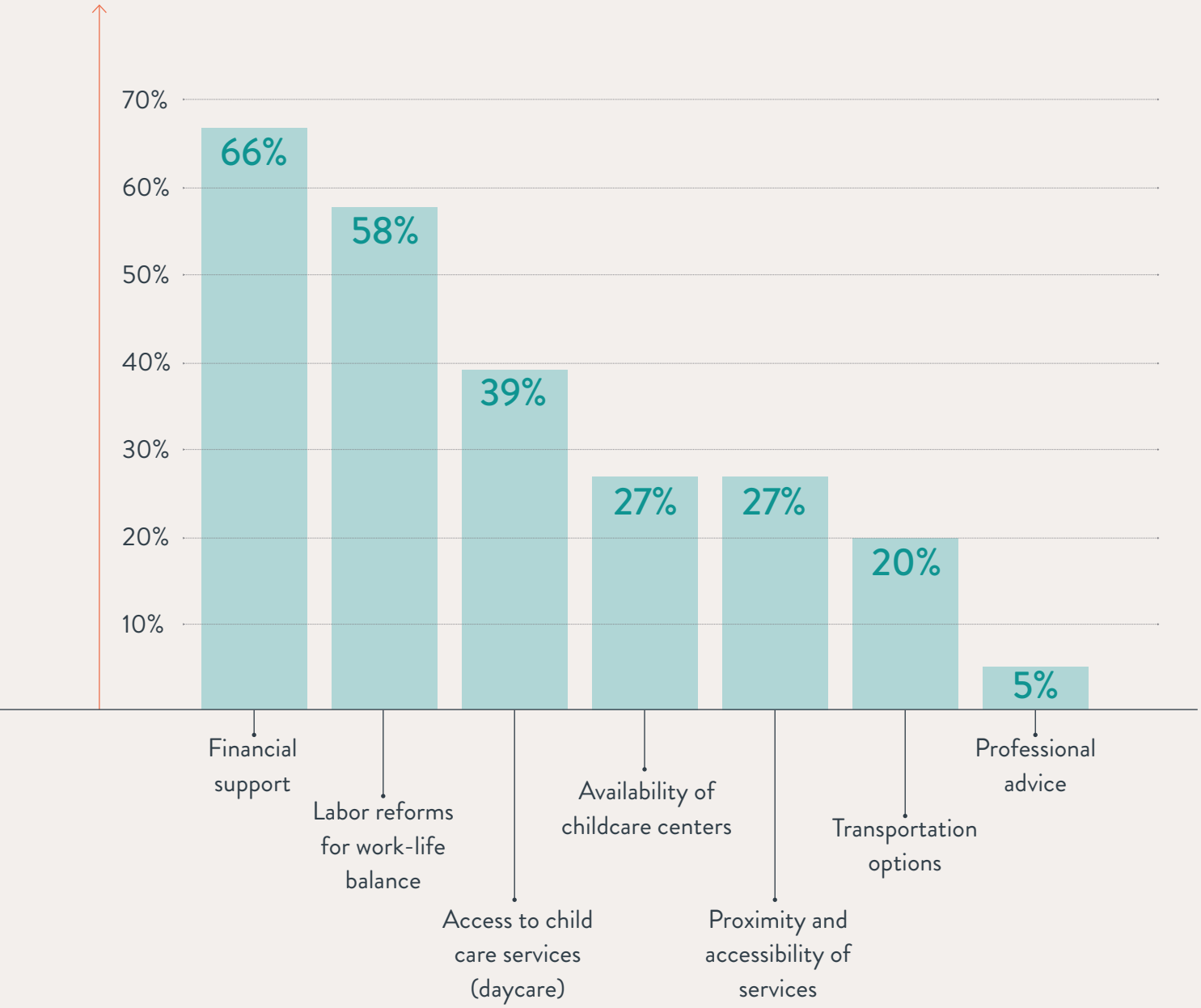
Respondents also identified the main forms of support they consider necessary to meet their children's care needs. Figure 1 shows how important these forms of support are to families, including financial and work-related factors, as well as those related to the availability and accessibility of childcare services.

Figure 1
Childcare-Related Needs



From left to right: Economic support, labor reforms to promote work-life balance, access to daycare services, availability of childcare centers, proximity and accessibility of services, transportation options, and professional counseling

Focus Groups With Companies' Employees

Seven focus groups were conducted at companies in Nuevo León and the State of Mexico, with each focus group consisting of three to 12 mothers and fathers with children ages 0 to 10. Participation was voluntary. During the focus groups, participants discussed how they organize their children's care, what they do when an unexpected situation arises, how they choose who cares for their children, and what they expect from childcare services.

