

# Rapid Care Analysis

## Training for Facilitators

**WE-CARE**  
**WOMEN'S**  
**ECONOMIC**  
**EMPOWERMENT**  
**AND CARE**



**OXFAM**

# Part 1

## Introduction

Training preparation and objectives

# Time allocation for training sessions

<b>Part 1</b>	Introduction	10 minutes
<b>Part 2</b>	Why Rapid Care Analysis?	35 minutes
<b>Part 3</b>	A first overview of the RCA	10 minutes
<b>Part 4</b>	Planning for the RCA	25 minutes
<b>Part 5</b>	Focus group exercises	4 hours 20 minutes
<b>Part 6</b>	Documentation and reporting	15 minutes
<b>Part 7</b>	Roles within the facilitation team	25 minutes
<b>Part 8</b>	Evaluation of the training	10 minutes
<b>TOTAL</b>		<b>6 hours 30 minutes</b>

# Objectives of the training

## Welcome!

1. To clarify **why care is important, definition of unpaid care work and care transformation**
2. To build an understanding of **what the RCA is** and what it **is not**, and how the methodology fits into programmes
3. To introduce briefly the main **purposes of the RCA methodology** and how these are achieved through the **exercises**
4. To ensure that facilitators **understand all exercises** and are well **equipped to conduct these**
5. To build capacity on how to document and report on the RCA

# Participant expectations

- Who has read the materials?
- What are your expectations?
- One **major or pressing question** about care, care concepts or care in development.

