MEASURING AND UNDERSTANDING UNPAID CARE AND DOMESTIC WORK: HOUSEHOLD CARE SURVEY

Part A: Guidance for planning, implementing and using the Household Care Survey

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Abbreviations

HCS  Household Care Survey
ILO  International Labour Organization
IMAGES  International Men and Gender Equality Survey
RCA  Rapid Care Analysis
SDG  Sustainable Development Goal
UCDW  Unpaid care and domestic work
UK  United Kingdom
UN  United Nations
UNICEF  United Nations Children’s Fund
WE-Care  Women’s Economic Empowerment and Care
WEE  Women’s Economic Empowerment
Introduction

This toolkit provides guidance to those who are interested in Oxfam’s Household Care Survey (HCS) methodology, which was developed by Oxfam as part of the WE-Care initiative (see box). The toolkit is designed to be used by development practitioners, policy makers, employers, academics and researchers. The HCS gathers data on factors associated with higher and lower hours of unpaid care tasks to support efforts to transform the provision of unpaid care and domestic work (UCDW).

The HCS is a quantitative survey tool that aims to generate evidence on how women, men and children spend their time, how care is provided, by whom, and which are the main factors that affect people’s responsibilities for UCDW. It can be used to understand how the division of labour in care work is shaped by household characteristics, decision-making processes, social norms, access to time- and labour-saving equipment, public services and government schemes. The HCS has been used, for example, as a baseline for context-specific evidence on UCDW to evaluate changes in how care is provided due to projects, or to develop new policies.

Care and domestic work underpins all our lives, and recognizing it is essential for any development initiative. The HCS methodology can be integrated into different projects with different objectives. While the methodology was first developed to be used in rural communities in low-income countries, it can be adjusted to other contexts.

The WE-Care initiative

Since 2013, Oxfam’s Women’s Economic Empowerment and Care (WE-Care) initiative has worked on transforming care provision and on producing new methodologies and evidence about care work. The WE-Care initiative focuses on shifting the heavy and unequal responsibility for unpaid care and domestic work away from women and girls, towards a model where care and domestic work is recognized, shared and valued by all.

As of 2020, it funds programmes in six countries across South-East Asia and Africa, in partnership with national women’s rights organizations, men’s groups, youth groups, civil society and the private sector. WE-Care is supported by Unilever and its laundry brand Surf, the William and Flora Hewlett Foundation and other donors. WE-Care tools and methodologies are used in over 25 countries’ development and humanitarian programmes.

This HCS Toolkit: Part A provides guidance for planning, collecting, analysing and using HCS data. It is structured as follows:

Section 1: Why a Household Care Survey? introduces the HCS and concepts in care. It explains what the HCS is and what it is not, and how it can support various programme, research and policy objectives.

Section 2: Planning for a Household Care Survey outlines the different steps involved in preparing a HCS – defining objectives and adjusting the questionnaire, developing a budget plan, choosing a team, sampling, translation and training enumerators.

Section 3: Running a Household Care Survey discusses how to run a HCS, focusing on the role of supervisors and enumerators and providing troubleshooting advice.

Section 4: Analysing Household Care Survey data provides guidance on data analysis, including data entry, cleaning, variable creation, descriptive statistics and regression analysis.

Section 5: Using Household Care Survey data discusses ways of reporting on the findings. It also explores how to inform different audiences about the research findings and how to use HCS data for advocacy and programming.
This HCS Toolkit: Part A is to be used together with the HCS Toolkit: Part B which introduces the individual sections of the HCS questionnaire, explains what the questions are based on and why they are asked, how to adjust them and what to look out for when asking them.

In WE-Care research, the HCS was usually combined with a qualitative research component called the Rapid Care Analysis.²

The HCS methodology is a living tool which is continuously assessed and improved. We would very much appreciate feedback on the HCS and this toolkit. Please get in touch.
Section 1: Why a Household Care Survey?