Challenges in organizing childcare:

While the family network remains a central pillar, it is often supplemented by institutional services: Nearly 30% of participants described an arrangement that combines family support with the use of childcare centers. Participants compared this option to what full-time childcare would cost them.

Employees' days are organized around drop-offs and pick-ups; they leave early and coordinate several trips before starting work. This leaves them little room to deal with unforeseen circumstances.

Participants shared feelings of guilt related to managing their time spent on caregiving. Many worry that they are not able to spend enough time with their children, regardless of who is caring for them.

As one participant put it:

"Motherhood often means living with guilt: guilt for not being at home, guilt for not giving 100% at work, guilt for rushing around all day and feeling like there's never enough time."

Challenges of childcare outside the usual routine:

One of the main challenges is organizing care during school breaks, when children get sick, or when working hours extend beyond regular hours. Participants said these situations make it difficult to care for their children outside the usual routine.

Family networks and childcare services do not always meet people's needs when school or childcare center schedules do not align with work schedules. Employees often deal with this situation by taking vacation days, adjusting their schedules, or relying on family members, neighbors, and other trusted individuals to care for their children.

School vacations stand out as the most common and complex challenge, as they require planning ahead. The lack of alternatives causes stress for parents, who view this time of year as a logistical and administrative problem.

One of the participants put it this way:

“The problem is logistics: If the daycare center closes for vacation, I’m left without a support network and have nowhere to leave my little girl, and my husband leaves for work at 5:30 in the morning.”

Faced with this situation, parents turn to informal solutions that work for a while but are not sustainable in the long term.

Challenges in balancing work schedules with childcare:

Flexibility is the benefit most valued by parents for balancing their work and family responsibilities. Flexible schedules and work-from-home arrangements help strike a balance, as they allow employees to adjust their workday to their childcare needs without affecting their performance.

But this depends on the type of position and each company’s policies. Administrative or management positions typically have greater access to hybrid or remote work arrangements, while operational positions, due to their on-site nature, face restrictions that limit these options. It would appear that family-friendly policies in many companies apply only to positions based in a corporate office building. This difference means that work schedules remain one of the main obstacles to balancing work and family life.

As one participant shared:

“When I have unscheduled meetings, now that we’re holding virtual meetings, I try to leave early, pick her up, and finish the meeting from home; it’s the only way I can balance my professional and family responsibilities.”

Work-related impacts associated with motherhood:

Interviewees point out that the lack of institutional support forces many working women to quit their jobs; they also report direct experiences of discrimination and a lack of empathy on the part of supervisors or colleagues. Motherhood not only involves organizing childcare, but it can also affect women’s career continuity and professional development.

This is reflected in everyday situations, such as lactation breaks or unexpected school-related issues. In some companies, female employees who are pregnant or have young children face difficulties accessing flexible work arrangements. They emphasized that when leadership positions are held by men without children, women’s childcare needs are perceived as a lack of commitment to work, which limits their opportunities for advancement within the company.

As one participant summed up this reality:

“I felt discriminated against at times, especially when I had to leave early to breastfeed or for other reasons related to my daughter. Furthermore, most leadership positions are held by men, and clearly, they often don’t shoulder the same caregiving responsibilities.”

Perceptions of public daycare centers:

The interviews reveal differing views between those who have used the public daycare centers and those who have not. Users value early stimulation, the timely identification of needs, and their children’s social development. As one participant noted:

“Thanks to the school, they identified my son’s special needs early on. The daycare helped with his development and socialization. The teachers looked out for him, and that made all the difference.”

Those who do not use the service said their opinion is largely based on other people’s comments or experiences. They also mentioned difficulties such as bureaucratic procedures, waiting lists, inflexible schedules, and the distance between the service and their home or workplace.

For most, support from family remains the first choice for care.

Perceptions of private daycare centers:

In the focus groups, participants expressed a preference for private daycare centers because of the quality of service and their child development programs. They highlighted early stimulation activities, support for children’s development, and access to monitoring tools. One participant commented:

“I liked it because there were cameras, and I could check on everything; that gave me a lot of peace of mind. That way, I knew how my son was doing during the day, and I felt more at ease while I was working.”

The women interviewed reported that they pay between MXN 11,000 and MXN 14,900 per month for childcare, depending on the type of service and the schedule. By contrast, a caregiver or nanny charges between MXN 3,000 and MXN 3,500 per week. Given these prices, many families choose to hire babysitters, rely on their mothers, or in some cases, combine both options.

However, there are still difficulties in coordinating daycare hours with work schedules. Mothers and fathers noted that in addition to the cost, these centers do not offer full-time hours.

