CASH CROPPING AND CARE

How cash crop development is changing gender relations and unpaid care work in Oromia, Ethiopia

Lessons from a mixed methods evaluation of Oxfam’s Coffee Value Chain – Linking Smallholders to Sustainable and Scalable Business Model in Ethiopia project

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SUMMARY

Ethiopia is one of the poorest countries in the world and prone to both natural and man-made disasters. More than three-quarters of the population live in rural areas and depend on agriculture to produce enough food to survive. Women are particularly vulnerable, being disempowered by a lack of access to and control over land and other resources, patriarchal exploitation and harmful social norms. Oxfam has worked in Ethiopia for many years, providing humanitarian assistance and supporting long-term development. This has included interventions designed to support smallholder production and marketing, and to promote women’s economic empowerment. One of these was the Coffee Value Chain (CVC) project, implemented in Jimma zone in Oromia regional state, and the subject of this report.

The project’s primary objective was to contribute to improved coffee production and sales by linking smallholder coffee farmers to primary coffee cooperatives and the cooperative union, which provides inputs and other support to farmers and purchases their coffee through the cooperatives. As well as providing training and other inputs to facilitate the modernization of coffee farming and cash crop production more generally, the project also had specific gender components. A subsequent quantitative impact evaluation of the project found that it had positive impacts on coffee production and sales, and on household incomes and asset wealth. It also indicated that the project had some positive impacts on different dimensions of unpaid care work, though not all of its results were easy to interpret.

A qualitative follow-up study was commissioned in 2015 to dig deeper into these findings about care work and, as part of Oxfam’s WE-Care initiative, provide a more comprehensive understanding of changing gender and care relations in Oromia and how these have impacted on and been impacted by the CVC project. This study was undertaken using an innovative methodology, the Qualitative Impact Protocol (QuP). Its results are broadly consistent with those of the quantitative Effectiveness Review, and help to explain them, revealing that increased coffee production did not have a negative impact overall on women’s unpaid care work because it was associated with a switch from less profitable and even more time-demanding crops. While the project played a part in the redistribution of care responsibilities and increased sharing by men and women, this positive change was also influenced by other social and cultural factors, including the provision of education and training by government and religious authorities.

These findings underline the importance of understanding the wider context in which gender and care relations are both reproduced and negotiated: project impacts in this regard cannot be simply assumed. Analysis of this kind is essential to identify key entry points for influencing the redistribution of care work. The results of this study suggest that the provision of education and training promoting women’s economic empowerment and the redistribution of unpaid care work should be considered as one potentially effective means of achieving positive change in care relations and reshaping the gendered norms of care work.
1 INTRODUCTION

It is widely recognized that one of the most effective ways to improve rural livelihoods is to ensure that women who have limited access to and control over productive resources and are constrained by harmful social norms are able to exercise their rights and gain power. One of the key challenges to increasing women’s socio-economic empowerment and a critical pathway to change for livelihoods programmes, which Oxfam has identified, is addressing the invisible, heavy, unequal and unpaid care work that is predominantly carried out by women.

The term ‘unpaid care work’ describes the direct care provided to children, elderly people, ill or disabled people at the household and community levels as well as domestic work such as cooking, cleaning, washing and fetching water or firewood, which facilitates this direct care. It is unpaid as it emerges out of societal or contractual obligations and it is work because engaging in it has associated costs in terms of time and effort. Care is integral to the health, well-being and survival of the society and economy; however, its benefits are often not recognized and its responsibilities and associated costs continue to disproportionately fall on women who spend 2-10 times more time on unpaid care work than men.

Recognizing women’s heavy and unequal contributions to care work as a key challenge to their participation in economic, political and social life and their overall well-being, in 2014 Oxfam launched a three-year initiative, Women’s Economic Empowerment and Care (WE-Care) (now in its second phase). It works to build evidence on unpaid care, innovate on interventions and influence policy and practice to address care as part of women’s empowerment through support to programme teams in 10 countries. In doing so, it aims to enhance women’s empowerment by bringing about the following changes in the care economy:

- Increase the recognition and value of unpaid care work at policy, community and household levels;
- Reduce the long hours and heavy workload that falls on poor families – for example, by providing better access to care-related services (health, child and elder care) and infrastructure (water, electricity and transport), and introducing time- and labour-saving technology and services;
- Redistribute care responsibilities more equitably between men and women, and boys and girls, but also between the household, the state, employers and civil society;
- Enhance the representation of care providers in decision making at different levels.

Apart from national-level time use surveys, which most developing countries have only conducted rarely, there is little information on care work and the allocation of time between paid and unpaid work and leisure; research thus constitutes a key component of Oxfam’s WE-Care initiative. Context-specific evidence generated through the research is intended to inform the design of programme interventions as well as to inform and influence policy processes. For this purpose, two practical and low-cost research tools have been developed:

- Rapid Care Analysis is a participatory methodology consisting of a set of exercises designed for a quick analysis of care relations in the communities. Through focus group discussions, it aims to assess the gendered distribution of care responsibilities, estimate the time men and women spend on care work, explore social norms relating to unpaid care, and identify problematic care activities and options to reduce and redistribute care work. This methodology was drawn upon to design the care module in the Effectiveness Review as well as the qualitative follow-up study.
- The Household Care Survey is designed to generate data on time use and (dis)enabling conditions for women and is implemented before and after interventions to identify potential pathways for positive change.

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A care module (a shorter version of the Household Care Survey) was integrated into two of Oxfam’s Effectiveness Reviews and tested in Uganda and Ethiopia to evaluate the impact of different projects on unpaid care work and related aspects of gender relations. The results were then taken as the starting point for a follow-up study using in-depth qualitative research methods to explain and expand on the quantitative data. One of these projects, Coffee Value Chain – Linking Smallholders to Sustainable and Scalable Business Model in Ethiopia (referred to in this report as the CVC project), and its mixed methods evaluation, is the focus of this report, which distils and reflects on the findings from the Effectiveness Review and the qualitative follow-up study.

