

Rethinking Urban Space Through Feminist Care and Solidarity Networks

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Abstract

Women's care responsibilities often limit their participation in urban life, a condition reinforced by patriarchal norms and urban policies that overlook the realities of care work. In response, women form solidarity networks to share, redistribute, and collectivize care, creating new ways of engaging with urban space. These networks range from informal, everyday practices such as mutual aid, shared childcare, and neighborhood support, to more formal initiatives like community kitchens, cooperatives, and housing collectives.

This paper categorizes women's solidarity practices into informal, alternative yet formalized, and institutionalized forms. Drawing on feminist scholarship and case studies from different geographical contexts, it examines how these networks function and how they reshape women's spatial practices and political agency. The analysis highlights their transformative potential in building caring cities and reproductive commons that redistribute and politicize care, advancing feminist visions of urban justice.

1. Introduction

Many feminist urban geographers have analysed diverse experiences of women in urban environments, the impact of various structures of inequality on urban processes, and the implications of these dynamics for feminist urban theory. Scholars have focused on how intersecting structures and relations of inequality are mutually constructed, produce new articulations, and manifest spatially. One critical process in this context is care labor (Gilbert 1997). Care labor is essential to sustaining life, yet remains invisibilized, undervalued, and largely confined to the private sphere (Federici 2018). This burden of care falls disproportionately on women and marginalised groups, limiting their ability to participate fully in urban life and shapes their relationships with urban spaces. The design of urban policies reinforces these dynamics: by maintaining a rigid separation between public and private realms and between residential, commercial and industrial areas and by neglecting care infrastructure etc. (Morrow and Parker 2020).

In the face of these constraints, women across diverse contexts engage in solidarity practices to share, redistribute and collectivize care and enable new forms of urban engagement (Yaman 2020). Some of these practices and networks are more informal and rooted in everyday life, including mutual support among neighbors, shared childcare arrangements, or emotional and practical support networks (Soytemel 2013). Others take formalized shapes, such as community kitchens, childcare cooperatives, and housing collectives and operate as spaces where care is collectivized and shared. By bringing care into the public sphere, they create new physical, social, economic, and political spaces as spaces of connection, support, empowerment and resistance (Federici 2018). They challenge the isolation of care and create alternative forms of connection, belonging, and presence in the city (Federici 2018; Levy and Belingardi 2025).

The literature on women's solidarity practices and networks in the city is extensive but dispersed across studies on urban poverty, the solidarity economy, commons, feminist solidarity, and feminist politics. There is a need to bridge these literatures to map the forms and functions of solidarity practices among women. Moreover, spatiality of these solidarities receives insufficient attention in the literature (Soytemel 2013). Key questions remain unanswered: how do women's solidarity practices redistribute and politicize care? How do these practices produce new urban spaces of care and belonging? How do different forms of solidarity (informal, alternative yet formalized, institutionalized) vary in their transformative potential?

This essay explores and categorizes the diverse forms of solidarity practices that emerge in response to the burden of care in times of crisis.

Through a review of existing literature and illustrative cases from different geographical contexts, it investigates how these networks function, how they shape women's engagement with urban space, and how they open possibilities for more caring cities. The case examples discussed are based on existing studies in the literature rather than empirical research. The selection of cases presented in this paper is grounded in insights from the literature review, which revealed that women's solidarity networks emerge from intersecting crises that exacerbate the burden of care and trigger collective responses. Accordingly, we prioritized case studies situated in countries and urban areas marked by acute or chronic crises, including contexts of austerity, conflict, forced migration, and climate-related disasters. Our case studies were chosen not only for their diversity in location and form but also for the richness of empirical detail that the existing literature offers on the strategies women use to negotiate urban spaces and mobilize around care. This paper does not undertake a systematic literature review and is therefore not exhaustive. Rather than providing a comprehensive typology of care-related solidarity practices among women, it seeks to develop a conceptual framework for understanding their diversity and to highlight their transformative potential through the new spaces of social reproduction and political agency they generate.