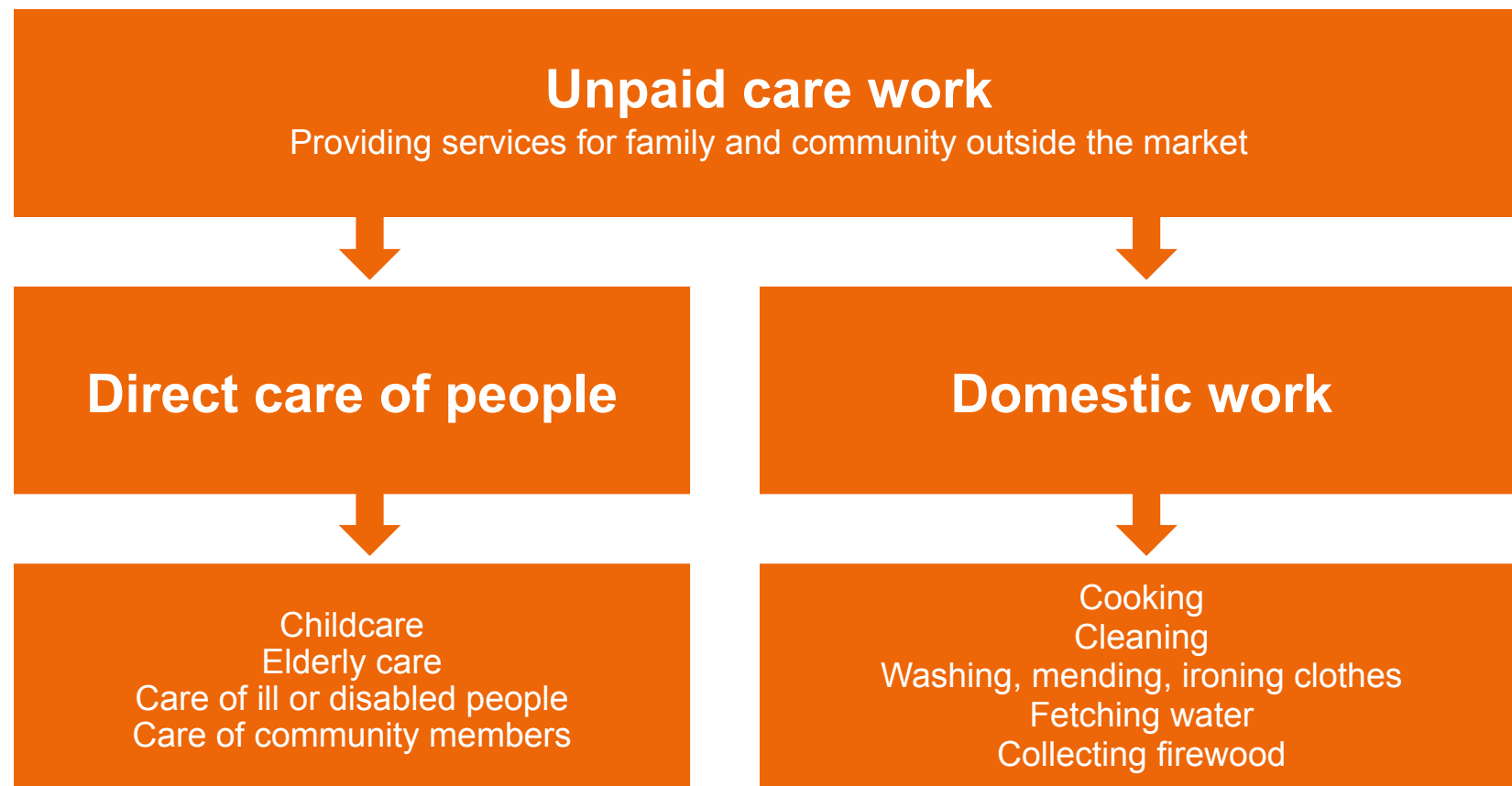


Photo: Abbie Trayler-Smith/Oxfam

## Part 2

# Why Rapid Care Analysis?

# What do we mean by care?



# What is *not* unpaid care work

- **Market work:** work that is paid or generates income, e.g. harvesting and selling crops; selling eggs or bread; ironing for pay
- **Productive work:** including productive work that is unpaid, e.g. producing products (furniture), unpaid work in a family business, constructing homes
- **Non-work:** sleep, personal care, entertainment, school
- **Providing money for family's needs:** including paying for clothes, food or childcare



# Why investing in care is important

- Care has a widespread, long-term, positive impact on **wellbeing** and **development**
- Care is a 'social good', not a 'burden'
- Care provision is critical to address **inequality** and **vulnerability**, both for care providers and receivers
- Care provision influences **productivity** and **economic growth**



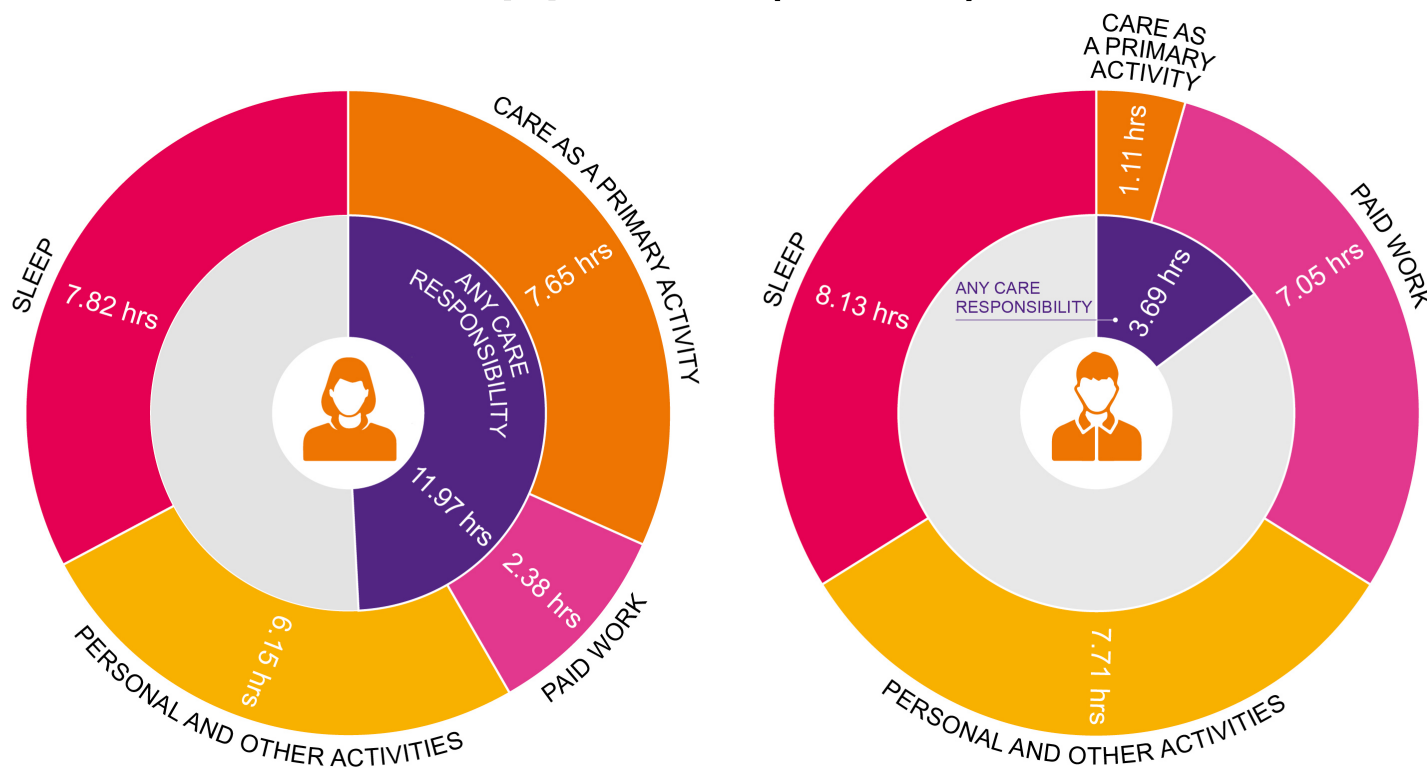
Photo: Aurelie Marrier d'Unienville/Oxfam