As well as discussing the wider implications of its results for addressing care in livelihood programmes in Ethiopia and beyond, this report also reflects critically on the process of the evaluation itself, and how this might be improved. It is hoped that this will stimulate discussion and debate, as well as help prepare the ground for further studies of this kind.
2 PROCESS: THE PROJECT IN ETHIOPIA AND ITS EVALUATION

The CVC project was a three-year initiative (2009-12) in Oromia Regional State funded by Accenture Development Partnerships (ADP). It was implemented by Oxfam GB in conjunction with Limu Inara Cooperative Union in three woredas (administrative districts) in Jimma zone: Limu Seka, Limu Kosa and Chora Botter.

The project’s primary objective was to contribute to improved coffee production and sales by linking smallholder coffee farmers to primary coffee cooperatives and the cooperative union, which provides inputs and other support to farmers and purchases their coffee through the cooperatives. Farmer training was organized in collaboration with TechnoServe and Jimma University, international coffee marketing was promoted with the help of Farm Organic International, and the Cooperative Bank of Oromia provided credit to the farmers. A Functional Adult Literacy (FAL) scheme was also run by the cooperative union for farmers with the aim of promoting the modernization of coffee farming.

Figure 1: Maps showing Jimma zone and the project location

The project aimed to increase the incomes of an estimated 13,000 smallholder organic coffee producers, benefiting up to 153,000 family members, half of whom would be women and girls. Although the project focused on coffee production and value chain development, it did include gender components, designed to enhance women’s participation, promote income generation, and encourage and demonstrate the scope of their economic leadership in key value chain activities. Three of the 11 adult literacy groups were women’s groups, and 143 (35 percent) of all the 412 participants in the FAL scheme were women. In the final year of the project, 270 women were organised in coffee seedling production at five sites, where they were supported to access land and inputs for cultivation. Honey production and marketing were also encouraged as an alternative source of income: 290 women were provided with 240 bee hives, though more than half of these were not stocked with bees.

Source: Remnant (2016)
The project has been the subject of different evaluations. A mostly qualitative end-of-project evaluation was undertaken by an Ethiopian consultancy company and completed in July 2012. Next, it was selected at random for inclusion in Oxfam’s 2014/15 Effectiveness Review cycle, for which a quantitative quasi-experimental approach was used. The resulting report was published in November 2015. This was followed up by an in-depth qualitative study, commissioned from Bath Social & Development Research (BSDR) Ltd, using their innovative Qualitative Impact Protocol (QuIP). This timeline is summarised in Box 1, while the Effectiveness Review and follow-up study are described at greater length in the sections which follow.

**Box 1: Timeline**

- March 2009: start of the Coffee Value Chain (CVC) project in Limu Kosa, Limu Seka and Chora Botter woredas, Jimma zone, Oromia regional state
- April 2012: end of CVC project
- July 2012: End-of-project report completed by Girar Development Consult
- November to December 2014: Effectiveness Review research undertaken in Jimma zone, published in November 2015
- March to April 2016: qualitative field research for follow-up study undertaken in Jimma zone, using BSDR’s QuIP methodology; consultant’s report completed in August 2016

Under Oxfam GB’s Global Performance Framework, the CVC project was randomly selected for a quantitative evaluation of its impact on different aspects of women’s empowerment. Research for the resulting Effectiveness Review was undertaken using a quasi-experimental impact evaluation design. At the same time it was decided that the Effectiveness Review would provide a good opportunity for in-depth research of care-related issues as part of Oxfam’s WE-Care initiative. Questions about care and unpaid work were therefore added to the survey questionnaire in a bespoke care module.

Fieldwork for the Effectiveness Review was conducted in Jimma zone in November and December 2014. The questionnaire was administered to an intervention (treatment) group of 215 randomly selected project participants, and a comparison (control) group of 432 non-participants. Analysis then focused on teasing out statistically significant differences between these contrasting groups, using propensity score matching and multivariable regression to reduce bias in the comparisons made between them.

**Figure 2: The CVC project’s theory of change and impact**

Source: Oxfam GB (2015)
As shown in Figure 2, the project’s theory of change and impact expected that different project activities would lead to increased coffee and other crop revenues and ultimately increased household incomes. The Effectiveness Review sought to quantify this impact.

It found evidence of a positive impact on a range of livelihood indicators among households that had participated in the project, including quantity of coffee produced, quantity of coffee sold, revenue from coffee sales, household asset wealth and total household income. Overall, project households scored significantly more positively on these livelihoods characteristics, which were captured using a range of survey indicators. The main results are summarised in Figure 3, and given in detail in the full Effectiveness Review report.15

**Figure 3: Evidence of impact of the project on key indicators**

<table>
<thead>
<tr>
<th>Project outcome</th>
<th>Evidence of positive impact</th>
<th>Commentary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased quantity of coffee produced</td>
<td>YES</td>
<td>On average intervention households produced 65.2 per cent higher quantity of coffee compared with households in comparison communities.</td>
</tr>
<tr>
<td>Increased quantity of coffee sold</td>
<td>YES</td>
<td>Participant households sold 1.27 times or 127 per cent more quantities of coffee on average, compared with households in comparison communities.</td>
</tr>
<tr>
<td>Increased revenue from coffee sales</td>
<td>YES</td>
<td>Intervention households obtained on average, 1.22 times or 122 per cent more revenue from coffee sales compared with comparison communities.</td>
</tr>
<tr>
<td>Household Asset Wealth (Wealth Index)</td>
<td>YES</td>
<td>Households in intervention areas are more likely to have higher household asset wealth compared with households in comparison communities.</td>
</tr>
<tr>
<td>Overall Household income (New Global Indicator)</td>
<td>YES</td>
<td>Households in project areas had a 28.01 per cent increase in overall household income compared with households in the comparison communities. This indicator represents the new Oxfam GB Global Indicator for livelihoods and was statistically significant different from zero.</td>
</tr>
<tr>
<td>Increased use of modern agricultural practices (any of the practices)</td>
<td>YES</td>
<td>On average, there was a 3.4 percentage point increase in the number of participant households reporting increased use of modern agricultural practices compared with non participants.</td>
</tr>
<tr>
<td>Increased practice of compost manure and organic fertilizers</td>
<td>YES</td>
<td>On average, there was a 5.2 percentage point increase in the number of participant households reporting increased use of compost manure and organic fertilizers compared with non participants.</td>
</tr>
</tbody>
</table>

