

UNLOCKING SUSTAINABLE DEVELOPMENT IN AFRICA BY ADDRESSING UNPAID CARE AND DOMESTIC WORK

Oxfam Policy Brief
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WE-CARE
WOMEN'S
ECONOMIC
EMPOWERMENT
AND CARE



OXFAM

INTRODUCTION

Across Africa, ambitions to achieve inclusive and sustainable development are being undermined by inadequate investment in the care economy. Women and girls are providing millions of hours of unpaid care and domestic work (UCDW) – a provision which props up the economy and underpins society, yet remains under-recognized, undervalued and under-invested in.

While inattention to care policy and the unequal distribution of UCDW has stalled gender equality in every country globally, this brief focuses on the specific barriers that UCDW creates for sustainable development in Africa. It explains how investing in quality, accessible and affordable public services and infrastructure in Africa can address heavy and unequal UCDW and unlock progress across multiple Sustainable Development Goals (SDGs). The brief draws on research and programming experience from Oxfam's Women's Economic Empowerment and Care (WE-Care)¹ initiative in Ethiopia, Kenya, Tanzania, Uganda and Zimbabwe, and presents

evidence-based policy solutions from these five countries to address UCDW across the continent.

Implemented since 2014, Oxfam's WE-Care programme addresses UCDW as a key driver of gender inequality and is implemented in Ethiopia, Kenya, Tanzania, Uganda, Zimbabwe and the Philippines.

The African Union (AU) has a unique role to play in taking this agenda forward by encouraging and supporting member states to recognize, reduce and redistribute the heavy and unequal unpaid care work provided by women and girls. This means developing care policies, properly investing in care-supporting services and infrastructure, and ensuring that carers are represented in budgeting and decision making. Doing so will fast-track the AU's achievement of its development goals and Agenda 2063 objectives as well as the SDGs.



Ellina and her daughter collect water from a tap connected to an Oxfam solar-powered piped water system, Bubi District, Zimbabwe.
Photo: Aurelie Marrier d'Unienville/Oxfam

UNPAID CARE: A CAUSE AND CONSEQUENCE OF GENDER INEQUALITY

Without care work our societies wouldn't function. The vital work of caring for the household, community, children, and sick and elderly people is essential for maintaining healthy, productive households and functioning economies. UCDW, which includes all non-remunerated work within the household or community sphere, accounts for \$10.8 trillion of global output per year (roughly equivalent to 13% of global GDP in 2018).²

Yet despite this vast and invaluable contribution to society and the economy, UCDW is not included in official GDP calculations and remains largely absent from government policies.

From cooking and cleaning to collecting water and firewood or caring for children, women across the world undertake the vast majority of unpaid care work – spending approximately three times more hours per day than men on UCDW, according to the UN.³

This imbalance results in time poverty for women and girls, reducing their opportunities to participate in education, decent paid work, public life and leisure, and further reinforcing gender-based socioeconomic disadvantages. Women and girls' disproportionate responsibility for providing UCDW is deeply rooted in beliefs and norms that define women's and men's roles in society.

Women and girls living in poverty, and particularly those facing multiple discriminations (e.g. on the basis of race or ethnicity), experience the greatest time poverty and opportunity costs due to unpaid care. Inadequate water systems, fuel and cooking facilities result in women and girls having to make long and backbreaking daily trips to collect water and firewood, while under-funded health services mean many must walk miles to get medical care for their families. Time and mobility constraints alongside restrictive social norms mean these women are rarely represented or able to express their needs in budget-setting and policy-making processes.

A growing body of evidence has shown that in low-resource settings, government investment in public services such as childcare and health facilities, and in essential infrastructure such as local roads, public transport, clean water and energy options as well as time- and labour-saving technology, are critical for reducing the heavy unpaid workloads of women and girls, thereby reducing poverty and inequality. It is also well established that social and economic policies, and

the conditions that states place on the provision or withholding of benefits – from parental leave to child benefits and tax exemptions – have a significant ability to either reinforce or transform gendered patterns of unpaid care.

Care policies are public policies that allocate resources to recognizing, reducing and redistributing unpaid care in the form of money, services and time.