The next section, Section 2, develops the conceptual foundations of the paper by examining how feminist scholars link care, social reproduction, solidarity and urban space. It situates care as a form of resistance and solidarity, outlining why these conceptual discussions are necessary before turning to the analysis of solidarity networks. Section 3 then builds on this conceptual foundation by categorizing and discussing different types of women's solidarity networks, their functions, and their intersectional dynamics. It draws on case studies to illustrate how these networks create caring spaces and transform urban life. The conclusion wraps up the discussion and argues that women's solidarity networks engage in spatial practices of collective care, which not only redistribute and politicize care work. These practices also empower women to reclaim public space and demand their right to the city.

2. Conceptual Foundations: Care, Urban Space, and Solidarity

This section outlines the conceptual foundations of our analysis. It reviews how feminist scholars have theorized the relationships among care, solidarity and urban space, providing the foundations through which women's solidarity practices can be understood.

2.1. Care as a Form of Resistance and Solidarity in the City

Feminist geographers have long emphasized the mutual constitution of gender and urban space, showing how inequalities are embedded in everyday geographies (McDowell and Sharp 1997; Massey 1994). Since the 1970s, they have documented how women's unequal access to workplaces, services, and urban opportunities reflects a broader gendered division of labour, where paid production and unpaid reproduction are inseparable (Peake 2020). Women reformers, through initiatives such as "municipal housekeeping" sought to transform urban environments by improving housing, sanitation, and social services, underscoring the centrality of care to urban life. Building on these early insights, materialist feminists further highlighted the persistent interconnections between home, care, and urban space that are often overlooked in mainstream urban theory (Morrow and Parker 2020). Nearly four decades ago, Dolores Hayden (1982) critically examined the gendered division of labor, and how design and planning practices sustain and contextualize these labour dynamics within domestic, community, and urban contexts. Hayden's (1982) critique of design and planning practices sustaining gendered labour dynamics remains a key reminder of how deeply care is spatialized.

Social reproduction, which can be described as the daily and generational work of sustaining human and non-human life, is essential to the functioning of any society, of any city. In the era of financialized capitalism, this crucial labour faces what Fraser (2017) terms a 'crisis of care'. On the one hand, the burden of care is increasingly left to households and communities as the state retreats from public provisioning of care. On the other hand, capitalism depletes the conditions and capacities for social reproduction (Fraser 2017). The crisis of care is tackled through purchase of commodified paid care by the ones who can afford, whereas for the ones who cannot afford, the care gap becomes a matter of survival and the manifestation of their dispossession (Fraser 2017; Katz 2001). Because it is gendered, classed, and racialised, caring practices and who provides care in the society continue to be highly politicised (Barnes et al. 2015; Tronto 1993). The present situation reflects a broader global pattern: public care provision is in decline, divestment from public services continues, and care is increasingly commodified, particularly in countries affected by austerity and other unjust neoliberal policies (Williams 2020, 1). According to UN reports, the care crisis is part of the multidimensional global catastrophe that we are currently experiencing (Orozco 2009). The report highlights the invisibility of care, which only becomes a public issue when needs are not addressed. Given that no part of the socioeconomic system operates in

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isolation or can be fully understood within national borders, it is essential to approach the politics of care from an international perspective.

Silvia Federici (2012) traces this global crisis to capitalism's historic enclosure of reproductive labour, which renders care invisible, unpaid, and undervalued despite its essential role in sustaining life. Care labor, in Federici's understanding, should be treated as a commons, as it is a collective resource necessary for societal well-being and survival (Federici 2018). Opposing the treatment of care as an individual responsibility relegated to the private space, Federici calls for the collectivization of care, the social provision of care, and the valuing of reproductive work. She advocates for reclaiming the material means of reproduction, such as housing, child-care, and healthcare as public goods (Federici 2012). Federici foregrounds social reproduction at the center of life and 'point zero' of revolution, which means that without reclaiming reproductive commons there can be no real transformative change (ibid).