Source: Oxfam GB (2015a)16

Oxfam recognizes that women are often most affected by poverty and the effects of inequality. Most Oxfam programmes therefore seek to advance women’s empowerment through targeted interventions, even when this is not their primary purpose. In livelihoods programmes, this ambition often takes the form of increasing women’s participation in economic activities, and so, it is hoped, shifting gender relations and decision making power within households and communities. We have already outlined above how the CVC project aimed to do this, although women’s economic empowerment was not its principal objective.

It is important to emphasize that the project did not specifically address unpaid care work. Nonetheless, it was decided that the Effectiveness Review would provide a good opportunity for additional research into care-related issues as part of Oxfam’s WE-Care initiative. The survey questionnaire used in the impact evaluation therefore included a care module designed to assess whether and how care duties had changed in project households as a result of their greater involvement in coffee production. The module asked about time devoted to care activities, as well as investigating three possible mechanisms that shift care responsibilities: redistribution with other household members; the acquisition of time- and labour-saving equipment; and changes in opinion and awareness.
The Effectiveness Review reported a mixture of results relating to care work, including the following:

- At the time of the survey, women who had participated in the CVC project were spending less time undertaking care activities, whether primary, secondary or combined, than women in the comparison group.\(^{17}\)
- Since the start of the project, however, the amount of time spent doing housework and caring for children and other household members was reported to have increased more for both men and women project participants than those in the comparison group.\(^{18}\)
- The increase in the amount of time spent in performing these activities was generally greater among male project participants than women, suggesting that their contribution to these two kinds of care work had increased more.\(^{19}\)
- Households in the comparison (control) group owned more labour-saving equipment (including stoves, grinding mills, water pipes and rainwater harvesting equipment), and women also had more decision-making control over these assets than their counterparts in the project area.\(^{20}\)
- When asked about their attitudes to care work, women in the comparison group indicated greater agreement with a series of statements: that women are by nature better at housework and looking after children and other family members; that men are better at providing for their households; that husbands should help their wives more; and that men and women should decide together about who does what in the household.\(^{21}\)

The report of the Effectiveness Review concluded as follows: ‘These findings tend to suggest that women in non-participant households are over-burdened with housework and care work compared with their counterparts in the participant households. It could be that WE-Care programme interventions in participant households may be bearing fruit, but this needs further investigation in qualitative studies.’\(^{22}\)

The impacts the Effectiveness Review pointed to were multifaceted and complex. On the one hand, multiple economic indicators suggest clear progress as a result of the project, which is partly reflected in some gendered indicators in the care survey module. At the same time, these gendered impacts were not always linear, and while measured, could not be explained through the quasi-experimental approach. Further evidence was therefore required to interpret them in more depth.

**THE FOLLOW-UP STUDY AND ITS METHODOLOGY**

A qualitative follow-up study was commissioned to deepen the findings of the Effectiveness Review and provide a more comprehensive understanding of changing gender and care relations in the project area and how these have impacted on and, in turn, been impacted by the CVC project. In March 2016, Bath Social & Development Research (BSDR) Ltd – an offshoot of the Centre for Development Studies at the University of Bath – was commissioned to undertake field research and analysis, which was completed in August 2016.\(^{23}\) It was asked to answer the following questions:

1. **How are gender relations and the care economy changing in the project area in Jimma zone?**

   1.1 How have gender relations changed over time in different communities and households within them and what have been the causes of these changes? What is the situation now? Have these changes impacted on women’s economic empowerment and unpaid care work and are they still affecting it? How and why?
1.2 How have gendered care relations changed over time in different communities and households within them and what have been the causes of these changes? What is the situation now? What implications does this have for gender inequality and women’s political and economic empowerment at different levels?

2. What impacts, if any, did these changes have on Oxfam’s CVC project in Jimma zone and are they continuing to have on the farmers involved?

3. What impacts on gender relations and care, if any, are attributable to the CVC project itself in Jimma zone?

3.1 What impacts, if any, are attributable to the CVC project and what can be explained by other factors (e.g. other projects/interventions, systemic changes in gender relations and gendered distribution of work, particularly unpaid care work)?

3.2 How can the impacts (and non-impacts) discerned in the CVC project Effectiveness Review (and its current analysis) be explained?24

The follow-up study was undertaken using BSDR’s Qualitative Impact Protocol (QuIP). QuIP is a qualitative tool to assess the impact of development activities (referred to for simplicity as projects), developed initially for use in the context of complex rural livelihood transformations.25 Its main purpose is to elicit evidence of household-level impacts that can credibly be attributed to a project:

- to complement quantitative monitoring of project activities and before–after changes in key impact indicators;
- by relying on self-reported attribution of drivers of change from intended project beneficiaries without the need for a control group;
- mitigating potential response bias by framing data collection sufficiently broadly that both interviewers and respondents are unaware of the specific impact hypotheses, or theories of change, being investigated.

A key feature of the QuIP is ‘blindfolding’: QuIP researchers who collect primary data are recruited, trained, and conduct field research without being informed of the specific project being investigated. Primary data collection through semi-structured interviews and focus group discussions creates opportunities for respondents (both in household-level interviews and focus groups) to volunteer cause-and-effect observations linking project activities to perceived impact. The unprompted reported drivers of change may be related or unrelated to the project (confounding factors); equally, reported project-related impacts may be intended or unintended. The analysis aims to identify and categorize evidence that explicitly or implicitly confirms or refutes the project’s theory of change.