Yet despite the evidence, government care policies and investments to reduce the time and intensity of UCDW – and to redistribute the responsibility between women and men, and from the household to the state and private sector – fall far short of what is needed. Inadequate investment in the care economy is propelled by economic models that value GDP growth and corporate profit over societal wellbeing. This is exacerbated by austerity measures, which reduce state provision of public services such as childcare, healthcare and education, and leave women to make up the shortfall through their unpaid care work or by paying out-of-pocket care expenses.⁴

Positively, the inclusion of a specific SDG target and indicator on UCDW signals growing recognition globally of UCDW as a development and public policy issue:

SDG Target 5.4: Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies, and the promotion of shared responsibility within the household and the family as nationally appropriate.

SDG Indicator 5.4.1: Average number of hours spent on paid and unpaid work combined (total work burden), by sex.

In Africa, women and girls' disproportionate responsibility for the provision of care is hindering the achievement of the continent's international, regional and national development goals and objectives. It is now incumbent upon AU member states and regional bodies to commit to SDG Target 5.4 and Indicator 5.4.1 through policies, data collection and investments that recognize, reduce and redistribute UCDW and ensure that carers' needs are represented in decisions that affect their daily lives.

THE 'FOUR RS' FRAMEWORK TO ADDRESS UCDW



RECOGNITION involves making visible the contribution of UCDW to society and the economy, including through government policies, budget allocation and the collection of quantitative and qualitative data to inform policy responses.



REDUCTION efforts include reducing the drudgery of time- and labour-intensive UCDW tasks to free up women and girls' time to participate in education and in social, political and economic life.



REDISTRIBUTION efforts involve ensuring that the responsibility for UCDW is shared more equitably between women and men, and between government, the private sector, communities and households.



REPRESENTATION refers to the meaningful inclusion of unpaid carers in decision making about national, community and household budgets, planning, policy and decision-making processes, ensuring that UCDW is considered in infrastructure and services at all levels.

UNPAID CARE AND DOMESTIC WORK IN AFRICA

- According to the ILO's recent report on the care economy,⁵ the most common profile of an unpaid carer in Africa is a woman aged between 15 and 54, with few economic resources, several children, a low level of education, often with health problems or disabilities, who simultaneously works for pay or profit, mostly in the informal economy, and receives little or no formal care support.
- In sub-Saharan Africa, 68% of community health workers are women. Most are young, and 59% of them have only primary education. The vast majority are unpaid, 43% receive non-monetary incentives and 23% receive stipends.⁶
- Women are also working more hours than men when unpaid care work and paid work are added together. In **Ethiopia**, women are twice as likely as men to spend time collecting water and firewood,⁷ while in parts of **Kenya**, women are 20% more likely than men to have responsibility for looking after a child.⁸ In **Tanzania**, women spend more than five times more hours than men doing domestic work,⁹ while in **Uganda**, women spend 32 hours a week on UCDW compared to just 2 hours for men.¹⁰ In rural areas of **Zimbabwe**, women spend more than four times as many hours per day than men on UCDW.¹¹



Melody Mutsauki relaxes with her daughter outside her home in Masvingo District, Zimbabwe. Her water source is about 5km away, so fetching water can take up to three hours of Melody's day. All the household tasks are Melody's responsibility. Photo: Aurelie Marrier d'Unienville/Oxfam

ADDRESSING HEAVY AND UNEQUAL UNPAID CARE WORK IN AFRICA

As in every other continent, in Africa the vast majority of UCDW is carried out by women and girls; this includes the most time-intensive care roles, such as caring for children and sick and elderly family members, as well as unpaid food production.

While the AU and its member states have made commitments to promote gender equality through various frameworks and protocols, as outlined below, recognition of UCDW as a social, economic and development issue remains limited, as do concrete policy commitments and financial investments in care-supporting services and infrastructure. Where care policies do exist, there are serious shortcomings in implementation. Further, policy interventions on UCDW tend to be limited to women's role in caring for family and community members' health, particularly in relation to HIV and AIDS. There is an urgent need to broaden recognition of UCDW beyond healthcare and to accompany this with care policies and budgets.

The African Union Strategy for Gender Equality and Women's Empowerment (2018-2028) contains top-line guidance on the development and implementation of effective policy frameworks on inclusive economic development in Africa. Unpaid care is mentioned under Outcome 1.1 on education and care work, and under Outcome 1.2 on economic empowerment and financial inclusion, with a stated activity area to recognize care work. However, there are no details on what this means in practice.