Building on the work of Fraser, Federici, and other feminists, a growing body of feminist scholarship insists on placing care and social reproduction at the heart of how we understand urban space, commons and justice. Scholars call for frameworks like "*care full justice*" (Power 2017, 821), "*cities of care*" (Power & Williams 2020, 1), "*caring city*" (Kussy et al 2023, 2036), "*geographies of care*" (Lawson 2009, 1), and "*social reproduction as a feminist theory of our time*" (Peake 2020, 1). These approaches underline the need to rethink urban development through the lens of care, reclaiming and building reproductive commons in urban spaces. Drawing on Tronto's (1993) principles of radical care, namely caring-about, taking-care-of, care-giving, care-receiving, and caring-with, feminist scholars argue that the caring city materializes precisely through the production of commons (Zechner 2021; Kussy et al. 2023; Levy and Belingardi 2025). Feminist urban commons, as spatial and social practices, both embed care into the everyday organization of urban life and transform urban space itself (Federici 2018; Levy and Belingardi 2025). Despite this rich conceptual framing, there remains little empirical research mapping and analyzing what caring spaces and cities look like in practice, what is required to sustain them, and how reproductive commons function in building and maintaining caring cities (Kussy et al. 2023; Cayuela and Garcia-Lamarca 2023).

More recently, some scholars have discussed the link between reproductive commons, urban space and care showing how they form crucial social and spatial infrastructures that make transformative alternatives possible (Cayuela and Garcia-Lamarca 2023; Sanchez 2023; Zechner 2021). These studies highlight how practices of commoning in housing and care

create reproductive commons that support collective survival while also reshaping urban space. In this sense, care and reproductive commons are not only social relations but also spatial practices that connect home, community, and city. They also lay the groundwork for alternative forms of political engagement and collective imagination.

According to de la Bellacasa (2017), a feminist ethics of care calls on us to cultivate “*as well as possible*” worlds and share the responsibilities of care. Examining the role of care in urban space necessitates broadening our understanding of the political and geographical contexts affecting care practices. This approach seeks to bring attention to the overlooked aspects, neglects, and the often “*invisible labours of care*” (de la Bellacasa 2017, 57).

In sum, it is clear that feminist scholars underline the need to rethink urban development through the lens of care, reclaiming and building reproductive commons in urban spaces.

2.2. Women’s Solidarity As Care, Resistance, And Empowerment: Forms, Functions, Spatial Politics

Women take on the burden of care, both individually and collectively, to sustain their families, communities, and environments during times of crisis (Federici 2018; Fraser 2017; Peake & Rieker 2013). In response to dispossession, deepening poverty, and violence caused by multiple intersecting crises, women develop survival strategies to sustain social reproduction. They build solidarity networks to reorganize, collectivize, and redistribute care in ways that help their households and communities survive the ongoing care crisis. These networks create informal infrastructures of care, which were especially visible during the pandemic, when women organized community-based care (Cavallero et al. 2024; Rania et al. 2022).

The spatial dimension of solidarity networks is evident in the importance of neighborhood-based solidarities for women to meet daily needs (Soytemel 2013). These solidarities are grounded in but never limited to the local, neighborhood scale. They are co-shaped by national welfare regimes, urban restructuring policies and transnational processes such as migration and financialization (Fraser 2017). Solidarity networks are not only social formations but also spatial practices that extend across and connect multiple sites, scales, and geographies.

These networks help address challenges like economic hardship, care responsibilities, and housing insecurity. Women mobilize these relationships to collectively solve problems such as finding affordable housing, sharing food and finding jobs (Soytemel 2013). Beyond meeting immediate needs, they also provide each other with emotional and material support as they