Why focus on care? ● ● ●

Unpaid care and domestic work (UCDW)† includes all non-market, unpaid activities carried out in households – including both direct care of persons, such as looking after children or elderly people, and indirect care, such as cooking, cleaning or fetching water. Providing and receiving quality and adequate care is critical for human wellbeing and the functioning of our societies and economy. Yet UCDW remains largely absent from government policies and official statistics.

The gender divide in unpaid care work

• Globally, for every 100 men aged 25-34 who live in extremely poor households, there are 122 women living in extremely poor households. The difference is largely due to women’s childcare responsibilities.
• Globally, 42% of women of working age, compared with 6% of men, are outside the paid labour force because of unpaid care responsibilities.
• While men, particularly at the top of the income distribution, enjoy a wage premium when they have children, women commonly incur a ‘motherhood wage penalty’ as a result of their caregiving responsibilities.
• Choosing or being obligated to prioritize unpaid care work or taking part-time and informal kinds of employment to have the flexibility to fulfil care responsibilities, means women are less able to contribute towards social protection or to accumulate wealth, making them poorer and more vulnerable in old age.
• Girls who undertake a large amount of unpaid care work have lower rates of schooling than other girls.

(Source: Oxfam’s Time to Care report³)

Public sector and employer investments in the services and equipment that facilitate UCDW have a widespread, long-term, positive impact on wellbeing and social and economic development. Although care is a ‘public good’, it is considered almost universally to be women’s responsibility; in many countries, minority ethnic women, young women or marginalized groups provide the majority of care work. Heavy and unequal responsibility for UCDW, without adequate support, is linked to carers’ time and income poverty and exclusion from social, political and economic life. Women’s heavy and unequal responsibility for UCDW perpetuates gendered and economic inequalities. Thus, promoting new systems and patterns of providing UCDW is a means of addressing gender, racial, ethnic and economic inequality and of promoting women’s economic, political and social empowerment.

Reducing and redistributing women’s heavy and unequal UCDW is fundamental to reducing women’s time poverty and increasing women’s choice in how they spend their time – be that spending time on paid work, education, political life, or leisure and self-care.

Feminist economics and gender equality are fundamental to a human economy, and a core part of this new, fairer economy is to fully address the role of unpaid and underpaid care work. Only by fundamentally changing the way this work is done and how it is valued can we build a more equal world.

The Sustainable Development Goals (SDGs) include a target and indicator on UCDW under goal 5:

Target 5.4: Recognize and value UCDW 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.

Indicator 5.4.1: Proportion of time spent on unpaid domestic and care work, by sex, age and location.

Addressing UCDW can also contribute to achieving other SDGs, such as goal 4 on education, goal 3 on health or goal 1 on poverty (see WE-Care policy brief on UCDW in Africa²). The WE-Care website⁶ also provides more information on the importance of addressing care.

†As defined by the OECD and used in the Sustainable Development Goals.
COVID-19 and care work

The COVID-19 pandemic has made efforts to address inequalities in unpaid care work even more pressing.

Research on care work during the pandemic conducted by Oxfam and partners shows that even though men’s care work increased in the crisis, women still do the bulk of this work. Women living in poverty, single mothers, essential workers and those belonging to minority racial and ethnic groups are being pushed furthest to the margins. Oxfam’s policy brief argues that care work must be at the heart of a feminist COVID-19 response. (Also see UN Women brief on care and COVID-19.

Key care concepts

In this section, we briefly explain some of the most common concepts and terminology used in discussions about care.

- **Unpaid care and domestic work** (also called household work, domestic labour, family work or reproductive work): UCDW refers to the provision of services for family and community members outside of the market, where concern for the wellbeing of the care recipients is likely to affect the quality of the service provided.

- **Paid care and domestic work**: While the HCS focuses on unpaid care and domestic work, there are important linkages between unpaid and paid care and domestic work, with women making up the majority of the paid care and domestic workforce. As with UCDW, paid care and domestic work is undervalued, under-invested in, and often considered unskilled. Many jobs in the paid care and domestic work sector are low-paid and precarious, with paid domestic workers among the most exploited workers in the world.