The Southern African Development Community (SADC) Protocol on Gender and Development (2013) includes an Article on HIV and AIDS. This calls on member states to develop and implement policies and programmes that recognize care work carried out by women, allocate resources for caregivers, and promote men's involvement in caring for people living with HIV and AIDS.

The East Africa Community Gender Policy (2018) recognizes that women provide the majority of UCDW and calls for holistic interventions such as improvements in access to safe water, health services and alternative sources of energy. Under a Priority Action Area on HIV and AIDS, it calls on partner states to develop mechanisms for supporting caregivers and to encourage men to provide unpaid care work.

A growing number of national, regional and international CSOs are pushing for UCDW to be part of Africa's sustainable development and gender equality agenda. Women's rights organizations have played a crucial advocacy role in raising the profile of UCDW in national, regional and international spaces such as the AU Summit, Beijing Declaration and Platform for Action 25-Year Africa Regional Review Process ('Beijing +25'), Commission on the Status of Women (CSW) and the UN Secretary-General's High-Level Panel on Women's Economic Empowerment. A number of national governments have also made notable policy commitments on UCDW, including in Ethiopia and Kenya, where the governments have committed to carrying out a national time-use survey on UCDW in 2020.

However, there are a number of threats to progress. The privatization of essential public services is limiting opportunities to reduce women's unpaid care responsibilities,¹² as is the lack of data on UCDW. As of 2018, only 16 countries had national time-use data on UCDW by men and women,¹³ despite the existence of SDG Indicator 5.4.1. This, alongside challenges with comparability of data, hampers the compilation of regional aggregates and comparisons. Barriers to financing also present a major threat, as outlined later in this brief.

While this policy brief focuses on the SDGs, the heavy and unequal distribution of UCDW thwarts many of the continent's other important commitments, including Agenda 2063: The Africa We Want, the Beijing Platform for Action, and the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW).

Failure to recognize the contribution of UCDW to social and economic development and, in turn, reluctance to invest in care-supporting public services and infrastructure, not only perpetuates gender inequality but prevents the AU from realizing its ambitions for inclusive and sustainable development.

WHY INVESTING IN CARE IS KEY TO ACHIEVING THE SDGS

The pledge to ‘Leave no one behind’ is fundamental to the 2030 Agenda for Sustainable Development and SDGs. For this commitment to be fulfilled, governments must address UCDW more holistically in regional and national policy. Recognizing, reducing and redistributing UCDW is vital for the achievement of several individual SDGs, as shown below, and – as the goals are interlinked – for achieving the SDGs overall.



SDG 1: End poverty in all its forms everywhere

There is a direct relationship between ending poverty and reducing and redistributing women and girls’ heavy and unequal responsibility for UCDW. The fact that women and girls perform the lion’s share of UCDW entrenches their disproportionate vulnerability to poverty across their lifetime.¹⁴ Care responsibilities often restrict women to part-time or informal employment that doesn’t accrue short- or long-term social protection benefits. This limits women’s contributions to social security schemes and their accumulation of assets and wealth, making them more vulnerable to poverty in older age.¹⁵

Women and girls living in poverty are least likely to have access to equipment and technology that can reduce the time and physical intensity of UCDW tasks such as collecting water and firewood. They are also least likely to live near or be able to afford quality care services, such as healthcare and childcare, which can free up time for earning an income.



SDG 3: Ensure healthy lives and promote wellbeing for all at all ages

Many African households depend heavily on women as health caregivers, and where health sector funding is inadequate and the quality of care is low, it is women who fill the gaps. Poor-quality health facilities and costly services often discourage patients from seeking professional care, especially in rural areas; instead, many opt for free healthcare provided at home, by women.¹⁶ In Uganda, it is estimated that up to 90% of care for HIV- and AIDS-related illness is provided in the home,¹⁷ with women and girls the primary caregivers.¹⁸ During almost all disease outbreaks, women voluntarily provide the majority of care to sick family members in their home – often at great personal risk and cost.¹⁹

The mental and physical demands of UCDW leave many women exhausted and depleted. In surveyed districts of Uganda and Zimbabwe, over a third of rural women reported injury or illness due to unpaid care, and over half of these women said the harm was long-lasting and resulted in lost days of work.²⁰ Further, without access to essential health and social services such as family planning, women cannot choose if and when to have children. This can increase women’s care load and exacerbate existing inequalities in caregiving.