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navigate overlapping crises. These networks share strategies for accessing care infrastructures, such as municipal assistance or housing programs, bringing care into the public sphere, bridging households, and breaking the isolation of care work—thereby empowering women (ibid). Other scholars emphasize that gentrification and displacement disrupt these essential networks, worsening women's burdens by dispersing care relationships and eroding both formal and informal support systems (Erman and Hatiboğlu 2017; Curran 2017; Kern 2021; Sakızlıoğlu 2014; Nussbaum-Barbarena & Rosete 2021, Hatiboğlu Eren 2015). Urban restructuring often pushes care back into private spaces, isolating women and marginalized communities (Erman and Hatiboğlu 2017; Sakızlıoğlu 2024). Yet marginalized residents, including refugees, resist by creating communal houses, social centers, and collective kitchens to assert their right to the city and rebuild the community (Tsavdaroglou 2020). Lees et al. (2018) introduce the concept of 'survivability' to describe everyday acts of resistance that help residents remain in gentrifying neighborhoods. Staying put becomes a collective effort to preserve infrastructures of care that support entire communities (Luke and Kaika 2019). In this sense, care itself becomes a form of resistance, as informal care networks counter the isolating effects of gentrification. These discussions reveal how solidarity is deeply spatial, threatened by capitalist urbanism and in relation with care responsibilities of women.

Scholars also highlight the different functions and transformative potential of women's solidarity networks. While survival is central, these networks go beyond mere survival by transforming care into a collective activity (Yaman 2020). This collectivization of care fosters belonging, empowerment, and healing from intersecting oppressions, while also creating spaces for joy and celebrating resilience (hooks 1986). These practices make care labor visible (Kouki and Chatzilakis 2021) and can raise public awareness about its value. However, they often leave the gendered division of care labor intact, as redistribution of care usually remains among women themselves (Yaman 2020). Nonetheless, solidarity networks empower women by building their confidence to reclaim public spaces and strengthen their capacity for collective action. What begins as survival strategies can evolve into political agency and activism, gradually transforming everyday life (Cavallero et al. 2024). This political agency has emancipatory potential not only for individual women but also for broader social movements, as feminist care and solidarity become central to the struggles (Kouki and Chatzilakis 2021). For example, during Greece's economic crisis, activists organized neighborhood-based initiatives to meet daily needs such as food, healthcare, education, and housing instead of focusing solely on

street protests. These practices made care visible, disrupted gendered labor divisions, and redefined how movements organized. Feminist solidarities transformed both daily life and political engagement (ibid).

2.3. Intersectionality and the Politics of Care, Commons and Solidarity in the City

The possibilities and challenges of reproductive commons, caring cities, and urban women's solidarity cannot be understood apart from intersectionality. The burdens of care and the capacities to collectivize it are distributed unevenly along lines of gender, race, class, age, sexuality, and migration status, and these inequalities are materialized in the spatial organization of the city. Intersectionality, which conceptualizes the complicated interactions among many social categories, including gender, race, class, and sexuality (Dias and Blecha 2008, 6; Gilbert 1997, 168–169), is rooted in Black feminist thought (Crenshaw 1989). It helps expose how overlapping systems of power shape both care responsibilities and access to commons, as well as who has a voice in shaping urban infrastructures of care. It highlights how women and gender minorities, migrants and racialized groups, and low-income households often bear the heaviest burdens of the care crisis and are excluded from decision-making around housing, public space, and neighborhood resources.

Intersectional analysis also illuminates how women's solidarity networks are shaped by differences that influence who participates, whose labour is recognized, and whose voices are heard. hooks (1986) reminds us that solidarity is only meaningful when it actively engages with these differences. Without incorporating such an approach, practices of solidarity risk reproducing exclusions rather than dismantling them. Mollett and Faria (2018) underline the importance of remembering the Black feminist roots of intersectionality as a tool for political alliance. They argue that engaging with differences in solidarity can redefine the grounds for collaboration, which provides another critical reason to embrace intersectionality (ibid., 571).

Intersectionality also pushes solidarity beyond narrow Western framings of collective action. Decolonial scholars argue for recognizing contextual, quiet, and hidden forms of resistance that equally challenge injustice (Alkhaled 2021). In this sense, an intersectional perspective allows us to see care, commons, and solidarity not only as practices of survival but also as transformative political projects. It helps explain why caring practices must be understood simultaneously as social relations and urban spatial practices, and why their emancipatory potential depends on embracing difference.