# Unpaid care work is part of the economy

- **Care produces goods and services**
- **Unpaid carers are part of the labour force** (i.e. message not 'reduce care work so women can *join* the workforce')
- **Care is not leisure**
- **'Valuable time'** (how infrastructure and technology increase productivity, save time, benefit women)
- **'All working together'** (better data on unpaid care makes better policy)
- **'Care for the economy'** (how public care services support economic growth and a healthier workforce)

# Evidence: Care is heavy and unequal

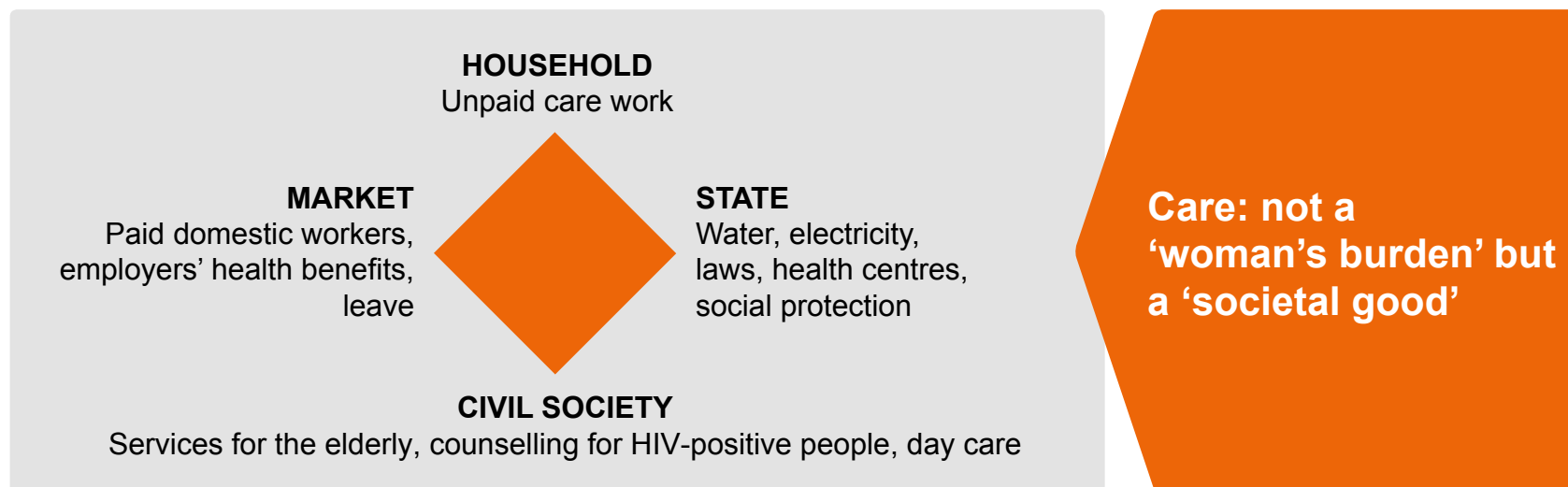
## Lanao del Sur, Philippines (2014)



Average hours spent on different activities by surveyed participants in the previous 24 hours