SDG 5: Achieve gender equality and empower all women and girls

Women and girls’ disproportionate responsibility for UCDW underpins and reinforces every aspect of gender inequality. Heavy and unequal care and gendered social norms prevent women from engaging in political decision making and leadership roles or from taking part in collective action to promote their rights, including the right to sexual and reproductive health, decent and dignified work, and a life free from violence. While there are some notable exceptions, most African countries continue to lag behind the rest of the world in terms of women’s participation in public and political life.²¹

Oxfam’s research shows that there is a link between gender norms, expectations about care roles, and gender-based violence, with more than a third of male and female respondents in a study in Uganda stating that it is acceptable to beat a woman if she does not perform her care responsibilities well;²² while in Zimbabwe, more than a quarter of male and female respondents thought it was acceptable to mock or shame a man for doing UCDW tasks.²³ There is also some evidence that women and girls are at risk of sexual violence when they collect fuel and water.²⁴ Violent conflicts resulting in displacements and dispossession, common in Africa, often increase women and girls’ UCDW responsibilities.²⁵

SDG 6: Ensure availability and sustainable management of water and sanitation for all



Data from around the world shows that water-related time poverty translates into lost income for women and lost schooling for girls.²⁶ Fetching and carrying heavy loads of water (and firewood) also has negative effects on women’s physical and mental health, as outlined above under SDG 3.

Data from 25 countries in sub-Saharan Africa representing 48% of the region's population shows that only 55% of households are within 15 minutes of a water source and that, collectively, women spend at least 15 million hours each day fetching and carrying water (compared to six million hours for men and four million for children).²⁷ Research also shows that investment in rural water infrastructure can enhance women's participation in market-based activities and improve girls' schooling.²⁸ In Uganda and Zimbabwe, access to an improved water source is associated with a reduction in the time women spend on UCDW, and with girls spending more time sleeping in Uganda and studying in Zimbabwe.²⁹



SDG 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

Across high- and low-income economies alike, there is a negative relationship between the relative amount of time women spend on UCDW and economic participation, and opportunity gender gaps.³⁰ Research suggests that gender equality in the paid labour market may be one of the most important factors in reducing poverty in developing countries.³¹ Yet women's care responsibilities undermine their ability to find and stay in decent

paid work. According to the International Labour Organization (ILO), unpaid care work is the main barrier preventing women from getting into, remaining and progressing in the paid labour force.³² Women, in particular those on a lower income, may be unable to commit to a formal job at regular times because they are needed at home to look after others and do household tasks. They may therefore take up informal employment that offers more flexibility (e.g. in working hours and location), but is more insecure and precarious. Employment in the informal economy tends to offer fewer benefits than work in the formal waged economy in terms of pensions, parental leave and protection from health or weather-related disruptions – leaving carers even more exposed to risk. In Africa, 89% of women in the paid workforce are in informal employment.³³

Research also shows that increased public investment in care services and infrastructure in emerging economies can boost employment and contribute to economic growth and human development. Investing 2% of GDP in the health and care sector has the potential to generate increases in overall employment of over 3%, depending on the country.³⁴ Further, public investment in the health and care sector can lead to a greater number of the newly created jobs going to women than if the same level of investment were made in the construction sector.³⁵

TOP 5 REASONS

WHY PUBLIC SERVICES AND INFRASTRUCTURE CAN REDUCE HEAVY AND UNEQUAL UCDW FOR WOMEN AND GIRLS AND ACHIEVE INCLUSIVE SUSTAINABLE DEVELOPMENT

1. Investing in care-supporting public services and infrastructure supports the achievement of several SDGs and the realization of the AU's Agenda 2063.
2. Government investments in piped water, clean energy, roads and transport, and time- and labour-saving equipment are critical to reducing the time and intensity of UCDW tasks and freeing up women and girls' time.
3. Quality and affordable health facilities and services encourage patients, especially in rural areas, to seek professional care. Also, public investment in the health and care sector can lead to a greater number of newly created jobs for women.
4. Access to water and fuel sources that are close to communities can reduce the risk of sexual violence and abuse of women and girls.
5. Increased public investment in care services and infrastructure in emerging economies can boost employment and contribute to economic growth, while also contributing to enhancing human development.