- **The ‘care economy’ and valuing care**: The concept of the care economy captures the idea that unpaid care requires time and labour to produce goods and services, much like other sectors of the economy. Assigning a price to UCDW can determine a monetary value for the care economy that can be compared to the value of the paid economy measured by the Gross Domestic Product (GDP). Our focus is not on putting a monetary value on UCDW but on highlighting the ‘currency’ of time, which is immensely important in women’s lives, and on valuing UCDW by recognizing that it is essential for sustaining life and society.

- **Care, gender and the lifecycle**: Women’s and men’s care responsibilities change significantly during their lifecycles – when they are children, when studying, when forming families and raising children, later in life and in older age. International time-use studies show that the gender gap in UCDW may be quite small for certain age groups in certain cultures. However, the gender gap usually becomes wider during the years of caring for small children. The cumulative gender differences in UCDW responsibilities over the lifecycle lead to significant gender inequality in outcomes in poverty, education, wellbeing, employment and political participation.

- **Context-specific definitions of UCDW**: In focus group discussions around the world, debates about the scope of ‘care activities’ show that in each context the definitions of UCDW differ. In some contexts, praying for someone is considered a care activity; this can also be the case for care of household pets and even marital sex. We recognize the existence of such differences, and facilitators have some flexibility to adapt care activity codes to local contexts. However, the global definition of UCDW is retained to maintain the comparability of HCS findings across different populations, communities and countries.

- **Simultaneous activities**: Caring for persons is often performed at the same time as other activities. For example, someone might be supervising cooking while gardening, or supervising children while washing clothes and attending to customers in a family shop. When we analyse care, it is important to record simultaneous activities accurately, because otherwise we can underestimate the amount of UCDW that is being done. ‘Engaging in simultaneous activities’ (using time more intensively by doing two or more things at the same time) often provides households with more unpaid work, at the cost of higher work intensity for those who provide it.

- **Supervision responsibilities**: ‘Supervision’ refers to the responsibility to ‘look after’ dependants for a period of time. Supervision may require only a few minutes of ‘work’ in any hour, or no activity or work at all, for example when a baby is sleeping. However, responsibility for supervision limits the carer’s choice of primary activity, restricts her/his mobility and can increase her/his isolation. It also creates uncertainty about plans and schedules and can lower productivity in work activities. Dependants can either be children or dependent adults
who are unable to fully care for themselves (e.g. because they are frail, disabled or ill). It is important to recognize supervision responsibilities in addition to simultaneous activities. Monitoring and measuring supervision shows the intensity of care responsibilities and limitations to mobility/choice of activity/productivity, and points to the need for childcare or dependent-adult care services, for example.

- **Care vs. leisure**: In many contexts, some types of care and domestic work are misunderstood as ‘leisure’, such as caring for children, supporting dependent adults or cooking. This misclassification is in part due to an assumption that people (most often women) who perform care tasks enjoy doing so, so such tasks therefore must not be ‘work’. This assumption overlooks both the emotional and physical labour involved in doing UCDW as well as the gendered socialization of women’s role in society. It also overlooks the fact that many people enjoy the paid labour they do, yet we still consider it work. A better definition of work is ‘an activity that you could, in principle, pay someone else to do for you’. Likewise, a distinction should be made between ‘cooking for a wedding or religious event’ – which is housework/care work – and attending the event, which is probably ‘leisure’. Similarly, moral support and listening are mostly ‘one-way’ care activities, while socializing, which is ‘two-way’, is closer to recreation and entertainment.

- **Care vs. food production**: Producing food or other products (e.g. working in the fields or gardens) is classified as ‘unpaid farm work’ but not as ‘UCDW’. What is considered as care (or indirect care) is the preparation of food – i.e. processing and cooking, which are services rather than products.