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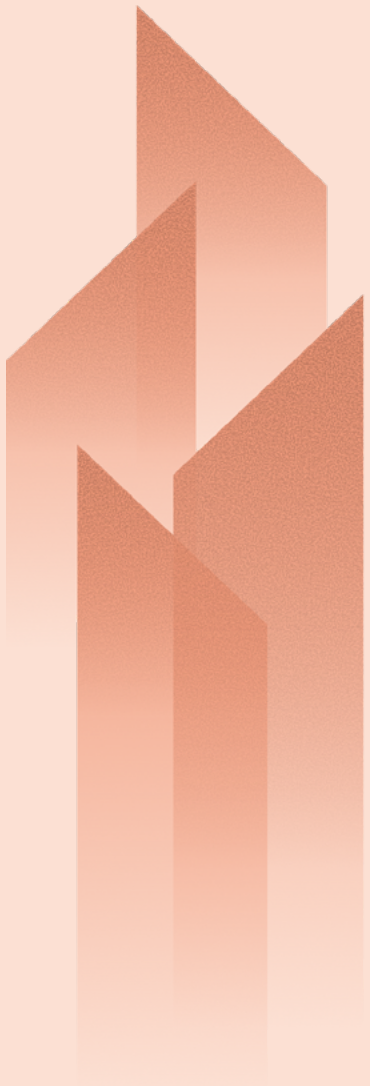

RECOMMENDATIONS

This section focuses on strengthening the public-private partnership options within the Employer-based CECI model. The findings of this assessment show that the barriers to business participation are not primarily related to a lack of demand, but rather to challenges related to financing, implementation, and sustainability. Among the relevant factors identified were high initial investment costs, regulatory complexity, administrative burdens, mistrust of public institutions, fear of taking responsibility for a vulnerable population, and a lack of clarity on mechanisms for participation.

Thus, the proposed financial model seeks to better distribute costs among the various stakeholders, reduce risks for businesses, and generate economies of scale, while offering flexible alternatives for organizations with varying investment capacities and levels of interest in assuming operational responsibilities for childcare centers.

However, this proposal has certain limitations. Implementation of the model alone does not guarantee increased use of the services, nor does it address the cultural factors that shape families' decisions, particularly the strong preference for care provided by mothers and grandmothers during the early years of a child's life. It also does not account for other factors that influence women's labor force participation, such as the unequal distribution of caregiving responsibilities, inflexible work schedules, or limitations on parental leave. This model should be understood as a proposal to improve the implementation of the Employer-based CECI model.

EMPLOYER-BASED CECI MODEL

The Employer-based CECI model (Tables 1 and 2) is part of IMSS's strategy to expand coverage of childcare services in industrial zones and areas with high concentrations of workers. Thus, companies establish early childhood care centers by operating them either directly or through specialized providers. The program stipulates that at least 51% of the spaces must be reserved for the children of the implementing company's employees, while 49% of the slots can be filled by employees from other companies. This distribution allows the centers to assist parents in the same industrial zone, while also making the most of their installed capacity.

To implement the project, the company must provide a plot of land or a building, which IMSS inspects to ensure it complies with regulations. The centers must meet architectural and safety requirements established by IMSS, such as specific space and layout requirements, areas for childcare, food preparation, administrative services, and civil protection protocols.

The model requires two phases of investment from companies. The first phase involves adapting the facility, which represents an investment of between MXN 25 and MXN 50 million, depending on the land, size, and conditions of the project. The second investment is allocated to the facility's operations. Once the center is up and running, IMSS will contribute MXN 6,200 to MXN 7,200 for each child served. This amount covers the costs of staff, meals, supplies, and the center's general operations.

MODELS OF PRIVATE CHILDCARE PROVIDERS

The third column of Tables 1 and 2 describes the private daycare model, which operates under a different framework than the public system. In this model, families and/or companies cover the cost of the service directly, without the subsidy from IMSS. This is reflected in the monthly cost per child, which ranges from MXN 8,000 to 8,500 per month; this is higher than in the Employer-based CECI model, although the initial investment is lower than for the public model at MXN 7 to 12 million.

The capacity of private centers ranges from 50 to 200 spots, which can be adjusted to meet actual demand in each area. The break-even point is around 30 enrolled children, which provides a clear benchmark for the minimum occupancy needed for the business to be viable. Another difference from the public model is that the private provider can help companies fill remaining spots with children from other companies. In this model, the return on investment depends directly on how well occupancy is maintained and on whether additional subsidies are available.