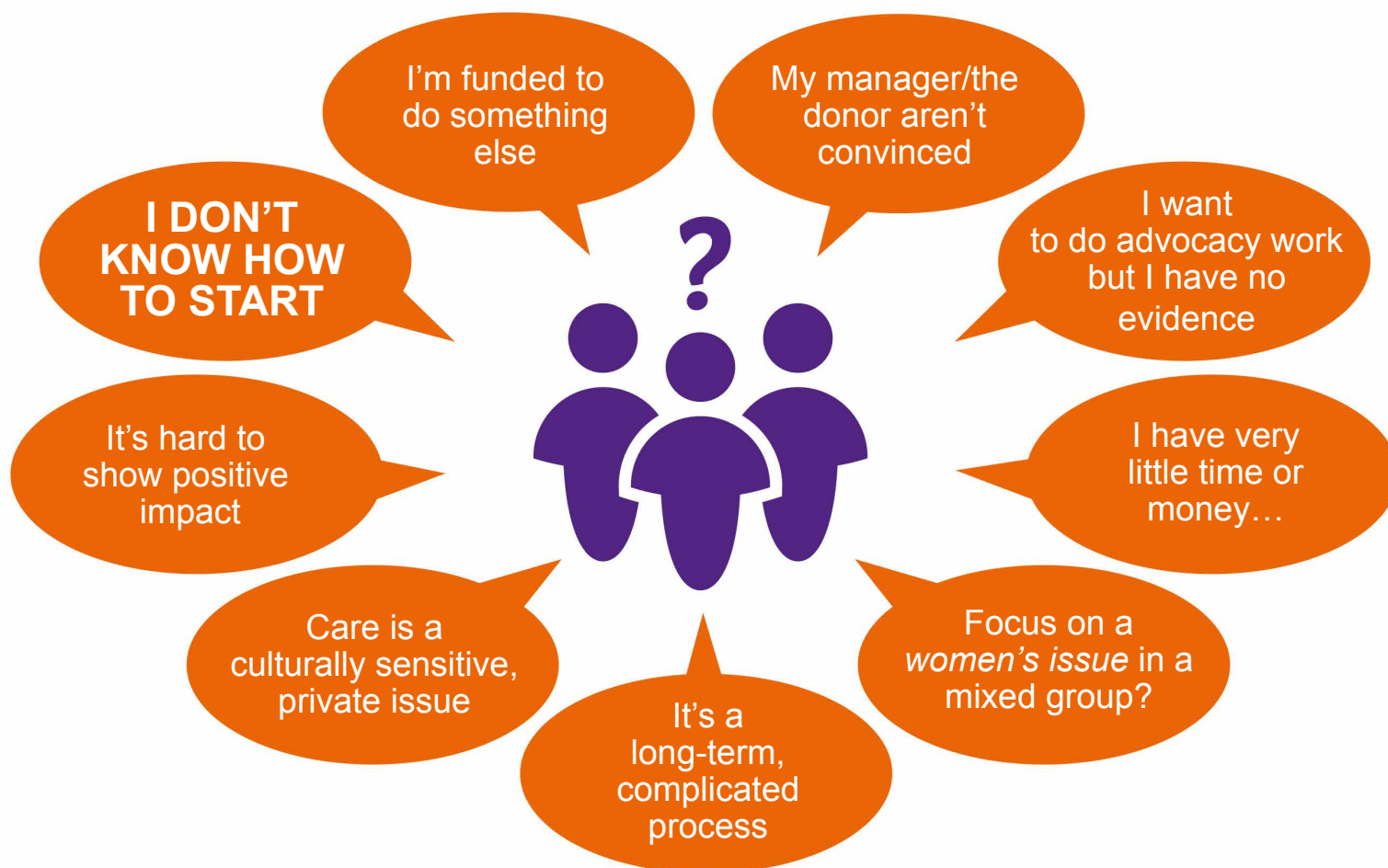
# The 'four Rs' – transforming care\*

- **Recognise** care work
- **Reduce** difficult, inefficient tasks
- **Redistribute** responsibility for care more equitably – from women to men, and from poor families to the state/employers
- **Represent** carers in decision making



\* Adapted from 'Three Rs of Unpaid Work', Prof. Diane Elson (2008). Care diamond from 'The Political and Social Economy of Care in a Development Context', Shahra Razavi (2007)

# Organisational challenges



# RCA principles and purpose

Rapid Care Analysis (RCA) is a **1-2 day** exercise with **focus groups of 12-20 women and men** – a first step to addressing care in development

RCA is designed to show that 'care' is:

- **Significant:** Collects evidence of the problems – quantitative data, stories and visual outputs
- **Feasible:** Practical proposals for short-term solutions
- **Appealing:** Men are involved – addressing care is a 'societal issue' about wellbeing
- **Flexible:** Used in a range of cultures/programmes (20 countries)
- **Workable:** Involves simple, user-friendly exercises
- **Inspiring:** RCA aims to 'open the door' – to get more people and projects interested in care

# What the RCA is *not*

1. RCA doesn't go into depth – it is not a detailed analysis of social norms, power relations or advocacy
2. The RCA does raise awareness; it doesn't try to address gender relations
3. It's not an intervention itself; it is not intended to BE the transformation
4. It's an assessment, a diagnostic tool

**Any questions?**



# Training exercise 1

## (15 minutes)

### **Objective:**

- To ensure full understanding of the different classes of work, i.e. care work, productive and leisure/non-work and the ability to translate/explain the terms 'care' and 'care work' in local languages

# Part 3

An overview of the  
RCA methodology

# Four key purposes of the RCA

1. Highlight that **everyone cares** and **care matters**
2. Establish women's and men's **time use**
3. Identify **problematic** care tasks
4. Develop **solutions**



# The 8 focus group exercises (FGEs)

<b>FGE 1</b>	Develop an understanding that <b>everyone cares</b> and that <b>care is important</b>
<b>FGE 2</b>	<b>Time use</b> – estimate women’s and men’s hours per week spent on unpaid care and paid/productive work
<b>FGE 3</b>	Map how care roles are distributed by <b>gender and age</b>
<b>FGE 4</b>	Explore <b>social norms</b> about men and women and care
<b>FGE 5</b>	Document <b>changes</b> in care patterns – seasons, policies
<b>FGE 6</b>	Identify <b>problematic</b> care activities
<b>FGE 7</b>	Note <b>infrastructure and services</b> that support care
<b>FGE 8</b>	<b>Develop and prioritise solutions</b> to address problems

**Any questions?**

## **Part 4**

Overview of the plans and objectives of implementing the RCA

# Linking local programme to the RCA

- Outcomes of the programme
- Plans for influencing and advocacy
- Expected outputs from the RCA – what do we want to achieve?
- Focal areas of the RCA
- Be representative
- Explore different challenges

# Planning steps

**There are several things that need to be addressed before the RCA:**

1. Sensitisation of community leaders
2. Briefing 'gatekeepers' and observing all protocols
3. Mobilisation of community
4. Logistics
5. Selection of participants



# Facilitation team

- 1. Two facilitators:** 1 woman and 1 man, skilled in participatory methods and facilitation on gender issues, fluent in local language, experienced in working with diverse groups
- 2. Two documenters:** 1 woman and 1 man, designated to observe discussions and document (via video, notes)
- 3. Translators:** Are they required? If yes, plan for 2 translators
- 4. Assistant and observer:** This can be the programme team
- 5. Training of facilitators:** 1-2 days of training and practising exercises

# RCA participants

## Number of participants in each RCA?

- 16-20 people, 60% women

## Who?

- By occupation? Age? Youth? Other household types?

## Community leaders

- Either 1 or 2 in each RCA, or a separate RCA – to build a base for local advocacy

## RCA with children

- Include both in-school and out-of-school children

# Logistics

- Lead facilitators schedule RCA, plan exercises
- How many hours (per day)?
- Materials in local language
- Invitations
- Where held? Inside, outside, comfort, privacy
- Logistics (food/lunch, transport, childcare, workshop materials, etc.)
- Documentation template: numbers, quotes, debates, conclusions

# Training exercise 2

## (15 minutes)

### **Objective:**

- To give facilitators an opportunity to comment on and discuss the plans for their RCA and ask questions on immediate concerns