Kitabe Terfe is part of Oxfam's WE-Care project in Oromia Region, Ethiopia. She says: 'I did not realize the difference between the hours men work and the hours women work. Now, with training and conversations, we know we can change.' Photo: Abbie Trayler-Smith/Oxfam

THE CASE FOR INVESTING IN CARE: EVIDENCE AND GOOD PRACTICE IN AFRICA

This section presents the positive steps taken by governments in Ethiopia, Kenya, Tanzania, Uganda and Zimbabwe to recognize, reduce and redistribute UCDW and to promote the representation of carers in decision making – steps which other governments can learn from and adapt. It also provides the best available evidence on how such investments have helped to free up women and girls' time, enabling them to take part in education and in social, economic and political life.

Incorporating unpaid care commitments into relevant laws, policies, strategies and programmes:

In Kenya, the Constitution (2010) explicitly states that it is the shared responsibility of both parents to care for their children, saying that every child has the right to 'parental care and protection, which includes equal responsibility of the mother and

father to provide for the child, whether they are married to each other or not'.³⁶ In Ethiopia and Kenya, the governments are planning a national time-use survey in 2020, the results of which will be used to inform the planning, budgeting and implementation of public services that can reduce and redistribute heavy and unequal UCDW. In Uganda, discussions are ongoing about prioritizing UCDW in the National Development Plan for 2020/21–2025/26.

Increasing women and girls' access to affordable and safe water sources: In Tanzania, data from a nationally representative time-use survey demonstrates how women could save 1,128 million hours a year collectively with improvements in water infrastructure.³⁷ In Uganda, in 2006 the Ministry of Water and Environment updated its policy to expand

water services to poor communities in urban as well as rural areas. This included an affordable connections policy, a pro-poor tariff policy and a project subsidizing water supply in poor settlements of Kampala. These measures increased services for poor communities and decreased the time women and girls spent queuing for and carrying water.³⁸ Oxfam's research in Zimbabwe and Kenya showed that providing access to an improved water source could reduce women's average UCDW by four hours a day compared to women without improved water sources – the equivalent of two months' full-time work.³⁹

Increasing women and girls' access to electricity and time- and labour-saving equipment: In Ethiopia, Uganda and Zimbabwe, Oxfam's Household Care Survey findings showed that women in households with electricity spent fewer hours on all care activities than women in households without.⁴⁰ In Kenya, research in Kitui County found that in households with improved cookstoves, 43% of women used the time they saved collecting firewood on agriculture and other economically productive work.⁴¹ Other studies in Kenya have shown decreases in acute respiratory infections as a result of using improved cookstoves, and even more health benefits when clean fuels were used.⁴²

Expanding and improving quality of early childhood education and care services: In Uganda, the National Integrated Early Childhood Development Policy Action Plan (2016-2021) provides direction and guidance to all sectors for quality, inclusive, coordinated and well-funded early childhood development services and programmes. The national Parliament set up an onsite breastfeeding centre, enabling female parliamentarians to breastfeed while at work. In Kenya, results from a randomized control trial study in an informal settlement in Nairobi found that women who were offered vouchers for subsidized early childcare were on average 8.5 percentage points more likely to be employed than those who were not given vouchers.⁴³

Increasing access to affordable and high-quality health services: In Zimbabwe, the government has brought the HIV and AIDS epidemic under control with a combination of prevention strategies, decentralized health services, community services and the elimination of user fees. This represents a move away from the previous 'home-based care' model and emphasis on families' (especially women's) role in caring for chronically ill family or

community members.⁴⁴ In Kenya, Oxfam's research in informal settlements in Nairobi showed that women with access to a healthcare facility spent up to 5 hours less on UCDW per day than women without similar access.⁴⁵

Adopting social protection measures that support women and men with substantial UCDW responsibilities:

In Uganda, families with elderly people that received the Social Assistance Grants for Empowerment reported that as a result of this support, their elderly family members no longer 'feel like a burden'.⁴⁶

Challenging gender norms around UCDW through programmes, policies and interventions: In Zimbabwe, an evaluation of Oxfam's WE-Care project found that men involved in social norms activities spent 20 minutes more per day on UCDW than men who were not involved.⁴⁷ In Uganda, SASA!, a community intervention to prevent violence against women by changing harmful social norms, helped participants to explore the benefits of mutually supportive gender roles. As a result, some men became more open to participating in UCDW to support their wives and to encourage 'the development of their families'.⁴⁸

Increasing space for women and girls to participate effectively in care-supporting government policies, programmes and interventions: In Uganda, in 2003 a new Water Liaison Division was created, with special effort made to recruit staff with gender-mainstreaming competencies. This led to an increase in women's representation in management, and greater emphasis on gender impact assessment studies.