A total of 48 householders, 22 men and 26 women, were interviewed for the follow-up study. They were randomly selected from seven cooperatives that had participated in the CVC project, and were all therefore intended beneficiaries. Eight focus group discussions with a total of 31 people were also held in the same communities: these were organized by age and gender, and included some householders who had already been interviewed individually. They were asked both open and closed questions about the most important drivers of change in different aspects of their lives, livelihoods and well-being over the previous five years.26 The sample composition enabled comparisons to be made between the answers of men and women.
FINDINGS OF THE FOLLOW-UP STUDY

The following sections present key findings and reflections based on the consultant’s report. Where relevant, results from the Effectiveness Review are also taken into account.

Change at household level and its drivers

The QuIP researchers asked study participants to assess the changes that they had experienced within a selected range of project-relevant well-being domains that were used to structure the questionnaire: food production, cash income, caring for others, control over personal time, cash spending, food consumption, assets and overall well-being. For each of these areas, respondents also answered closed questions which indicated whether they had improved or worsened, increased or decreased. In summary, the responses to these questions told a story of positive change among participants, particularly in the domains of control over cash spending, and personal and household food consumption. Overall well-being also improved.

The study then sought to identify whether householders attributed impact in those areas to the CVC project. Few changes were explicitly attributed to the project, which is perhaps not surprising given that it had been completed four years earlier. However, a majority of respondents did explicitly link increased cash income to the project. All subgroups of the sample also attributed changes in food production, caring for others, control over personal time, cash spending, food consumption, assets and overall well-being implicitly to the project as well as to other factors. The main cause-and-effect statements reported from the open-ended discussions were then listed, collated and grouped by well-being domains.

Figures 4 and 5 provide visual representations of the overall results, showing the positive and negative drivers of change across all households and domains, with the most-cited drivers of change occupying the largest spaces in both diagrams.

Figure 4: Summary of frequency of positive drivers of change (combined sample)

Source: Remnant (2016)²⁷
The most significant positive drivers of change were linked to agricultural development:

*CVC project-related training in improved cultivation, processing and purchasing through the farmer co-operatives had a widespread and positive effect on households’ ability to produce, sell coffee at a higher price and thereby increase their income. Added to this, training from local agricultural advisors (DAs) has led to improvements in production of other food and cash crops, going some way towards mitigating commonly cited problems with land fertility and climate. These have led to changes in the types of crops grown: moving away from teff and finger millet towards maize, which is reported to be more resilient to climatic changes, requiring less fertiliser and less vulnerable to wild animals. In addition, the production of more varied vegetable crops (following training in irrigated vegetable production), along with training in nutrition and hygiene by health workers, have contributed to self-reported improvements in people’s food consumption and overall wellbeing.*

As this makes clear, the CVC project was not the only intervention that affected agricultural production. Moreover, both government and non-government interventions took place in a broader context of agricultural transformation – a shift from subsistence to cash crop production, as well as the diversification and intensification of the latter -- that had multiple causes. This was about more than just the modernization of coffee farming, as the following statement recorded during a focus group discussion by young women illustrates:

‘Previously, people mainly produced maize, teff, and sorghum but in the last five years they have shifted to the production of coffee and eucalyptus. Though there are still some people who have kept on producing these crops, many people have either totally stopped or reduced the production of crops and expanded coffee and eucalyptus production. This is mainly because: first, crop production is a tedious activity – land preparation, planting, protecting it from wild animals, weeding, harvesting, and other work which needs energetic labour, but people are getting weaker and are frustrated to invest their labour; second, the production of coffee and eucalyptus is becoming more profitable than crop production. Therefore, they prefer to grow more coffee and eucalyptus than crops and have started to buy crops for food consumption. This change is mainly pronounced in the last three years.’
One of the most significant negative drivers of change cited was price inflation (the increased cost of goods and services), which affected whole communities, along with ill health, and drivers linked to farming. These included issues with land fertility, changes in weather patterns and access to grazing land, as well as the factors mentioned in the passage above.

**Changes in gender relations and women’s economic empowerment**

The QuIP study sought to unpack changes in gender relations and women’s economic empowerment in the household. Specifically, it utilized the intrinsic advantages of the QuIP to link changes in these domains to drivers of change without biasing respondents to favourably recall the project. It revealed that:

- There was a positive trend towards greater involvement of women in household-level decision making: most respondents indicated there had been positive change in attitude towards joint decision making and towards women having more control over cash spending and assets;
- The project was not singled out explicitly by either women or men as the most important driver of this change;
- Evidence that women’s control over decision making and finances in the household is increasing derives more strongly from the male respondent group;
- Reported changes in the gendered division of labour (including women’s involvement in coffee production and sales) were small.

In addition to the individual interviews within households, focus groups were also carried out across the communities. The focus groups were conducted away from respondents’ own homes. By inviting more general responses, focus groups were intended as a cross-check on the individual interviews. Box 2 shows a sample of excerpts from both, illustrating diverse drivers of change in intra-household relationships.
Box 2: Statements by women about positive changes in gender relations at household level (reasons for change underlined)

‘Over the last three years my husband retired and I am responsible for decisions regarding food, money and other household assets. Previously, it was my husband who decided on money, food and other assets.’

‘My influence over decisions and spending for the whole household has changed. My husband asks me and discusses with me if he wants to sell or use all the things that belong to us. So I have my own influence and decision making. This is the result of our family’s advice to agree with each other and work together, which has changed in the last five years.’

‘The relationship I have with my husband has changed in the last five years. I have an equal role in deciding on all our assets and money. I have a share of the work and my husband too. My share is working on all household activities and helping him in farming like removing weeds, harvesting and collecting crops. He also helps me in fetching firewood and water. These are things which he didn’t do five years ago. It is because of the advice from our families about valuing working together.’