# Part 5

## How to conduct Focus Group Exercises

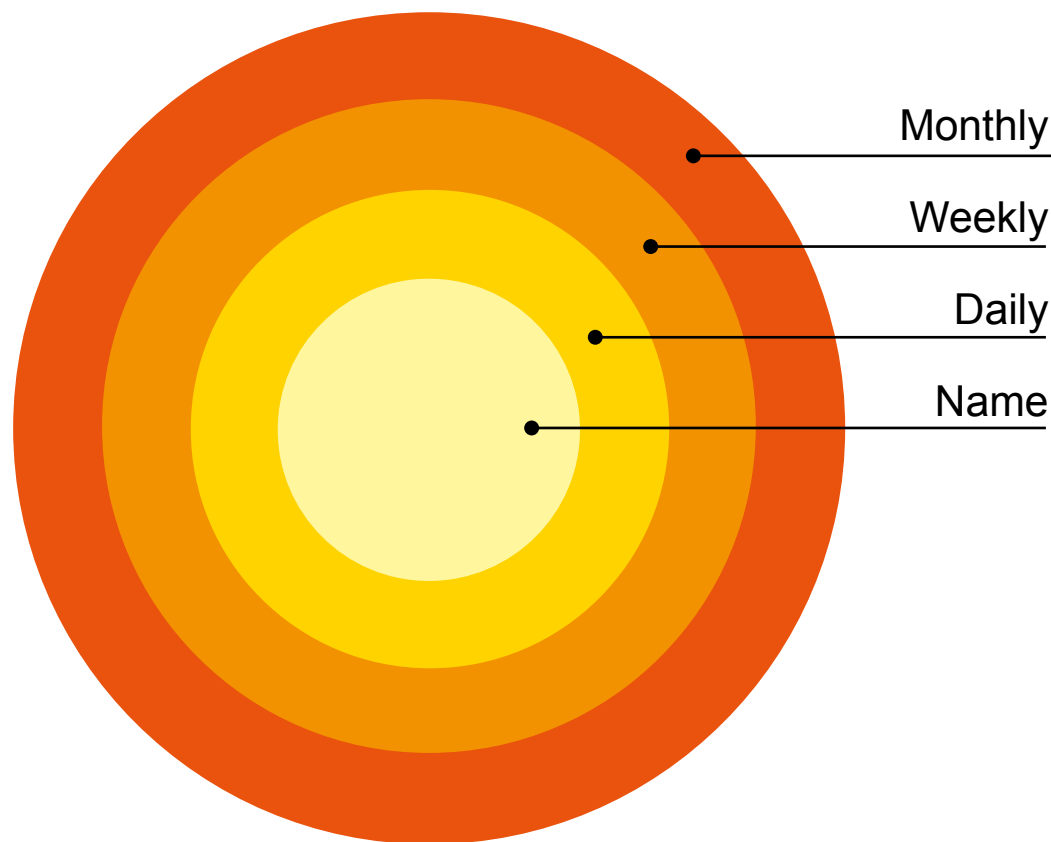
# FGE 1: Exploring relationships of care

## Start by reiterating the importance of care work

- Fostering love, unity, happiness and peace in the family
- Economic development
- Child development

## Who do you care for on a daily, weekly and monthly basis?

- Each participant to draw an individual diagram showing a set of concentric circles
- Allow each participant to present who they care for in each circle
- Discuss findings



# Practice 1

## (20 minutes)

### **Objective:**

- To offer practical experience of making an introduction during an RCA and conducting FGE 1

# FGE 2: Time use for women's and men's work

## Process:

- Identify work activities of women and men
- Women and men split up into two groups
- **Estimate average weekly hours** spent on types of work by men and women
- Include simultaneous activities and supervision
- **Come together and compare results**



# Definition of terms

- **Primary activity** – main activity that participant was doing during that hour (every hour needs to be accounted for in this column)
- **Simultaneous/secondary activity** – activity that the participant was doing during the same hour
- **Supervision hours** – when participant has a responsibility to look after dependants
- **Care responsibility** – total hours of care which participant spent doing both primary, simultaneous and supervision activities

# One-day recall by individuals







## Women and men

- Primary/main *activity*
- Secondary/simultaneous *activity*
- Responsibility for 'looking after' dependent children/adults

	Primary activity	Secondary activity	Supervising/looking after child/adult (Yes or No)
04:00-05:00			
05:00-06:00			
06:00-07:00			
07:00-08:00			

# Work categories

- Introduce the six categories of work and agree with participants on the symbols to use
- Symbols must be easy to understand and draw

Examples of simple symbols to denote different types of work	
Work to produce <b>products for sale</b>	
Paid <b>labour</b> , paid <b>services</b>	
Unpaid <b>care work</b>	
Unpaid care work producing <b>products for home consumption</b>	
Unpaid community work	
Non-work	