BARRIERS TO FINANCING INVESTMENTS IN CARE

Absence of care (and carers) from government budgets: Budgets play an important role in recognizing, reducing and redistributing UCDW. However, budgets that do not consider UCDW are not gender-responsive and exacerbate gender inequalities inside and outside the home, especially in relation to the distribution of UCDW. The contribution of UCDW to the macroeconomy is often missing from budget planning and modelling; this is due to bias and lack of reliable, sex-disaggregated data on care work, particularly from household and labour surveys. This situation is compounded by women's absence from fiscal planning and decision making.

Debt servicing: Across Africa, governments' ability to finance investments to meet their commitments on the SDGs is being undermined by high debt servicing.⁴⁹ Since 2004, the continent has seen a 60% increase in average debt payments, due to a boom in external lending.⁵⁰ Countries paying a high proportion of their revenues to debt servicing have a significantly reduced budget for public services. This has the greatest impact on women with UCDW responsibilities, who rely on these services the most. Thus, the costs of debt servicing are disproportionately borne by women, while borrowed funds are rarely spent in ways that prioritize women's needs and rights.⁵¹

Illicit financial flows: Africa loses more than an estimated \$50bn each year due to illicit financial flows, mostly through tax avoidance and evasion by multinational corporations.⁵² It is estimated that Tanzania, Kenya and Uganda are collectively losing up to \$2.5bn per year because of tax incentives.⁵³ These lost revenues could – and should – be used to fund the essential public services and infrastructure that are critical for reducing women's time poverty associated with UCDW and achieving the SDGs.



SUCCESSFULLY ADVOCATING FOR INCREASED BUDGET FOR CARE IN NAIROBI, KENYA

In the informal settlements of Nairobi, basic public services such as clean water, household electricity, childcare centres and healthcare facilities are often limited and of low quality. Between 2015 and 2018, Oxfam and its partner Youth Alive! Kenya (YAK) worked with women small-scale traders and domestic workers living in the informal settlements to influence county budgeting processes. Oxfam and YAK also worked with Nairobi City County officials in the education, water and sanitation, economic planning and trade sectors on gender-responsive budgeting and the need to include women's priorities in the county budget. Over 800 women engaged with the county government through public participation processes, significantly influencing decision making and budget allocations for care-supporting services and infrastructure. As a result, the county government of Nairobi increased the budget allocation to early childhood development centres by 30% and to water, sanitation and hygiene services by 11% in the County Annual Development Plan 2019/2020. The county government also enacted the Nairobi County Public Participation Bill in 2015 and the Child Facilities Bill in 2017 to increase the efficiency of services.

Above: Agnes Adhiambo washes clothes in Mashimoni village, Mathare, Nairobi, Kenya. Photo: Katie G. Nelson/Oxfam

CONCLUSION

Unpaid care work makes a significant, yet unrecognized, contribution to human and economic development. Women and girls living in poverty and those who are marginalized, with limited access to public services, social protection and technology, shoulder the heaviest responsibility for UCDW. This unequal and often arduous care workload robs them of their time and limits their access to opportunities outside of the home, hindering progress towards key development milestones set by the world and by the AU itself.

Findings from numerous studies in Africa show that heavy and unequal UCDW is stifling progress across a range of SDGs and the AU's Agenda 2063. With climate change increasingly affecting the availability of water, energy and food, the situation will only worsen for women and girls (who are largely responsible for the provision of these resources), unless immediate and appropriate action is taken to recognize, reduce and redistribute UCDW.

The SDGs and many international institutions confirm that investment in infrastructure, services and policies for providing care are vital to unlock sustainable development in Africa. As this brief has highlighted, there is much evidence that the provision of public services and infrastructure – such as nearby water sources, quality healthcare and childcare services, and public transport – has a positive effect on reducing women's care workloads and improves outcomes under several SDGs.

Investing in care will reignite progress on gender equality. However, any investments in services and infrastructure need to be accompanied by proactive regulatory, fiscal and educational measures to challenge and transform the gendered nature of care work. As proposed by SDG 5.4, governments and employers have an important role to play in shifting social norms that assign care work to women and undermine men's participation in care. Addressing UCDW also requires inclusive and participatory processes that involve not only policy makers, researchers and economists, but also women with caregiving responsibilities.