‘There is a change in relationships within my household, mainly with my husband in the last five years. Previously, decisions over food, money and assets were made only by my husband. He had a separate box in which he locked and kept money and I wasn’t allowed to control the money by any means. Later, three years ago, we quarrelled about it and I called upon community elders and explained everything to them. Then they informed him that he was wrong and advised him that I have a right to decide equally over money and other assets. Since then he has become more relaxed and I have also started to decide over money, assets, food – discussing with him.’

‘Previously, decisions over money, food and assets were made only by my husband. However, in the last five years my husband has met different people because of trading activities, which give him opportunity to see how other people manage their households. As a result, in the last five years we have started to discuss and decide over money, food and assets.’

‘I have my share of coffee plants which I sell for myself and use the money for my clothing and other household expenses. My mother advised me to have my own share of coffee so I bought these coffee plants for myself and am using the income for my own business as I like.’

‘We discuss as a family and decide over food or money, and use of assets; because we have become assertive about our rights and responsibilities as a result of meetings and training given by government officials more intensively in the last five years.’

‘The change in my well-being is that we [women] got our rights respected. I have participated in meetings and different training in the last five years which helps me to exercise my rights.’

Source: Remnant (2016)[31]

While none of the statements in Box 2 explicitly credits the CVC project, its influence (including a role in the training mentioned) cannot be entirely ruled out. Without further information it is difficult to know the full range of causes that might have played a role in any particular case. It is not unusual for women’s economic status to change as the domestic groups to which they belong evolve over time in response to the normative interplay of social, economic, demographic and interpersonal factors, some of which are alluded to in this sample. As the QuIP study indicates, men were not only more positive about the changes that had taken place (perhaps because they saw themselves as the active agents in this process), but were also more likely to cite the impact of external interventions. The statements in Box 3 illustrate this.
Some of the training and awareness raising mentioned in Box 3 might have been linked to the CVC project. Among male respondents, and some women, there was also a recurring theme of a changed attitude to being more committed to work, spending money more efficiently and spending less time drinking and chewing khat (Catha edulis, a cultivated plant with stimulant properties). This was put down to various external influences, including training in productive use of time by kebele (sub-district) and mosque officials, and a specific training intervention by Jimma University.33

**Changes in gendered care relations and care work**

Have these perceived changes in gender relations and women’s economic empowerment at household level also translated into changes in care work? Again, men and women tended to give somewhat different responses to this question. Women were much less positive and, as Box 4 illustrates, much more likely to reiterate the gendered norms of care work. The last and longest of these statements is a particularly eloquent description of the changes required after marriage and childbirth and, in this case, experienced negatively.
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Box 4: Women’s perspectives on the gendered norms of care work

‘Concerning household activities, all the household activities belong to me. It is not in our culture for husbands to work in the house.’

‘All household activities belong to me and he helps me in carrying our baby when I bake injera [a sourdough flat-bread eaten with most meals]. All the farm jobs belong to him and it is his share after I gave birth. Previously, I helped him in planting on irrigation land.’

‘Concerning work share, the men work on outside work while the women do domestic work which is the culture in our area. The men do not work in the kitchen.’

‘I am mainly responsible for domestic activities while my husband is old and does not share the work burden.’

‘I spend my time in caring and looking after my baby. I also sometimes do handicraft work, mainly embroidery. I also sometimes go to market in order to buy different commodities for my household. Previously, while I was in my parents’ house I spent my time playing and sometimes drinking tea with friends but after getting married [two years ago], spending time with friends is no more possible. This change is bad.

Previously [while with her parents], I had time to play and enjoy with my friend but after marriage I became busier and more responsible than ever before. This makes me more stressed than ever before. As I am independent and expected to participate in a different social life, I spend my time supporting different domestic activities for individuals who have health problems... Moreover, apart from assisting in labour, I spend my time with a person who lost a relative, serving coffee and dinner. However, such kind of participation was not expected from me while I was at my parents’ home and I was not involved in such relationships. I have nothing that I do for myself.’

Source: Remnant (2016)34

However, one group of younger women and a number of male respondents did recognize that there had been significant changes, and that these were linked to youth and education and/or the training that they had received. The first statement in Box 5 is by a woman, the rest by men. They indicate that, contrary to gender norms for older men, younger and more enlightened men were helping their wives and mothers at home, while in some cases women are participating in more agricultural activities than they did in the past.

Box 5: Changes in care relations linked to age, education and training (reasons for change underlined)

‘Men never enter the kitchen to work on domestic activities. However, those who are young can help mothers in fetching water and collecting firewood. So, this culture has remained the same for [a] long time. But the young are now helping their mothers and wives in household activities since they were educated about equality between men and women.’

‘There is a great change and improvement within household relationships between husband and wife… in younger and educated households, the husband mainly works outside and also assists with domestic activities such as preparation of food when the wife gets sick. The women are mainly responsible for domestic chores and assisting with farming practices. In old and uneducated households, however, there is no change in sharing the work burden. Shocks, conflicts, and emergencies are dealt with by the husband. The men work on outside work and do not engage in any domestic activities. It is women who are responsible for all domestic activities and assisting with farming activities. Most of the time the male children also assist their father with outside activities while the daughters help their mother in domestic activities.’

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‘The domestic work is done by wives and daughters while the outside work is given to husbands and sons. The male members do not work on domestic chores. They assist in fetching water, collecting firewood, and looking after cattle. However, in some young and educated households, the men work on different domestic activities to assist their wife and equally share the burden.’

‘I have also spent my time in supporting my wife. Previously, I did not assist my wife and she did all the domestic jobs but due to awareness from mosque and government officials, I support her and do domestic work in my spare time. This is good as we share the burden. What I do not only supports my wife but improves my household in general.’

‘In relatively younger households… the wife also participates and assists her husband with agricultural activities while the husband also assists his wife with different domestic activities. The main change in some households, mainly following government training in [2011/12], is that women from some households have started to participate in agricultural activities, and some neighbouring women have started to cooperate and assist each other in agricultural practices.’