- **The four ‘R’ framework**: First developed in 2008 as three ‘Rs’ – ‘Recognition, Reduction and Redistribution’ – by the feminist economist Diane Elson, and later expanded by CSOs including Oxfam to include a fourth ‘R’ of ‘Representation’, this widely used framework provides a guide for policy and norms change to address heavy and unequal UCDW and promote gender equality (see box below). More recently, the ILO (2018) added a fifth ‘R’ of ‘Reward’, which is most relevant for the paid care sector.

- **Care diamond**: The ‘care diamond’ developed by Razavi (2007) has been used to emphasize that four sectors of society are responsible for and should share the services, resources and budgets to provide care for people: 1) the state, 2) the market and private sector, 3) civil society organizations and 4) households. The care diamond is often used together with the four R framework.
What is the HCS?

The HCS is a quantitative survey tool that aims to generate evidence on time use and the factors influencing it. It can be used to improve understanding of how households divide care work as well as different paid, unpaid and leisure activities, and how time-use patterns are shaped by household characteristics, decision-making processes, social norms, and access to time- and labour-saving equipment, public services and government schemes. The methodology has so far been used for four different purposes:

- **Programme design**: The HCS can be used for designing and adjusting programmes by identifying which care activities are more time-consuming and which factors are associated with heavy and unequal care work.
- **Advocacy**: The HCS can provide important insights for advocacy, as it generates evidence on the excessive hours and inequalities in care work and on how policies, services and infrastructure can help to address these inequalities and heavy workloads.
- **Monitoring, evaluation and measuring impact**: A full or shortened version of the HCS can be used to evaluate the (less visible) impacts on care work of a development project or government intervention (e.g. a piped water scheme or childcare centre) through a pre-post analysis or baseline, mid-line and end-line data collection.
- **Learning**: The HCS can help to improve learning around what works to address heavy and unequal care work. It can also advance knowledge on how to measure UCDW and related factors.

Where has the HCS been used?

- The 2015 HCS explored patterns of care in Colombia, Ethiopia, the Philippines, Malawi, Uganda and Zimbabwe, which helped to develop WE-Care interventions.
- The 2016 HCS interviewed households in the same communities, with an in-depth investigation of social norms, and served as an evaluation for WE-Care interventions.
- The 2017 HCS explored care work in new districts in the Philippines, Uganda and Zimbabwe, with a special interest in public infrastructure, services, and time- and labour-saving equipment.
- A HCS was conducted in five urban settlements in Kenya in 2019 as part of a project which supports the economic empowerment of poor and vulnerable women domestic workers and small-scale traders.
- HCS data was collected in India in 2018.
- The 2020 HCS evaluation in Zimbabwe and the Philippines examined the impact of WE-Care project activities.

The HCS was developed as part of the WE-Care initiative. WE-Care methodologies and policies have so far been used in over 25 countries’ development and humanitarian programmes. Between 2013 and 2019, a full version of the HCS has been implemented in seven countries (Uganda, Ethiopia, Zimbabwe, Kenya, India, the Philippines and Colombia). Five countries have used some components of the survey (Malawi, Pakistan, Cambodia, Vietnam and Indonesia).

The HCS builds on the thinking of influential feminist economists, such as Nancy Folbre, Valeria Esquivel, Shahra Razavi, Maria Floro and Naila Kabeer. It contributes to the field of Women’s Economic Empowerment (WEE) and women’s economic justice as it provides consistent methodological approaches for generating data on UCDW. Some distinctive points of the HCS that distinguish it from conventional time-use surveys are:

- It focuses on UCDW, which is often underreported in standard time-use measures as UCDW may be aggregated or conflated with other time uses.
- It measures care activities that are done simultaneously to paid work or non-work (called ‘secondary care activities’) and responsibility for supervision of dependants during the day (called ‘supervision’). This is very important, as total care hours increase significantly when secondary and supervision activities are measured and documented.
- It includes children’s time use, which is often not considered in time-use research and debates on UCDW.
- It collects detailed data on social norms to shed light on the relationship between norms and UCDW divisions.
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• It collects data on access to (use of) public services and household equipment to enable evaluation of the impact of these factors on time use – paid work and unpaid care and non-work time.
• It includes information on different household, personal, community and policy level factors that can shape the way in which unpaid care is distributed between women, men and children.