Financial and operational comparison		
Aspect	**Public Daycare (CECI/IMSS)**	**Private Daycare**
Funding model	Fee per child served, paid by IMSS	Payment from families and/or companies
Monthly cost per child	MXN 6,200–7,200	MXN 8,000–8,500
Capital expenditures	MXN 25–50 million	MXN 7–12 million
Usual capacity	75, 110, 150, 200, and >250 spots	50 – 200 spots
Main operating cost	Individual	Individual
Food and nutrition	Mandatory and included in the fee	Optional or subsidized
Required occupancy	90% – 100% for financial viability	Break-even point of around 30 children
Return on investment	5 – 7 years	Depends on occupancy and subsidies.
Corporate participation	51%–60% of spots reserved for children of company employees; the rest open to other companies	No restrictions

Regulatory and Implementation Comparison		
Aspect	**Public Daycare (CECI/IMSS)**	**Private Daycare**
Infrastructure	Strict safety, measurement, and design requirements	Greater flexibility to adapt spaces
Operation	Company or authorized service provider	Specialized operator
Oversight	Periodic assessments and ongoing regulatory compliance	Oversight in accordance with local regulations
Barriers to entry	High investment and complex regulatory processes	Lower initial investment
Main risk	Low occupancy and slow return on investment	Insufficient demand to cover fixed costs
Main challenges	Encourage companies to participate and raise awareness of the model	Maintaining occupation and tackling low birth rates
Cultural aspects	Preference for family care (grandparents) and lack of awareness of the service	Same cultural barriers
Operational flexibility	Medium	High
Availability of specialized operators	Limited supply, identified as an area of opportunity.	Widely used model

CHALLENGES OF THE EMPLOYER-BASED CECI MODEL FOR COMPANIES AND PRIVATE PROVIDERS

Lack of Detail in the Cost Breakdown

This research found that there is no publicly available information breaking down how the costs of the Employer-based CECI model are structured—for example, what the fixed and variable costs of the model are. The companies consulted pointed out the need for a breakdown of investment and operating expenses, such as the cost of the kitchen, food, educational materials, utilities, maintenance, staff, and administration. Without those details, they find it difficult to accurately calculate the resources they would need to implement and sustain the program over time, which also leads to mistrust in the model.

Differences in Construction Costs Between Private and Public Childcare Centers

The initial investment required to open a public facility, estimated at between MXN 25 and 50 million, represents a significant barrier for interested companies. This amount is perceived as much higher than the cost in the private sector, where the facilities surveyed report investments ranging from MXN 7 to 12 million. This gap raises questions about the factors behind the difference in infrastructure costs.

According to the research, part of that difference stems from the infrastructure requirements set by IMSS. Both public and private operators agreed that the IMSS model requires very precise specifications, specific construction materials, separate spaces for each function, and an electronic kitchen, among other things. Some of these parameters limit companies' ability to adapt existing facilities and increase investment costs.

Operators also pointed out that the model's operations are more rigid than those of some private daycare centers. Among the factors that most increase cost are the requirement for on-site kitchens, dedicated staff to prepare meals, and specific administrative personnel to comply with IMSS procedures and reporting requirements. By contrast, some private providers outsource services such as food preparation while still meeting health standards regarding nutrition, which allows them to reduce costs related to infrastructure, equipment, operations, and staff.

Although the interviewees perceive IMSS requirements as robust in terms of safety and quality, some noted that they result in high operating costs and administrative burdens that do not necessarily improve the quality of care but rather make the model less financially competitive than alternatives.

Fear of Operating a Service Not in Their Area of Expertise

One of the challenges most frequently mentioned during the interviews was a lack of knowledge on how to run a childcare center. Several interviewees mentioned that this lack of knowledge, and having to deal with issues that fall outside the scope of their business, leads them to doubt it is a viable idea. They said a mistake in this area not only has financial consequences but can also directly affect children's safety and lives and the company's reputation. One person interviewed stated:

"Administrar recursos humanos, personal, o incluso una línea de producción es una cosa; hacerse cargo de la vida y la seguridad de niños pequeños es algo muy distinto, que conlleva seguridad, responsabilidades legales, sanitarias y emocionales que no entran dentro de nuestro expertise."

Lack of Familiarity With the Employer-based CECI Model

Interviews with companies revealed a lack of understanding and knowledge of IMSS's Employer-based CECI model. Some people said they had read the proposal or attended presentations in which IMSS discussed the topic, but they still did not understand certain details of the model.

One interviewee reflected:

"I feel like IMSS and companies are speaking different languages; I've read the proposal at least five times, and I always end up with a new question."

Meanwhile, other companies said they had not heard or read about the proposal, which made it difficult for them to conduct a more in-depth analysis of their options since a project of this magnitude requires input from various departments within the company.

Strict Regulatory Requirements for Infrastructure and Operations

The research identified a need to better align IMSS and potential childcare service providers. The stakeholders consulted noted that the Employer-based CECI model's technical, operational, and quality requirements are not always understood in the same way, which complicates the preparation of new providers and creates uncertainty around compliance and authorization processes.