3. Bridging the Care Gap:

Women's Solidarity Networks and the Making of Caring Cities

The literature on women's solidarity practices and networks is extensive but scattered across studies on poverty, the solidarity economy, commons, feminist solidarity, and feminist politics. It is useful to categorize women's solidarity practices into three broad types. First, informal solidarity networks among women involve self-organized, community-based mutual aid practices such as food sharing, collective childcare, or the collectivization of household chores, which operate outside formal systems in response to the care burdens on women. Second, alternative yet formalized solidarity networks refer to grassroots or community-driven initiatives with legal recognition and organizational structures, such as care cooperatives and housing cooperatives, that seek to build more sustainable care infrastructures and commons. Third, state-led or institutionalized care networks and commons encompass public care programs inspired by principles of care commons, such as local care centers. Below we examine these different types through case studies based on a review of existing literature. Understanding how solidarity practices emerge across different regions is crucial for both sharing knowledge about feminist urban policies and deriving inspiration from them. For this reason, we believe it is critical to provide these examples from diverse aspects in this section of the essay.

3.1. Informal Care Networks: Women's Solidarity and Spatial Empowerment

Informal care networks frequently involve child and elderly care, kitchen communities, migrant solidarity, and cooperative organisations. Studies examine how these solidarity networks influence women's relationships with space, empowerment, and the changes they bring about in their lives. This section examines common findings from research on informal care networks, their impacts on women's lives, and the associated weaknesses.

Community kitchens, which emerged particularly in Latin American countries in response to the 1980s' economic crisis, provide good examples for women's solidarity practices. We can draw on various sources to understand how these communities have transformed women's lives and the broader community over time (Schroeder 2006). Schroeder (2006) comments on her many years of work and observations on community kitchens in Peru and Bolivia, that women can overcome economic crises by collaborating through community labour. They can save money by pooling their resources and purchasing food in bulk. As state and non-governmental organisations recognised the impact of these kitchens, they began providing food subsidies and contributions. Also, according to Schroeder (2006),

community kitchen was a successful model as a way of women's empowerment. These kitchens not only serve nutritious meals to economically disadvantaged individuals but also offer a safe space for socialising. Women, on the other hand, gain fundamental organisational skills by managing a community kitchen. Women's gathering spaces can also be used for other training activities, such as getting training tailored to their requirements. Political leaders also visit these community kitchens before elections and recognise the influence of community kitchen activists and tailor their campaign speeches to appeal to these voters. Women who participate in community kitchens are often well-connected and active in community activities. Similar findings have been observed in cases related to women's cooperatives in Turkey (Işıl and Değirmenci 2020).

Various studies indicate that informal solidarity networks are not confined to rural or urban areas; rather, they can be established in diverse ways across city and country scales, and even within transnational geographies. It is essential to address this issue through an intersectional analysis and a transnational spatiality. The case of informal solidarity networks among migrant women in Ecuador serves as an important example for discussion at this point.

Informal Solidarity Networks Among Migrant Women in Ecuador

The Critical Geography Collective of Ecuador (*el Colectivo*), a group that exemplifies contemporary feminist collective geography praxis in Latin America, operates across various countries, bringing distinct geographical epistemologies, ontologies, methodologies, and activist praxis into dialogue (Zaragocin 2019). According to their study, which focuses on migrant women as politically varied people with agency and knowledge, the bodies and emotions of migrants are central to their analysis. Solidarity and care networks have an important role in the survival, resilience, and advocacy of migrant women and also, they are critical for migrant women's survival and well-being, both on their journey and in their destination countries. These networks often emerge spontaneously and informally, resulting in 'collective inventions' for survival characterised by solidarity among family members, friends, and acquaintances (Zaragocin et al. 2023). Care networks cross borders, with migrant women staying in touch with and supporting their relatives in their home countries. Migrant women use these networks to advocate for their rights, share information, and support one another in the face of harsh immigration regulations and difficult living conditions. Digital platforms and technologies play an important role in sustaining international care and solidarity networks. These solidarity and care

networks, both formal and informal, are critical to understanding migrant women's agency and resilience. They represent a type of collective action that rejects the idea of migrants as passive victims and instead shows them as active participants in creating their lives and communities. According to the authors, solidarity and care networks are more than just coping strategies; they are strong vehicles for social and political transformation, encapsulating the concept of transnational feminist praxis, which the Critical Geography Collective of Ecuador strives to emphasise and support (Zaragocin et al. 2023).