Source: Remnant (2016)35

There was no evidence in the findings of the QuIP study that the development of coffee and other cash crops had increased women’s care work. Instead, project-related increases in income from coffee had freed some families from producing other more labour-intensive crops, and some women respondents referred to their use of time being more productive, and so improved – much as some men had described their increased commitment to work. Box 6 gives some examples.

Box 6: Coffee production and its impacts on women’s time use (reasons for change underlined)

‘The good change in the last five years is that previously I spent a lot of time on tedious crop cultivation for a lot of stress and little profit, but in the last five years I have relaxed and now get a good profit as I have expanded and get good productivity from coffee compared to what I used to get from crops. This in turn enables me to strengthen my social life and give more time to care for other people in the community.’

‘Compared to five years ago, my use of time is improved and increased since I became time conscious, I do not sit idle when I get free time. I take composts and coffee residue to my coffee farm and add under the root of the tree. I also look after my coffee farm and also collect firewood.’

‘Overall, I have better control over my own time in the last five years in order to support and contribute to my children’s development and fulfil their basic needs.’

‘I am using all my time effectively since I got training at our kebele about working hard and changing our life.’

Source: Remnant (2016)36

These findings are broadly consistent with the results of the Effectiveness Review, and help to explain them, while the Effectiveness Review in turn provides more evidence for the attribution of some impacts to the CVC project. The development of cash crop production in general, and of coffee production and marketing with the support of the project, overall appear to have had positive effects on women’s unpaid care work and their subjective sense of well-being.37

While the Effectiveness Review indicated that project participants had increased their time investments in housework and the care of children and other household members more than non-participants, at the time of the survey, women in the former group were still spending much
less time than their counterparts in undertaking the full range of care activities, including those not undertaken at home. The male heads of project households, meanwhile, seem to have increased their contribution to housework and care at home even more, supporting the finding of the QuIP study that there had been some redistribution of care work between men and women, and suggesting that this was due in part to the CVC project and training linked to it.

At the same time, the QuIP study makes it clear that the changes in gender and care relations that it revealed probably also had a number of other social and economic causes, including the impacts of a more general shift to cash cropping, and the effects of other direct interventions, most notably the education and training provided by government agencies and religious authorities.

It has long been acknowledged that the commoditization and intensification of agricultural production can disempower rural women and have negative effects on their well-being. Likewise, there is a general concern that income-generating projects, no matter how successful, may have unintended gender effects – for example, where the income is controlled by men, but women perform the additional labour. The CVC project provides a good test of this, given that it was implemented through cooperatives whose members were overwhelmingly men, and that the Effectiveness Review provided strong evidence of positive effects on household income and wealth.

Two key findings of the QuIP study in this regard are that: (a) increased coffee production did not have a negative impact overall on women’s unpaid care work because it was associated with a switch from less profitable and even more time-demanding crops; and (b) the project took place in a context in which gender norms were being shifted successfully towards the increased sharing of care responsibilities between men and women. While the CVC project cannot claim all the credit for this, the presence of other complementary training and awareness-raising activities helped to reduce the risk of unintended negative effects.
3 DISCUSSION: LESSONS FOR PROGRAMMES AND THEIR EVALUATION

It should be emphasized that these findings have been distilled from the Effectiveness Review and QuIP study; the latter in particular provides a lot more detail than can be given in a short overview. Nonetheless, we believe that these are significant findings and that a number of important lessons can be drawn from them. These are discussed below, along with some of the methodological implications of this study for future evaluations.

LESSONS FOR LIVELIHOOD PROGRAMMES

Given that the primary objective of the CVC project was to improve coffee production and sales, and so household incomes and well-being, the Effectiveness Review was designed to measure its impacts using economic indicators, in common with other impact evaluations of livelihood-themed interventions. It is important to reiterate that although the project had gender components, these did not relate specifically to unpaid care work and the project was not a part of Oxfam’s WE-Care programme. The care module was a later addition to the survey questionnaire used for the Effectiveness Review, and because of this its results and their implications were not fully analysed in the final report of the review. By contrast, the QuIP follow-up study focused specifically on care issues as well as more general socio-economic changes at household level, including changes in gender relations. This section therefore addresses livelihood programmes and the role of women’s economic empowerment within them, including the gendered relations and practices of unpaid care work.

Despite their methodological differences, the broad trends identified by both the quasi-experimental Effectiveness Review and the qualitative QuIP studies were consistent:

The overall story of change taken across both studies is that for most coffee farmers, coffee value chain project-related training in improved cultivation, processing and purchasing through the farmer co-operatives had a widespread and positive effect on households’ ability to produce, sell coffee at a higher price and thereby increase their income.

Beyond these economic indicators, both studies detected and, in the case of the QuIP study, helped to explain, a number of trends in gender and care relations, some of which could be attributed to the CVC project. These findings, described in detail above, have a number of implications for the design and assessment of livelihood programmes:

- The impacts of livelihood interventions on women’s economic empowerment and gendered care relations and care work should not be ignored or assumed in programme design and theories of change. The CVC project had some gender components, including some added in the project’s later stages. However, neither gender nor care issues were explicit parts of its theory of change. Although the project succeeded in increasing coffee production and overall household incomes, and had some positive impacts on women’s economic empowerment and the redistribution of unpaid care work in participants’ households, changes in the latter could not all be unequivocally attributed to the project. In any event, it cannot be assumed that increases in overall household income will automatically translate into more equitable gender relations and women’s economic empowerment at household level. The same goes for gendered care relations and the volume and intensity of unpaid care work. Similarly, increasing women’s participation in value chain activities does not
necessarily translate into greater degrees of empowerment or leadership outside of the household.  

- For the same reasons, the monitoring and evaluation of project impacts on women's economic empowerment and gendered care relations and care work should be an integral part of livelihood programmes – as well as of all development interventions as a matter of course. Gender disaggregation alone is insufficient to capture this important information.