Furthermore, the study found that few operators are capable of meeting the standards established by IMSS. While there are experienced childcare providers, few have the training, processes, and structure required by the model. Expanding training, technical support, and professional development would help create more reliable operators who are prepared to participate in and expand the model to other regions of the country.

CHALLENGES BY TYPE OF COMPANY

Large Companies With the Budget to Invest in Childcare Centers

Among large companies, there is a group—particularly those with operations spread across different business units throughout the country (also known as "granular" companies)—that say they have the budget to fund this type of project. However, the real obstacle is not financial but administrative: These companies do not want to take on the administration of a childcare center, nor do they want to assign their own staff to supervise it on a permanent basis.

In most cases, they feel that the Employer-based CECI model transfers to them "the problem that the government cannot solve." They believe it is not entirely their responsibility to have to assign staff to oversee the construction, operation, and administration of the daycare center, and furthermore, to be exposed to reputational risks if something goes wrong at the CECI.

For this type of employer, the goal is not to operate their own center but rather to secure a certain number of spots for their employees' children in exchange for a financial contribution, leaving the administration in the hands of a third party. This arrangement fits within a model of shared responsibility in which the company provides the resources for the land and infrastructure, while IMSS handles the administrative side, guaranteeing spots for the children of employees.

Large Companies With Less Budget

A second category consists of large companies whose scale of operations or financial structure is insufficient to cover the initial investment required by the Employer-based CECI model on their own. Unlike the previous category, these companies face a real financial constraint in terms of their budget for the center's land or infrastructure.

According to the interviews, the problem for these companies is not managing the center but rather that the financial risk and investment are concentrated in a single organization, which reduces their incentive to participate on their own. For this type of arrangement, the most viable approach is for several companies to co-invest in the creation of shared centers—which is provided for in the current Employer-based CECI model. However, as mentioned earlier, coordination among companies is not straightforward: They must agree on how to allocate contributions and responsibilities, and IMSS does not yet play a role as a facilitator or mediator in these agreements.

Some of these companies are willing to provide a stipend for each child, provided that IMSS supplies the infrastructure and handles operations.

PROPOSED MODIFICATIONS TO THE EMPLOYER-BASED CECI MODEL

This study's findings show that the challenges involved in implementing the Employer-based CECI model vary from company to company. Therefore, a single approach cannot address the diversity of profiles within the private sector.

Based on the challenges that emerged during the interviews and after consulting with experts and five companies, the following modifications to the Employer-based CECI model are proposed to help ensure public-private partnerships are viable.

Option 1

Companies With the Budget to Fund Childcare Services

This option is designed for companies with a granular operational structure that have the budget for financing but do not wish to manage the center. Under this arrangement, the company would provide the financial resources for the land and the center's infrastructure without having to be involved in administration, construction oversight, or operational supervision. A specific number of spots would be guaranteed for the children of the company's employees.

Comprehensive management of the center (including staff, meals, educational programs, and compliance with IMSS regulations) would be entrusted to a specialized operator, selected and supervised in accordance with the relevant institutional guidelines. Any spots not filled by companies could be made available to families in the community or area where the center is located, which would help maintain occupancy and the program's financial sustainability. In this way, companies would not assume the administrative or monitoring burden, which is currently the main barrier to this type of program, and remain solely as funders and beneficiaries of the service.

Option 2

Companies With a Limited Budget but Willing to Manage the Center

This option is designed for large or medium-sized companies that cannot afford the initial investments in infrastructure and land required by the Employer-based CECI model on their own. Under this scheme, the government (through IMSS or the Ministry of Economy) would provide the land and infrastructure for the center, while the company would contract a private provider to manage it.

The difference from the current system is that this approach would incorporate a neutral entity (affiliated with or recognized by the public sector) to provide support in structuring the agreement. For example, this entity would define how contributions and slots would be distributed among participating companies, connect them with trained childcare providers, and help them comply with IMSS requirements. The goal would be to reduce the complexity of inter-company coordination and miscommunication between the private sector and IMSS. This would facilitate the creation of shared centers that take advantage of economies of scale.

Additional Proposed Modifications to the Employer-based CECI Model:

- Examine which architectural and operational requirements of the Employer-based CECI model could be made more flexible without compromising the quality of care or the safety of the facility. The public sector could analyze these requirements and collaborate with operators of private facilities with tighter budgets (MXN 7 to 12 million).
- Create outreach materials and campaigns about the Employer-based CECI model designed specifically for the private sector, explaining the project in simpler terms.
- At the same time, invest in public awareness campaigns that highlight the importance of attending these centers for child development. Also communicate the quality and safety standards these centers uphold so that the public can change its existing perceptions of public childcare centers.
- Create a neutral entity to serve as a mediator between the public and private sectors in order to reduce the perceived resistance to the model identified in the interviews.
- Expand training and professional development for private childcare providers so there are more providers qualified to operate in accordance with IMSS standards.