3.2. Alternative Yet Formalized Solidarity Networks:

Cooperatives for Empowerment

As discussed in the previous section, the care gap is often filled by women's informal solidarity networks, which organize, collectivize, and redistribute care to help communities survive amid the ongoing care crisis. Sometimes, these informal networks evolve into formalized care spaces and structures that support communities lacking adequate care or seeking to organize it differently. In urban contexts, this need becomes even more pressing, as women's participation in the labor force, struggles to secure livelihoods, and other basic challenges make the visibility and urgency of care more pronounced.

One formal alternative for organizing care infrastructures is the cooperative model. Women-led cooperatives respond to the multiple crises women face in areas such as labor, care, ecology, and housing. They are often seen as vehicles for empowerment, enabling women to form collectives, practice mutual aid, improve working conditions, and access employment opportunities (Yaman 2020).

Women's cooperatives can focus on different activities and fields. In Turkey, for example, a recent study showed that most women's cooperatives are either enterprise or agricultural cooperatives, with others operating in areas like crafts, consumer goods, and manufacturing (Duguid et al. 2015; Çınar et al. 2019). Research on women's cooperatives reveals their significant impact on women's empowerment, the solidarity they foster among women, and how this solidarity reshapes women's relationships with and claims to public spaces. Değirmenci (2018) describes cooperatives as frameworks that foster solidarity, non-hierarchical relationships, and collective workspaces while providing social rights and security. These factors help to explain why many women continue to support and advocate for the cooperative model. Women's cooperatives offer flexible working hours, access to social security, increased independence, and enhanced social status within the community. Empowerment in this context extends

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beyond earning income to include gaining visibility and recognition in the public sphere (ibid).

However, critical literature notes that many women's cooperatives remain concentrated in sectors traditionally associated with women's labor, such as food preparation, food sales, or cleaning (Değirmenci 2023). This can lead to the commercialization of care work, where women effectively assume other women's care responsibilities through paid services (Ugur-Çınar et al. 2024). Additionally, despite their participation in cooperatives, women often continue to bear the burden of unpaid care work at home, which can be a significant barrier to sustained involvement in cooperative activities (ibid). As a result, even when cooperatives provide forms of empowerment, they rarely challenge the traditional gendered division of labor in care work (Yaman 2020).

In the following section, we turn our attention to housing cooperatives and commons to illustrate how these alternatives can create collective care spaces and reproductive commons while potentially contesting entrenched gendered divisions of labor.

From housing commons to reproductive commons?:

The Case of housing cooperative La Borda, Barcelona:

Feminist scholars approach housing as an infrastructure of care (Power and Mee 2020), the basis where life can be sustained and reproduced. Decommodified forms of housing such as housing cooperatives serve to form such infrastructure in affordable and inclusive ways. While decommodifying housing, many of the cooperatives also take steps to reorganize and redistribute care work within their communities. A good example is La Borda, a cooperative housing project in Barcelona located in Sants neighborhood. Built on a public land of social housing, with a leasehold of 75 years, it is based on a non-speculative tenancy model (La Borda/Lacol 2019). The houses are built with participatory design principles emphasizing community involvement, sustainability, and inclusivity. The housing cooperative incorporates feminist principles such as "*the collectivisation of social reproduction, intergenerational relationships, and community life*" (del Rio 2025, 21). La Borda recognizes, values and collectivizes social reproduction both spatially and socially. The communal courtyard, kitchen, and washing room function not only as a space for social interaction but as a shared infrastructure for everyday care practices. The housing community shares some of the reproductive work to be done in collective spaces through tasks organized by established working groups. As del Rio (2025) discusses, La Borda decommodifies housing as well as sharing and collectivizing repro-