# Allocating activities to categories

- Appropriately allocate each activity to a category and use relevant symbols

Time	Main (primary) activity	Symbol	Simultaneous (secondary) activities	Symbol
00:00-01:00	Sleeping	✘		
01:00-02:00	Sleeping	✘		
02:00-03:00	Sleeping	✘		
03:00-04:00	Sleeping	✘		
04:00-05:00	Getting up: praying, bathing, dressing	✘	Putting beans to soak	♥
05:00-06:00	Preparing breakfast	♥	Vegetable garden: watering garden	🏠
06:00-07:00	Serving breakfast	♥	Children: dressing, school bags	♥

# Estimate average weekly hours – women and men

- Count number of hours for each category
- Multiply hours for main activity by 7 days
- Estimate weekly hours: add up all individual hours and divide by number of participants

	Example of one participant's daily totals			Yesterday's main activities x 7 days: All participants	Estimated weekly hours of work for women		
	Main	Simultaneous	Supervision		Main	Simultaneous	Supervision
1. Products for sale	1	0		7,7,14,28,28,7	15	0	
2. Paid labour and paid services	5	0		35,0,7,14,28,21	18	0	
3. Unpaid care work	9	9	7	63,28,42,49,56,63	15	27	16
4. Unpaid production of products for home consumption	0	1		0,7,14,14,14,21	12	0	
5. Unpaid community work	1	0		7,7,7,7,7,14	8	0	
6. Non-work	8			56,119,84,56,35,42,392	65		
<b>TOTALS</b>	<b>24</b>	<b>10</b>	<b>7</b>		<b>168</b>	<b>27</b>	<b>16</b>

# Purpose of FGE 2

- Not rigorous time-use evidence
- But participants: 1) Know the figures are based on reality; 2) Own the data; 3) Have a big 'aha' or 'lightbulb' moment



# Practice 2

## (45 minutes)

### **Objective:**

- To develop facilitators' practical knowledge on the completion of the individual one-day recall and calculation of average weekly hours

# FGE 3: Distribution of care roles by gender and age

- Present categories of care work from FGE 2
- Gender and age analysis of care activities

Ranking Matrix 1 – example of detailed gender analysis of care activities							
Care activities	Sub-categories of care activities	(Symbol for) woman	(Symbol for) man	(Symbol for) girl	(Symbol for) boy	(Symbol for) older woman	(Symbol for) older man
Preparing meals	Collecting firewood	•		•••	••	•••	••
	Pounding grain	•••		••			
	Washing the dishes	•••		•••	•	•••	•••
Taking care of sick people (in the family)	Staying home	•••					
	Buying medicine		•••				
	Cooking special food	•••					



# Practice 3

## (15 minutes)

### **Objective:**

- To develop facilitators' practical knowledge of how to facilitate FGE 3 on distribution of care roles at household level

# FGE 4: Social norms relating to care work

## 1) Perceptions of care work as valued or skilled

- Which tasks are considered **'work'**?
- Which activities are **desirable**?
- What type of work is most **important**?
- Which work requires **skill**?

## 2) Social norms about gender roles

- Which tasks are **acceptable** for women and men to do, and why?
- What **exceptions** are there to this?
- What **sayings** are there about gender roles?
- Where do people learn roles from – what **influences** norms?

# Practice 4
















## (30 minutes)

### **Objective:**

- To allow facilitators to practise facilitating FGE 4 on social norms that impact on care work, including asking probing questions
- To enhance facilitators' understanding of perceptions of care work and norms on gender roles and care work

# FGE 5: Changes in care patterns

Changes affecting care provision – e.g. migration, displacement, conflict, government policy changes, extreme weather

Seasonal calendar of extra burden care activities											
											
											
											
											
Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec

# Before-and-after matrix

Changes in factors affecting care before, during and after a situation  
(flood, conflict, clinic closing, cash-for-work project)

Care categories	Before	During	After
Water collection			
Fuel collection			
Childcare			
Meal preparation			
Cleaning			
Care of dependent adult			

# Practice 5

## (20 minutes)

### **Objective:**

- To allow facilitators to practise facilitating FGE 5 on exploring changes in care patterns

# FGE 6: Problematic care activities

- Identify most 'problematic' care activities for women and men
- Women and men split up into two groups

	Time burden	Limits mobility	Affects carer's health
<b>Preparing meals</b>	● ● ●	● ●	● ● ●
<b>Providing moral support</b>	●	●	●
<b>Cleaning house</b>	● ●	●	●
<b>Nursing ill people</b>	● ● ●	● ● ●	●

# Practice 6

## (20 minutes)

### **Objective:**

- To allow facilitators to practise facilitating FGE 6 on identifying problematic care activities in their communities and how to prioritise these