ADDITIONAL RECOMMENDATIONS FOR THE PRIVATE SECTOR

Design Childcare Services That Consider the Needs of Working People

Data from the surveys and focus groups show that the demand for care services depends on factors such as trust, proximity, and schedule compatibility as much as, or even more than, cost. A full 62% of staff rely on family networks, not because it is their first choice, but because they lack reliable alternatives. It is recommended to:

- Design childcare services in industrial areas with schedules that accommodate the working hours of operational staff, including night shifts, vacation periods, and family emergencies.
- Always account for accessible, safe, and reliable public transportation routes that serve the childcare centers that are built.
- Explore subsidies or financial assistance that would reduce the actual cost for families: 28% of staff members indicate that they cannot afford or do not need childcare services, and the most common range they are willing to pay is MXN 1,000 to 2,500 per month.

Strengthen Support for Lactation

Investment in childcare cannot be viewed in isolation from other factors such as lactation, as they are complementary. All stakeholders (businesses, government, and families) must share responsibility to bring about structural changes in how childcare is perceived. Therefore, the following are recommended:

- Move toward making lactation rooms mandatory in workplaces, with international standards for equipment and privacy.
- In coordination with the Ministry of Labor and Social Welfare and IMSS, develop a technical operational guide (rather than merely a general guideline) for establishing and operating lactation rooms, including the corresponding oversight protocols.
- Promote organizational awareness programs that address the cultural factors hindering the adoption of these measures, including biases on mothers' commitment to their jobs.
- Launch large-scale campaigns to train healthcare professionals, with the goal of raising awareness and educating the public on this issue. In addition, the government should set up lactation booths or areas in public places.

Adapt Working Conditions to Facilitate Shared Responsibility for Caregiving

The challenges for childcare do not lie solely in the lack of infrastructure; extended and inflexible hours, the lack of flexible work policies, and organizational culture have an equal or greater impact, as they make it difficult for parents to achieve a balance between their professional and personal lives. Therefore, the following are recommended:

- Promote flexible scheduling options (split shifts, hybrid working arrangements, or flexibility in start and end times) at companies in industrial zones, especially in operational positions where staff turnover is typically highest.

- Expand paternity leave, following the example of several companies interviewed that offer more days than required by law.
- Create leave policies for caregiving purposes (illness, school breaks, meetings with teachers at childcare centers), so that employees no longer have to rely on informal agreements between workers and their supervisors.
- Promote institutional certification or recognition of companies with family-friendly policies to encourage and highlight best practices in the private sector.

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ANNEX A

Perspectives of Childcare Trainers

Although they are not within the scope of the study's main analysis, the perspectives of institutions that specialize in training early childhood care providers are included here because they are relevant to understanding the care ecosystem and the implications of this study's findings.

For analytical purposes, these institutions are organized into three groups based on their primary function: those providing (1) training for caregivers and early childhood educators; (2) training for families and home-based caregivers; and (3) lactation training for the business sector. For each group, this annex discusses key aspects that emerged during data collection as well as the main challenges identified by the stakeholders consulted.

TRAINING FOR CAREGIVERS AND EARLY CHILDHOOD EDUCATORS

The institutions interviewed in this group approach training from two complementary perspectives: building the capacities of educators and professional caregivers, and providing direct support to families in vulnerable situations. Their educational models integrate neuroscience, play, and respectful care approaches, with quality standards that are maintained regardless of the funding model.

Among these organizations' areas of focus are training educators, transforming care settings, developing curricula, and strengthening skills for sensitive parenting. These models are replicable and scalable given their multiplier effect.

Challenges in training caregivers and early childhood educators include:

- **Low quality of early childhood education services:** Trainers pointed to the low quality of early childhood education in Mexico compared to other Latin American countries. Public policy has prioritized expanding coverage over pedagogical development, which is reflected in the administrative overload faced by educators and the limited technical support available.
- **Limited scope of the non-school-based model for promoting respectful care:** Trainers noted that the scope of the non-school-based model remains limited despite its potential to promote respectful care practices through support provided in the home and in community settings. They indicated that its nascent implementation limits the possibilities for expanding this type of care in communities with diverse needs and limited access to traditional services.

TRAINING FOR FAMILIES AND HOME-BASED CAREGIVERS

The organizations in this group promote the emotional and affective upbringing of children in socially vulnerable situations using educational models grounded in neuroscience. Their work is focused on strengthening solid emotional bonds and promoting a violence-free education starting in early childhood. Through teams of professionals and volunteers, they support children from pregnancy through age 6, with an emphasis on vulnerable communities and approaches that prioritize sensitive and respectful care.