- As argued in the Ugandan study that accompanies this one, an analysis of gender and care relations in their wider social, political and economic context is critical to understanding the social practices, norms, attitudes and behaviours that drive the gendered distribution of labour and care work. Care work cannot be analysed adequately in isolation from gender and labour relations more generally, nor can significant changes in these be identified in full without analysing social and economic trends in the wider community and society at large. Likewise, understanding the wider context and networks of care is essential to identifying key entry points for influencing the redistribution care work. This was not done in the CVC project, whose impacts on care were, in some respects, unintended consequences of its broader success.

- The QuIP study retrospectively identified important aspects of the wider context in Oromia, including the existence of a general transition into cash crop production, as well as diversification and modernization. It also pointed to the significance of generational differences and the more progressive attitudes of the younger generation, fostered by education, training and awareness raising provided by different agents and institutions (including Islamic teachers and government extension officers). This suggests that the provision of education and training promoting women's economic empowerment and the redistribution of unpaid care work should be considered as one potentially effective means of achieving positive change in care relations and reshaping the gendered norms of care work.

LESSONS FOR RESEARCH AND EVALUATION

The quantitative impact evaluation of the CVC project and its qualitative follow-up, the QuIP study, comprise in effect a mixed methods evaluation. Like other studies in this series, this highlights the value of combining quantitative and qualitative approaches in impact evaluation, so that they inform each other, provide unique insights and enhance collective explanatory power. Quasi-experimental evaluations are statistically representative and use established tools for measuring change (such as the time-use logs in the household care module), whereas QuIP evidence is gained from a purposefully selected sample aimed at understanding whether and how different aspects of respondents’ lives have changed according to their own perceptions. The QuIP study proved particularly useful for cross-confirming patterns of change and identifying their perceived drivers, both explicit and implicit, and for identifying confounding variables, such as the role played by different providers of education and training, which the quantitative Effectiveness Review was unable to control for, but which probably affected both project and comparison areas. It also widened the lens of the combined study, identifying drivers of change at the individual, household and wider community levels.
How can the process be improved?

There are, however, a number of ways in which this mixed methods evaluation could have been improved. They can be summarized as follows:

• By better integrating and sequencing different evaluations. The Effectiveness Review made minimal use of the end-of-project evaluation of the CVC project. This is a recurrent problem for Oxfam GB’s Global Performance Framework when Effectiveness Reviews are added onto the normal processes of project monitoring and evaluation. Likewise, the Effectiveness Review and QuIP study were not integrated; one simply followed the other. These different evaluations were therefore undertaken at different times and by different researchers. This can have its advantages, and the in-depth study of care was an experiment, but a fully integrated mixed methods evaluation should be better coordinated to ensure effectiveness and cost efficiency.

• By integrating quantitative and qualitative methods in Effectiveness Reviews so that they inform each other from the start, enhance explanatory power, and reduce costs and other resource requirements. In the case of the CVC review, a better integrated process might have ensured that all of the indicators used and questions asked were fully comparable and responses to them easier to interpret. As it happens, this was not always the case, and when comparing the results of the Effectiveness Review and QuIP study it was sometimes necessary to make interpretive leaps, or else regret that particular measures or information were missing. To some extent this is going to be a problem in any mixed methods study, but the goal should be to minimize it.

• By including social norms in statistical measures and indices for women’s empowerment, and by including the latter in all quantitative Effectiveness Reviews. Programmes which aim to change behaviours are also often explicitly (as part of their theory of change) or implicitly seeking to shift the social norms which underpin them, especially when women’s empowerment is one of their desired outcomes. Reference has already been made to the need to include proper consideration of gender and care issues in livelihoods programmes. The Uganda study makes the case for the inclusion of measures related to social norms in Oxfam GB’s Women’s Empowerment Index Framework.47

• By fully integrating questions about unpaid work and care into research and evaluation protocols. Although care work was included in the Effectiveness Review as one of a number of dimensions against which the CVC project was evaluated, the results of the care module were not fully integrated with the rest of the final report or included in its main findings. This was a consequence of the module being an add-on, as well as the fact that women’s empowerment and care work were not central to the project’s theory of change.

• By improving and expanding the existing list of questions about care work and ensuring that they are embedded in a broader framework that captures patterns of variation and other relevant informant about gender relations and how they are changing. The Effectiveness Review was very thin on contextual information about gender relations and wider patterns of social and economic change, including the development of cash crop and coffee production. The QuIP study supplied some of this information, but not enough to fill in all of the gaps. A proper literature review, undertaken at the start of the evaluation process, and covering the available sources (including academic and ‘grey’ literature, and both online and offline data), would be very useful in cases like this, not least to help frame and refine more specific questions asked during the evaluation and to inform the analysis of QuIP data, which included references to much broader drivers of change than those in the project’s theory of change.

• By continuing to explore ways in which the QuIP methodology and its application can be improved.48 ‘Blindfolding’ is a powerful innovation that reduces respondent bias but potentially introduces other problems, at least in the ways it was used in this study. While the QuIP study generated a rich and fascinating set of narrative responses – only a small selection of which are included in this report – the responses often raised as many questions as they answered. This was notably so with many recorded statements about drivers of
change, whose interpretation remained incomplete because they provided insufficient information to allow analysts to identify causal chains and so all of the agents potentially involved, including the CVC project. Such questions might have been resolved with further questions and probing if field researchers had not been blindfolded; but at the same time, this would have increased the risk of pro-project or confirmation bias in responses, and reduced the reference to the broader range of drivers which the QuIP is designed to pick up on. This dilemma could have been overcome through a second round of unblindfolded focus group meetings to discuss findings with project staff as well as respondents. Consulting project staff with knowledge of activities in the area on initial coding and analysis of data could also have helped to complete some of the unanswered questions, and this has now become a standard part of the QuIP analysis process. Other potential shortcomings relate to the characteristics of QuIP as a qualitative methodology (uncertainty over how far findings can be generalized, over-reliance on respondents’ perceptions of change, and lack of precision about the magnitude of stated changes) and are shared with other qualitative approaches. The obvious way around these problems would have been to integrate QuIP more closely with the complementary quantitative research from the outset – a solution we have already alluded to in general terms above.
4 CONCLUSION

One of the most important lessons to emerge from this mixed methods evaluation of the CVC project is that the development of cash crop production and its intensification do not necessarily have the deleterious impacts on gender and care relations that are sometimes assumed. The QuIP study found that increased coffee production did not have a negative impact overall on women’s unpaid care work because it was associated with a switch from less profitable and even more time-demanding crops. It also revealed that while the project played a part in the redistribution of care responsibilities and increased sharing by men and women, this positive change was also influenced other social and cultural factors, including the provision of education and training by government and religious authorities.