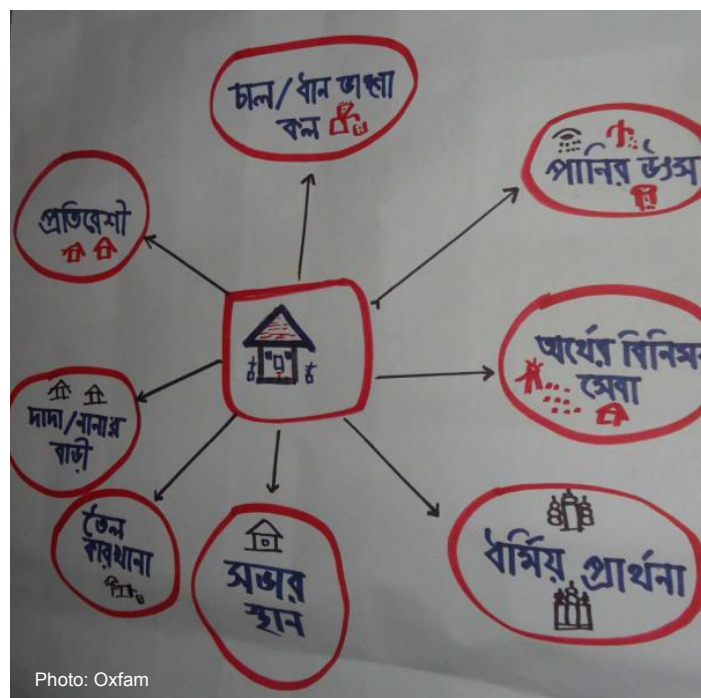
# FGE 7: Mapping infrastructure and services

Community map of infrastructure and services that support care

Society provides care with 'care diamond': state, market, community, family

## Examples:

- Water supply
- Electricity, fuel
- Washing facilities
- Health services
- Schools, childcare
- Grain mills, oil presses
- Shops
- Services for elderly, disabled or HIV+ people
- Relatives



# Practice 7

## (15 minutes)

### **Objective:**

- To provide facilitators with practical experience on how to facilitate a session on mapping available infrastructure and services that support care work

# FGE 8: Solutions to reduce and redistribute care

**Identify** and **prioritise solutions** to address problems of care provision

## **1. Practical solutions**

- Machines for meal preparation, cooking, cleaning and washing
- Shared cars for food shopping
- Recreational activities and psycho-social support for carers

## **2. Advocacy**

- Installation of water pumps and electricity
- Provision of childcare, bus services, healthcare and sanitation services
- Raising awareness on family planning; laws on labour and women's rights

## **3. Gender roles**

- Household discussions on sharing care work (partners and family members)
- Community discussions, workshops and campaigns on sharing care work
- Cooking lessons for men and boys

# Prioritising solutions

Plotting **feasibility** and potential **impact**

	Option 1	Option 2	Option 3	Option 4
Financially feasible?				
Socially acceptable?				
Achievable?				
Saves time for women?				
Improved quality of life for women (health, mobility, safety)?				
Improved quality of life for family?				
Unintended negative consequences can be dealt with?				

# Practice 8

## (20 minutes)

### **Objective:**

- To provide facilitators with practical experience on how to facilitate a session on ranking possible solutions to address the problems with care work, and on managing community expectations

**Any questions?**

# Part 6

## Documentation and reporting

# Documentation and reporting

- Documentation during RCA to be done by two designated individuals – use the documentation template
- Documenter will take notes and photos of flipcharts, diagrams, drawings, plus group photo of participants and trainers
- Video of the training?
- Need to informally seek consent for videos and photos
- Use the reporting template to facilitate reporting and developing publications.



# Documentation challenges

## Sharing of experiences by documenters

- Challenges
- Concerns

**What other challenges do we anticipate during the RCA?**

**How can we deal with these challenges and concerns?**

- What needs to be done before, during and after the RCA?

# Part 7

Unpacking roles within  
the facilitation team

# Discussion

## (25 minutes)

### **Objective:**

- Roles and responsibilities of the facilitation team

# Part 8

## Evaluation of the training

**Please take 10 minutes  
to complete the evaluation  
form for the training**

Thank  
you!

WE-CARE (Women's Economic Empowerment and Care) is Oxfam's initiative in 10 countries that supports women's empowerment by addressing excessive and unequal care work – building evidence, promoting positive norms, new investments and policy advocacy

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