Challenges in training primary caregivers and families include:

- **Lack of awareness of emotional education as a preventive tool:** Trainers pointed out that problems in child development persist due to parenting dynamics established in the early years, which are linked to limited knowledge about emotional education among mothers, fathers, and caregivers. This hinders efforts to promote violence-free parenting and the recognition of early attachment as the foundation for emotional well-being and preventing intergenerational patterns.
- **Insufficient recognition of early stimulation as a cornerstone of child development:** Trainers believe that the scope of comprehensive early stimulation beginning in pregnancy, its role in neurological development, and its contribution to social-emotional development and long-term educational outcomes are underestimated. They emphasized that its potential for the timely identification of possible developmental difficulties or warning signs remains largely unrecognized.
- **A fragmented approach to early childhood in public policy:** Trainers emphasized that early childhood care is characterized by inconsistent implementation of public policies, with insufficient funding and continuity to ensure long-term impacts. Early stimulation programs tend to focus on populations facing disadvantages or specific conditions rather than being established as universal, free, and widely accessible policies. They pointed to insufficient prioritization of the first 1,000 days of life despite evidence of its decisive influence on physical, emotional, and cognitive development.

- **Challenges in engaging fathers in childcare training programs:** Trainers noted that training activities tend to attract more mothers than fathers. According to the interviewees, social norms that continue to assign childcare primarily to women, as well as workplace dynamics and the perception that these training sessions are aimed at mothers, limit men's participation in childcare training programs.

CHALLENGES IDENTIFIED BY ORGANIZATIONS PROMOTING AWARENESS AND BUSINESS COLLABORATION

- **Unequal distribution of childcare responsibilities:** Trainers identified an unequal distribution of childcare responsibilities as a challenge for families. Childcare continues to fall primarily on mothers, especially during the early years of a child's life. Trainers noted that many families prefer support from grandmothers or other relatives rather than childcare services due to the perception that such services are limited in terms of accessibility, trustworthiness, and quality. They also indicated that demand for these services tends to increase when they offer conditions that meet families' needs.
- **Challenges in adapting childcare services to the diversity of family needs:** Doubts persist regarding the ability of existing models to address real-world care situations, particularly given some families' mistrust toward childcare services for young children, disparities in access to quality services, and working conditions that hinder their use. Trainers also emphasized that care needs vary across families and contexts, which poses a challenge in offering alternatives that address this diversity.
- **Limitations to companies' ability to operate childcare centers:** Trainers indicated that setting up childcare centers poses a challenge for companies due to the high costs of infrastructure, operation, and maintenance. They also mentioned the complexity of regulatory requirements and the perception of complex administrative processes and inflexible systems. Trainers said many companies do not consider it feasible to individually assume the investment and management of these facilities, which limits their scope and expansion.
- **Low corporate interest in partnerships for childcare services:** High implementation costs, concerns about managing a daycare center, regulatory requirements, and bureaucratic processes discourage private-sector participation. This perception reduces the willingness to share resources and responsibilities, limiting the development of larger-scale solutions.
- **Resistance to adopting flexible work arrangements for childcare:** Trainers said that flexible work arrangements continue to be a challenge in many organizations. The expansion of childcare infrastructure is not always accompanied by shared responsibility policies, improved working conditions, or changes in organizational culture. Trainers noted that rigid work models persist, hindering the adoption of arrangements such as split shifts, part-time work, or adjustments to start and end times. This situation limits employees' ability to balance caregiving responsibilities with paid work.

- **Need for childcare alternatives adapted to different contexts:** Interviewees highlighted that traditional childcare models do not always meet the needs of all families. Expanding these services' coverage remains a challenge, especially in vulnerable communities or in areas where formal infrastructure is limited or not feasible. More flexible options are needed, which must be adapted to local realities and meet appropriate standards for quality, supervision, and safety.

ANNEX B

Survey Template

SURVEY ON CHILDCARE

Introduction

The International Center for Research on Women (ICRW), in collaboration with **[Company's name]**, invites you to complete this survey.

The objective is to understand the childcare needs of employees at companies located in industrial zones in Mexico (Nuevo León and the State of Mexico), **in order to submit a report to the Ministry of Economy that will help understand the issues and identify opportunities for support and improvement.** Furthermore, this information will contribute to a preliminary assessment aimed at establishing sustainable childcare services in the country's planned industrial zones.

The survey **will take less than 5 minutes to complete and will be completely confidential.** The results will be the property of the ICRW team, so no company will have access to your responses.