Ulita Mutambo's husband Muchineripi Sibanda helps her hang up the washing outside their home in Ture village, Zvishavane District, Zimbabwe. The family received a wheelbarrow from the WE-Care project to help with water collection. Photo: Aurelie Marrier d'Unienville/Oxfam

RECOMMENDATIONS

For Africa to realize its ambitions of inclusive growth and development, it is vital for regional institutions, national and local governments to take leadership in recognizing, redistributing and reducing UCDW through policy commitments and financial investments in public services and infrastructure. Achieving both Agenda 2030 and Agenda 2063 targets means ensuring that women enjoy their full rights as equal partners in the economy and society.

It is therefore essential to:

1. Recognize care work as 'work' and a driver of inequality: The AU and its member states must recognize that UCDW is work that makes a critical contribution to social wellbeing and economic development. They must also recognize that it is a major driver of inequality and a barrier to women's empowerment and the realization of women's rights when it is heavy, time-consuming and unequally shared between women and men, households and the state.

2. Prioritize UCDW in budgets, policies and development programmes: The AU, member states and international financial institutions must translate existing commitments and targets to reduce and redistribute UCDW into relevant government policies, strategies and assistance programmes. Relevant policies and strategies include those relating to national economic growth, poverty reduction, education and agricultural development; and relevant assistance programmes include social protection schemes.

3. Collect national time-use data on UCDW to inform policy and budgets: The AU and member states must uphold their national and regional commitments to the SDGs, specifically the collecting, reporting and monitoring of UCDW time-use data under SDG Target 5.4 and Indicator 5.4.1. This data should be used to inform the development of public policies and budgets that support inclusive sustainable development.

4. Invest substantially in affordable, accessible and quality care-supporting infrastructure and public services such as clean water, renewable energy, childcare, healthcare and public transport to reduce heavy and unequal UCDW and redistribute it more equally between women and men, and households and the state. Specifically, government commitments should include sustained, guaranteed investment in the types of care-supporting infrastructure and services prioritized by carers themselves, and designed and managed with their input.

5. Accelerate revenue raising to invest in care-supporting infrastructure and public services: Member states must increase funding for infrastructure and care services by taxing wealth and high incomes, cracking down on the loopholes and inadequate global tax rules that allow rich corporations and individuals to escape their tax responsibilities, and revising tax treaties and other harmful policies which deplete domestic resources. Member states must also reallocate funding to where it will have most impact for women with heavy UCDW responsibilities.

6. Shift negative social norms that perpetuate unequal care responsibilities: Governments, businesses, media and civil society must take an active approach in shifting negative social norms and gender roles. This includes funding and piloting interventions that aim to shift these norms and challenge the idea that UCDW is a private (as opposed to public) issue, and using public sector communication channels and education systems to encourage men and boys to do an equal share of UCDW within their households.

7. Increase the representation of carers in decision making: The AU and member states must ensure that carers are involved in shaping the policies that affect their daily lives, and that public policies reflect the needs and interests of carers. This includes providing long-term core funding for women's rights organizations and increased space for women and girls, or the organizations representing them, to participate effectively in government budget-setting processes, policies, programmes and interventions.

THE WOMEN'S ECONOMIC EMPOWERMENT AND CARE (WE-CARE) PROGRAMME

Oxfam's Women's Economic Empowerment and Care (WE-Care) initiative is a multi-country programme which aims to address heavy and unequal unpaid care and domestic work (UCDW) as a key factor in achieving gender equality and economic development. WE-Care is implemented in several countries across South-East Asia and Africa, including Ethiopia, Uganda, Tanzania, Zimbabwe, the

Philippines and the Oxfam Pan-African Programme, in partnership with national women's rights organizations, civil society and the private sector.

More information on WE-Care is available at: <https://policy-practice.oxfam.org.uk/our-work/gender-justice/womens-economic-empowerment/we-care>



Paulina Sibanda and her son process dried peanuts outside their home in Zvishavane District, Zimbabwe. Paulina is involved with the WE-Care project and received a fuel-efficient wood stove and a solar panel. Photo: Aurelie Marrier d'Unienville/Oxfam

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Front cover:

Senia Tanyanyiwa and her husband Zimbarashe outside their home in the Gutu District of Zimbabwe. Senia collects water up to six times a day from a spring well more than 5km away.

Photo: Aurelie Marrier d'Unienville/Oxfam

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