These findings underline the importance of understanding the wider context in which gender and care relations are both reproduced and negotiated: project impacts in this regard cannot be simply second-guessed. In-depth analysis is essential to identifying key entry points for influencing the redistribution of care work. The results of this study suggest that the provision of education and training promoting women’s economic empowerment and the redistribution of unpaid care work should be considered as one potentially effective means of achieving positive change in care relations and reshaping the gendered norms of care work. At the same time, other factors may be of equal or greater importance in any particular case. Mixed methods research of the kinds described and recommended in this report are essential to discovering what these factors might be.
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NOTES


3 Countries include Colombia, Ethiopia, Honduras, Malawi, the Philippines, Uganda and Zimbabwe. Components of the initiative are being implemented in Bangladesh, Tajikistan and Zambia.


6 Remme et al. (2015), op cit.

7 The household care survey has since been revised to collect information about household assets, the value of unpaid care work, and children’s time use and to understand better factors associated with problematic levels of unpaid care including social norms, household decision making and gender-based violence.


10 Girar Development Consult (2012), op. cit.


14 Oxfam GB (2015a), op. cit., p. 1. Note that ‘Increased crop production’ in this diagram refers to coffee and other crops.


16 Oxfam GB (2015a), op. cit., p. 2. ‘On average’ in the last two rows of this table refers to the difference between intervention group and comparison group means.

17 Anguko (2015), op. cit., pp. 31-33. This finding was based on 24-hour recall at the time of the Effectiveness Review survey, and so cannot be generalized. Primary care activities are those which take up all of the carer’s time and attention on a particular occasion, whereas secondary care activities are those which do not.

18 Anguko (2015), op. cit., pp. 33-35. This finding was based on asking women respondents about changes that had taken place since 2009.

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Note again that this was in the view of women respondents. They also reported that other women in their households had increased their contributions to housework as much as the men, though this did not apply to them: Anguko (2015), op. cit., pp. 34-35.

Anguko (2015), op. cit., pp. 36-37. These differences are unexplained. Taken in conjunction with other results, it appears that greater ownership and control of labour-saving equipment in the comparison group did not correlate with lower time investments in care at the time of the survey, although it may be linked to the lower increase in time devoted to housework. The list of labour-saving equipment covered in the survey included the following items: ‘charcoal stove; energy-saving stove; grinding mill; dustbin; compost pit; water piping; mashing facilities; and rainwater harvesting equipment’ (p. 36).

Anguko (2015), op. cit., pp. 37-38. These responses can be interpreted as reflections of the existence of both a more ‘traditional’ set of gendered care norms and a greater desire for change – change along the lines of the rebalancing of roles and redistribution of care activities that have already taken place in households that participated in the CVC project, and so are now less of a concern there.


For details see Remnant (2016), op. cit., pp. 10-11. Referring back to Box 1, note that the five-year recall period stretched back to the last year of the CVC project.

Remnant (2016), op. cit., p. 6, Table 1.2.

Remnant (2016), op. cit., p. 7, Table 1.4.


Remnant (2016), op. cit., p. 18.

Remnant (2016), op. cit., p. 36.

Remnant (2016), op. cit., p. 38.


It is interesting that independently collected and analysed findings from interviews with men and women did not throw up a larger discrepancy when it came to changes in household decision making and the sharing of care work. There may have been an element of people saying things consistent with what they knew government and other agencies were pushing for, but that in itself would reflect some shift in gender norms. (We are grateful to James Copestake for this observation.)

It is important to note that the two sets of responses in the Effectiveness Review referred to here are not strictly comparable, given that one was based on 24-hour recall of all care activities undertaken, and the other on perceived change in time investments in just two kinds of activity (housework and care of children and other household members) over a five-year period from the start of the CVC project. The full range of care activities considered in the Effectiveness Review was listed as ‘shopping (including walking to the market); washing, drying, ironing and mending clothes; food and drink preparation; grinding and pounding; cleaning; fuel collection; water collection; child care; dependent adult care; care of the disabled; care of community members’. Anguko (2015), op. cit., p. 31. One possible interpretation of the responses considered together is that although project participants were spending less time on the full range of care activities, they had chosen to devote more of that time to care work at home. Further research, though, would be required to demonstrate this and eliminate other possibilities.
39 See H.L. Moore (1988) Feminism and Anthropology, Cambridge: Polity Press, pp. 74-97, for a critical discussion of this and overview of the ‘differential effects of capitalism on women’ (p. 74) and gender relations in rural areas.


41 Remnant (2016), op. cit., including the data in Appendix 4, ‘Coded transcripts’.


44 There is some evidence from the end-of-project evaluation report that progress was made with regards to women’s membership of producer cooperatives: Girar Development Consult (2012), op. cit., pp. 8-9, 25, 52.


47 Butt et al. (2017) op. cit., where it is noted that the revised Household Care Survey does include questions related to social norms, but that these are not yet a part of the women’s Empowerment Index Framework, used in our regular Effectiveness Reviews.


49 Lack of information on past project interventions also hampered interpretation in many instances, especially in relation to the provision of training and who had instigated it.
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