GENERAL INFORMATION

1. **Age** *(Select one option)*

   - Under 25 years old
   - 25 to 34 years old
   - 35 to 44 years old
   - 45 to 54 years old
   - 55 years old and older

2. **Gender** *(Select one option)*

   - Female
   - Male
   - Prefer not to say
   - Other:_____

3. **Marital status** *(Select one option)*

- Single
- Living with my partner
- Married
- Prefer not to say
- Other:_____

4. **What organizational level does your position belong to?** *(Select one option)*

- Executive committee/C-level
- Director
- Management, team leadership
- Analyst, administrative staff
- Operational staff
- Junior, intern
- Other:_____

5. **How many children do you have in your care, and how old are they?** *(You can select multiple options)*

Age	Child 1	Child 2	Child 3	Child 4	Child 5	Child 6
0-2 years old						
3-5 years old						
6-8 years old						
9-10 years old						
11-13 years old						

QUESTIONS

6. **What type of childcare do you currently use?** *(You can select multiple options)*

[a] Home care provided by my child's mother
[b] Home care provided by my child's father
[c] Home care provided by family members (grandparents, aunts/uncles, godparents, etc.)
[d] In-home babysitter
[e] Neighbor, daycare center organized by the neighborhood
[f] IMSS public daycare center
[g] Private daycare center
[h] Other, please specify: _____

7. **What would be your ideal choice for your child's care?** *(Select one option)*

[a] With the mother most of the time
[b] With the father most of the time
[c] With a family member (older siblings, aunts/uncles, grandparents)
[d] At a daycare center
[e] With a babysitter at home
[f] At an educational facility (preschool/kindergarten)
[g] Community care shared with other families
[h] Other: _____

8. **How easy or difficult has it been for you to find childcare options that meet your needs?** *(Select one option)*

[a] Very easy
[b] Somewhat easy
[c] Somewhat difficult
[d] Very difficult

9. **Why did you choose that type of care?** *(You can select multiple options)*

[a] It is the most affordable option
[b] It is the closest option
[c] I trust the person/institution
[d] It fits my schedule
[e] It is the best thing for my child's development
[f] There were no other options available
[g] Recommendation from someone you trust
[h] Other, please specify: _____

10. **What are the three essential characteristics you look for when choosing a childcare service?** *(You can select multiple options)*

[a] Proximity to my workplace
[b] Proximity to my home
[c] Extended hours (early morning, late afternoon, or weekends)
[d] Flexible start and end times
[e] High safety standards
[f] Quality of care and/or educational approach
[g] Trained and reliable staff
[h] Affordable price
[i] Availability of spaces (no waiting lists)
[j] Meals included
[k] Appropriate and safe facilities
[l] Other, please specify: _____

11. **When thinking about the services offered by a daycare center or childcare facility, what aspects do you consider most important?** *(You can select multiple options)*

[a] Children's safety
[b] Quality of care and attention
[c] Regulatory oversight and compliance
[d] Service reputation and testimonials
[e] Staff training and experience
[f] Appropriate number of children per caregiver
[g] Trust in the staff
[h] Support for a child's emotional adjustment
[i] Activities suitable for child development
[j] Other, please specify: _____

12. **Overall, how satisfied are you with the childcare you have today?** *(Select one option)*

[a] Very satisfied
[b] Satisfied
[c] Neutral
[d] Unsatisfied
[e] Very unsatisfied

13. **What is the monthly amount you could afford to spend on daycare or a childcare center?** *(Select one option)*

[a] I could not afford one
[b] Under MXN 500
[c] Between MXN 500 and 1,500
[d] Between MXN 1,501 and 3,000
[e] Over MXN 3,000
[f] Other, please specify: _____

14. **To what extent does the cost of these childcare centers limit your access to other options?**
(Select one option)

[a] It limits me a lot
[b] It limits me to some extent
[c] It limits me only a little
[d] It doesn't limit me at all

15. **What services or support would help you meet your children's care needs?**
(You can select multiple options)

[a] Financial support for childcare
[b] Access to daycare centers or childcare facilities near my home
[c] Access to daycare centers or childcare facilities near my workplace
[d] Availability of daycare centers with more hours
[e] Transportation options to facilitate travel to care services
[f] Changes to labor laws that allow for greater flexibility to meet childcare needs
[g] Information or guidance on available childcare options
[h] Other, please specify: _____

16. **How does access to childcare services affect your current or future employment situation?**
(Select the option that best describes your situation)

[a] It allows me to keep my job and improve my performance
[b] The lack of access makes it difficult for me to stay in or perform my job
[c] I've been thinking about taking a part-time or informal job so I can balance my caregiving responsibilities
[d] It has little or no influence on my work-related decisions
[e] I am not sure