See Measuring Unpaid Care Work in Household Surveys for more detail on the HCS’ innovative time-use measurement.

The HCS can provide the following outputs:
• Average hours that women and men of different ages (and boys and girls) spend on different activities, including UCDW.
• Increased understanding of the underlying social norms and attitudes that underpin perceptions of UCDW and expectations of men and women, and how these norms relate to time-use patterns.
• Understanding on how infrastructure, equipment and services (e.g. water, electricity, fuel-efficient stoves, childcare and healthcare facilities) relate to UCDW hours.
• Evidence on the influence of government interventions, schemes or programmes on the composition and distribution of UCDW.

What the HCS is not
The HCS is not a nationally representative time-use survey. In contrast to most national time-use surveys, the HCS is usually only locally representative and relies on a smaller sample size. It tends to rely on samples of a large enough size to give the best possible information. It does not aim to compete with but rather to add to national time-use surveys, through providing localized information on the correlations between UCDW and public services, time- and labour-saving equipment, social norms and more. It asks more detailed questions on UCDW – on simultaneous, multi-tasking activities, social norms and care-related equipment – that are often not accounted for in national time-use surveys. In this way, the HCS has the potential to help improve national time-use surveys, which are evolving.
What is a time-use survey?

Research on time use emerged in Europe and the United States in the second half of the 20th century. The EUROSTAT time-use project started in 1996 and has made efforts to harmonize European time-use measurement. Since the Beijing Platform of Action in 1995, time-use surveys have also been increasingly conducted in developing countries. The UN International Classification of Activities for Time-Use Statistics (ICATUS) helps to harmonize national time-use measurements. Many countries have conducted large-scale nationally representative time-use surveys, collecting data on time use and household and personal characteristics. Some countries conduct time-use studies every five to ten years.

The HCS is not a standard household survey. Like other household surveys, the HCS is administered at the household level and includes a household module (e.g. a household roster) asked of a woman respondent, as well as individual modules for different household members (NB most women respondents have been middle-aged, living with a partner and children, but we have also interviewed older women or young women without children). But compared to most household surveys, the HCS provides a less comprehensive overview of household characteristics (e.g. it contains fewer detailed questions on dwelling and assets); the HCS also interviews children as well as adults (for more information on research participants, see Define sample and mobilize respondents).

The HCS is not a ‘quick’ tool. The questionnaire for women usually takes about an hour to complete, and the questionnaires for children and men about 30 minutes. In our experience, it took up to a year to plan, collect and analyse HCS data. If respondents in the research area have already taken part in many survey exercises (i.e. if they are likely to have ‘survey fatigue’) or if you need more immediate results, other methods may be more suitable, such as the Rapid Care Analysis (RCA).

The HCS is not a qualitative tool. Even though it uses vignettes and asks some ‘why’ questions, the HCS is by design a quantitative tool (most questions are closed-ended and the data will be delivered in a coded form). As such, the HCS is unable to capture some of the qualitative, more nuanced or unforeseen aspects that come from asking open-ended questions and recording people’s words. For rigorous, mixed-methods evidence on UCDW, we recommend using the HCS in conjunction with the qualitative research tool, the RCA (see box below). If you are interested in social norms, you may also find it useful to consult Oxfam’s qualitative social norms diagnostic tool.

The Rapid Care Analysis (RCA) and Household Care Survey (HCS)

The RCA is a rapid qualitative assessment tool to improve the design of a wider programme, business or organization’s policies through gathering evidence to promote the recognition of UCDW and the identification of practical interventions.