ductive labor. Yet the latter comes with its own challenges. Del Rio (2025) discusses that there are two challenges: first of all, traditional gender and intergenerational roles around care often persist in housing collectives. For instance, in La Borda, sharing childcare was less desirable. Older members of the community were asked to take care of the children simply because they had more free time (ibid). Secondly, the scale of the housing cooperative stays limited as a scale for organizing care. Care must be organized on broader and more systemic levels (ibid).

As the example of La Borda demonstrates, housing commons can serve as an infrastructure for reproductive commons, yet they do not automatically ensure a just redistribution of care across different groups or scales. Achieving justice within reproductive commons requires transforming gender and intergenerational norms around care.

3.3. Institutionalized/ State-led Care Networks:

Feminist Urban Policy Experiments

Beyond the examples of attempts to collectivize care by grassroots, there are cities such as Bogota and Barcelona, where care has been integrated into public policy with the aim of reducing and redistributing unpaid care work. Here we will discuss the Care Blocks in Bogota as an example.

Bogotá's System of Care: From care infrastructure to care commons?

Bogotá's *Manzanas del Cuidado* (Care Blocks) and *Sistema de Cuidado* (System of Care) are examples of how care can be integrated in urban planning and policy. Care Blocks aim to support unpaid care givers by offering local services of care such as childcare, healthcare, and educational services integrated within the housing blocks (Guevara-Aladino et al 2024; Alvarez Rivadulla et al. 2024). Care Buses serve as mobile units to increase the accessibility of care services in remote areas (Opsie 2020; Bogota 2023). By locating care close to where people live and on transportation routes, the policy aims to eliminate the barriers in front of access to care (Mahon 2024; Sanchez De Madariaga and Arvizu Machado 2025). Care Blocks are located in areas where care gaps exist and they do not only offer care services but also offer skill trainings, leisure activities for women while their dependents are taken care of through the care services available during the trainings (Alvarez Rivadulla et al. 2024). Scholars discuss that the Care Blocks also have a transformative role as they make visible and redistribute unpaid gendered care labor (Rodriguez Gustá et al. 2023; Mahon 2024).

In Bogota, there has been a strong feminist mobilization, which over time was able to influence care policies and translate demands that were

previously addressed by informal solidarity networks into formal institutional frameworks. As Rivadulla et al. (2024) discuss, the dedication of feminist activists and political commitment of the local governors are key contextual factors that make such a care policy work. The same contextual factors constitute the vulnerabilities in such care systems (Sanchez De Madariaga and Arvizu Machado 2025). Dedication of activists can lead to burnout as they work too hard to compensate for the care gap while the political commitment can fade as governments are bound to change (ibid.).

While the Care Blocks have been celebrated for redistributing unpaid care work and making it more visible, the institutionalization of the commons also raises concerns. As Federici (2018) warns, when commons become absorbed into state frameworks, their transformative potential can be diluted, shifting from empowering communities to reinforcing existing hierarchies. Institutionalized care networks raise questions about their democratic and autonomous character, as they risk being co-opted to reinforce existing systems of social reproduction rather than transforming them (ibid). In Bogotá, this tension emerges in the balance between community-driven demands and the risk of care becoming aligned with bureaucratic logics or political cycles rather than remaining rooted in grass-roots solidarity (see Shelby 2021 for a discussion in the Thai case).

Conclusion

This essay investigates and classifies the various forms of solidarity initiatives, which arise in response to women's caregiving burdens, especially during times of crises. Besides, it explores the capacities of solidarity networks, their influence on women's engagement in urban space, and their potential to foster more caring cities through a non-exhaustive review of existing research and illustrative case studies from various geographical contexts.

Although present literature examines poverty, the solidarity economy, commons, feminist solidarity, and feminist politics, it is crucial to integrate these literatures to establish a connection between urban space and women's solidarity practices and networks, particularly concerning care labour. The spatial dimensions of these solidarities are insufficiently explored in the current literature.