The RCA and HCS are designed to be used together. We usually recommend conducting an RCA before an HCS. The RCA can provide qualitative data that the HCS is unable to capture. It can also help with framing the HCS and adjusting the questionnaire.

For example, if RCA participants suggest that a particular item or intervention (e.g. fuel-efficient stove, washing device, radio programme, school activities) can shift patterns of UCDW or reduce the time or energy required for domestic tasks, questions on this item or intervention could be included in the HCS.

If the RCA reveals that a particular type of UCDW is especially problematic, the HCS can also include more questions on this activity (e.g. care of family members living with HIV/AIDS, cooking, childcare).
How will the HCS fit with our existing work?

Oxfam’s experience shows that care analysis is relevant for any programme and campaign, and can be a powerful tool to generate localized evidence on UCDW, time use and associated factors that are not captured in national time-use surveys or where data is outdated or unavailable. The HCS has been used in a variety of existing development programmes, including those on enterprise development, agriculture, human rights, women’s leadership, services for people living with HIV/AIDS, livelihoods and women’s economic empowerment. The survey can be adjusted for specific programmes and initiatives.

How to use the HCS to bring about change

Be an advocate for practical changes. Care and domestic work is not a new issue. For years, feminist economists and development practitioners across the globe have considered care and domestic work, either implicitly or explicitly – for example, planning activities ‘around’ ‘domestic work’ or ‘women’s family responsibilities’. But there remains limited evidence on how change in UCDW can happen; most research has focused on demonstrating ‘the problem’ rather than identifying pathways of change. The HCS provides evidence on UCDW workloads and associations with other factors, which is critical for evidence-based advocacy and policy change as well as for monitoring and understanding how change happens in a particular context.

Be positive. Oxfam defines UCDW as not a ‘women’s issue’ but a development and public policy issue. We do not consider UCDW as a burden but a societal good, and we understand that it benefits the whole of society. This is why the focus is not simply on reducing overall UCDW or on ‘freeing’ women of the ‘burden’ of care. Rather we acknowledge the importance of UCDW while aiming to reduce the drudgery of it and to distribute it more evenly, so that women have more time and choice to participate in paid decent work, education, political and community life, and leisure.

Be specific. Understanding how care responsibilities are experienced differently by different people can help us to design interventions. Capturing and analysing data across different groups and intersectional dimensions enables us to identify who is most vulnerable or has the heaviest caring responsibilities. This can help identify groups that governments/programmes may want to target, and to understand which factors make the biggest difference in reducing intersecting inequalities.
Small steps are a good start. ‘Quick wins’ from practical improvements in the equipment and services that facilitate UCDW build confidence, inspiration and commitment to keep going. Improvements in care policies and government investments in care services and infrastructure may take longer. Community-level adjustments to how care and domestic work is carried out can show that change is possible and advantageous. This creates buy-in on the issue, enabling more significant shifts in perceptions and attitudes towards care and domestic work.

A transformational agenda. In the medium and long term, a more ambitious agenda and change strategy will include: recognition of the social and economic value of UCDW; investments by institutions or companies to reduce and redistribute the responsibility for UCDW; changes in beliefs and social norms that view care work as ‘women’s work’; reduction and redistribution of the costs of UCDW; and importantly, the representation of carers in decision making at household and community/government levels. Unequal responsibility for UCDW is a fundamental barrier to women and girls benefitting from all initiatives that promote gender equality and poverty reduction.
Section 2: Planning for a Household Care Survey

This section aims to help managers, coordinators and facilitators to plan for an effective HCS by fully scoping, planning and preparing for the data collection, analysis and dissemination of results. For more information, also see Oxfam Guidelines on Planning Survey Research. The entire process of planning, collecting, analysing and using HCS data is informed by Oxfam’s feminist principles (see Smashing Spatial Patriarchy), which include:

- Overcoming gender biases and social inequalities.
- Recognizing and interrogating the central role of gendered inequalities, norms and unequal power relations.
- Using an intersectional and contextualized approach.
- Recognizing how research itself can be an act of power between researcher and participants.
- Treating women and gender diverse and socially excluded groups as central to the research and engaging them as agents of change.