This paper seeks to offer an understanding of the variety of solidarity networks and highlight their transformative potential through the new spaces of social reproduction and political agency they generate.

Solidarity networks challenge the isolation of care by establishing new forms of connection, belonging, and presence in urban spaces (Federici 2018, Levy and Belingardi 2025). They encourage and empower women

to seek out their rights in the city and assert their presence, while also examining barriers to accessing public spaces. The effectiveness of these practices in constructing infrastructures and spaces of care, and so fostering specific social relations and types of care, varies greatly depending on their social, economic, and political settings (Levy and Belingardi 2025). They also redistribute and politicize care, making visible how responsibility for care is shaped by gender, class, and race.

On the one hand, care can become a burden, limiting women's ability to fully participate in urban life and shaping their relationship with urban settings; on the other hand, care can become a form of resistance, or an informal care network to counteract the isolating effects of gentrification. These discussions illustrate how solidarity is inherently geographical, threatened by capitalist urbanism, and related to women's caregiving responsibilities.

In this paper, we classify women's solidarity practices into three categories: informal solidarity networks, such as food sharing, collective child-care, or the collectivisation of household chores; alternative yet formalised solidarity networks, such as care cooperatives and housing cooperatives, which aim to build more sustainable care infrastructures and commons; and state-led or institutionalised care networks, which include public care programs. We show that these forms differ in their transformative potential. Informal networks provide immediate survival but are fragile. Alternative yet formalised networks experiment with more durable commons and cooperative infrastructures. Institutionalised care extends reach but risks becoming bureaucratic or detached from grassroots needs.

Our discussion shows that both informal and formal solidarity networks risk reproducing exclusions and inequalities if they do not adopt an intersectional lens on care needs, the division of care labor, care infrastructures, and control over care work. As seen in examples from Bogotá, building care commons and integrating feminist care into policy frameworks are critical steps. Institutionalizing care through policy can help address needs previously met only by informal networks. Yet, this formalization carries tensions: without democratic control and intersectional feminist principles, it risks depoliticizing, bureaucratizing, or co-opting grassroots struggles.

This paper has demonstrated how feminist practices of care and solidarity contest the crisis of care and fill the care gap left by state neglect. From women's cooperatives in Turkey to migrant solidarity networks in Ecuador, the cases we explored show that this contestation is transnational, linking struggles across borders and diverse contexts.

Finally, a politics of care grounded in feminist solidarity not only supports survival but also holds the potential for radical transformation, planting the seeds of what Williams (2017, 821) calls “*care-full justice*” and advancing the vision of “*cities of care*” (Power & Williams 2020, 1).

Although the spatiality of care labour, particularly in relation to urban space, does not appear prominently on the agendas of feminist or urban policies in current literature, strategies of ensuring care labour through solidarity networks must be sought during periods of crisis. In our understanding, women’s solidarity extends beyond cis-normative definitions to include trans, queer, and non-binary experiences of care and solidarity. However, the cases we discussed did not directly address queer, trans, and non-binary solidarities, which is an important limitation and calls for further research. A second limitation is that this paper does not present a systematic literature review but instead offers a non-exhaustive typology based on existing research. The regions and cases we cover are limited and cannot represent the full diversity of solidarity practices worldwide. A systematic literature review could address these limitations and explore more fully how solidarity can be sustained in different urban contexts under conditions of austerity, migration, and climate crisis.

To conclude with a policy recommendation, debates on the institutionalisation of care commons need to give more attention to feminist and grassroots models of care infrastructure, so that formalisation strengthens rather than weakens collective autonomy.

“Additionally, despite their participation in cooperatives, women often continue to bear the burden of unpaid care work at home, which can be a significant barrier to sustained involvement in cooperative activities (ibid). As a result, even when cooperatives provide forms of empowerment, they rarely challenge the traditional gendered division of labor in care work (Yaman 2020).”

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