The HCS should be gender-transformative, which means that it informs long-term practical changes in structural gender power relations and norms, roles and inequalities. It should lead to sustained change through action (see Oxfam guidelines, Integrating Gender in Research Planning). When discussing the different steps of the HCS, we refer back to these principles and provide guidance questions for gender-transformative research.

1. Define the research objective/s and hypotheses

It is important to be clear about how the HCS fits within the larger programme, policy advocacy, business development strategy or research project, and how it relates to other local or global initiatives. The steering committee (see Choose a team) or other groups contribute to understanding and defining the objectives. Consider the following questions:

1. What are our desired long-term outcomes that the HCS should contribute to?
   For example, to reduce care responsibilities for women and girls, to encourage men to take more active roles in caring, to encourage governments to design care policies, or to change perceptions of unpaid care work as ‘unskilled’ and of little value.

2. How can the HCS contribute to these outcomes?
   For example, by generating data about factors influencing the intensity or distribution of UCDW in a specific context, producing evidence for programme design or advocacy, or by being integrated in a project evaluation.

3. What will we use the findings for?
   For example, for programme design, institutional advocacy, media campaigns, employer policies, investment planning, labour planning, educational curricula, organizational learning or knowledge production.

4. Who will use the findings?
   For example, project managers, women’s rights organizations, youth groups, employers, educational institutions, government officials/policy makers or researchers.

5. What evidence will we need?
   For example, for influencing the design of a national time-use survey, information on care work as a secondary/simultaneous activity could help; for designing water-related interventions, data on water is critical; for media, schools or employers, information on gendered social norms and patterns of time use are important.

6. What do we expect the results to be?
   For example, women’s UCDW hours impact on their wellbeing and hours of paid work; public services reduce UCDW workloads; men want to be more involved in care activities than is publicly perceived.

7. What is the scope of the data collection and how does this influence what questions we can ask and answer?
   For example, is it aimed at a single project or community, or is it for a whole programme, industry or province? Does the scope provide enough statistical power to answer the research questions? (See Define sample and mobilize respondents.)
Are the research objectives gender-transformative?

- Do you consider how social norms, power relations and other structural factors underlying gender inequality affect your research topic, process and protagonists?
- Does your research analyse, recognize and seek to transform unequal power dynamics between men and women and/or other gender-diverse groups?
- Do the research questions explore the structural power relations that sustain gender inequalities in relation to the research topic? Do they address possible solutions and mechanisms for change with participants?

See Oxfam guidelines, Integrating Gender in Research Planning.24

Based on your research objectives, develop hypotheses or propositions that will guide the data collection and analysis. For example, if your objective is to increase access to time- and labour-saving equipment, a proposition could be that such equipment reduces UCDW for women and children [see sample propositions box below].

If you are using the HCS to measure the impact of a particular programme or government intervention, when developing the propositions it is important to consider the local economic context, particularly in relation to the supply and demand of paid labour. For example, if you are interested in whether decreased time spent on UCDW leads to an increase in participation in paid work, it is important to consider not only labour supply but also labour demand. If there is little demand for paid work (i.e. little availability of paid work), the employment effects of an intervention may be small, while supply-side effects (i.e. increased availability of women’s time) may be weak or take a long time to show up in the paid labour market.

It is also important to consider that labour-saving technology can sometimes lead to an increase in time devoted to a care task. For example, improved cooking technology often results in improved meals but leads to demand for more cooked meals. Therefore, there might not be a reduction in women’s time spent cooking – unless the intervention is coupled with a social norms intervention to encourage men to share the task [Oxfam’s 2020 HCS evaluation25 confirms that combining TLSE and social norms interventions has the greatest impact]. However, quality improvement is still an important factor that can be measured (see proposition 3 below).

Sample propositions

Proposition 1: Provision of quality public services and infrastructure decreases women’s time spent on UCDW, improves women’s participation in paid work activities and leisure, increases girls’ hours spent on schooling and leisure, and increases men’s participation in UCDW.

Proposition 2: Access to time- and labour-saving technology and paid care work services decreases women’s time spent on UCDW, improves women’s participation in paid work activities and leisure, increases girls’ hours spent on schooling and leisure, and increases men’s participation in UCDW.

Proposition 3: Access to time- and labour-saving technology changes the composition and quality of women’s UCDW activities so that more time is spent on direct care of persons, better quality care is provided and received, and less time is spent on heavy and time-consuming indirect care tasks.

Proposition 4: Changing social norms and gender stereotypes favours the redistribution of UCDW between females and males.

Proposition 5: A redistribution of UCDW between women and men is associated with improvements in the overall wellbeing of women and men and their families.

Proposition 6: Improvement in women’s household decision making is associated with a more equal distribution of care hours between women and men, and with household investments in time-saving technologies and paid care services.
Proposition 7: Recognition of UCDW is associated with a more equal distribution of care hours between women and men, and with investments in time-saving technologies and paid care services.

Proposition 8: Recognition of UCDW and redistribution of UCDW between women and men is associated with an improvement in the intergenerational redistribution of UCDW.

Proposition 9: Recognition of UCDW and more equal distribution of UCDW between women and men could lead to an increase in time spent studying and free time for young people, especially for girls.

Proposition 10: Men’s exposure to other men doing care work is associated with increases in men’s participation in UCDW.

Proposition 11: Awareness of public and employer policies that promote sharing between men and women favours a more equal gender distribution of UCDW.

2. Develop a budget plan

The budget for implementing a HCS will vary significantly depending on the context and the scope of the survey. The costs also depend on who will be responsible for the data collection and analysis. In most contexts where we collected HCS data, Oxfam staff worked together with local consultants, but in some contexts collecting the data in-house or outsourcing the whole process might be more cost-effective.

Whether or not to use mobile data collection is also an important consideration when developing a budget plan (see Table 1 below for an example cost comparison). In the first rounds of data collection we used paper questionnaires, but we soon moved to mobile data collection, which generated better quality data and reduced the time and resources needed for data entry and cleaning (see Prepare mobile data collection). As shown in Table 1, mobile data collection tends to be more expensive than collecting data with paper questionnaires, especially if devices need to be purchased. For more on the pros and cons of mobile versus paper questionnaire data collection, please see Oxfam’s Going Digital guidelines on using digital technology for data collection.

Table 1 Cost comparison of paper vs. mobile data collection

<table>
<thead>
<tr>
<th></th>
<th>Paper</th>
<th>Mobile</th>
<th>Cost difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Software</td>
<td>£0</td>
<td>£162*</td>
<td>+ £162</td>
</tr>
<tr>
<td>Printing</td>
<td>£200</td>
<td>£40 (20% budgeted for backup)</td>
<td>- £160</td>
</tr>
<tr>
<td>Data entry</td>
<td>£200</td>
<td>£40 (20% budgeted for backup)</td>
<td>- £1,328</td>
</tr>
<tr>
<td>Total (excluding hardware)</td>
<td>£1,475 (approx cost of four data entry clerks and one supervisor)</td>
<td>£147 (10% budgeted for backup)</td>
<td>- £1,326</td>
</tr>
<tr>
<td>Hardware</td>
<td>£0</td>
<td>Up to £3,000 (varies by country but calculated based on £300/unit for 10 devices)</td>
<td>+ £3,000</td>
</tr>
<tr>
<td>Total (including hardware)</td>
<td>£1,675</td>
<td>£3,349</td>
<td>+ £1,674</td>
</tr>
</tbody>
</table>

*Software cost: additional savings will be made when more than one Effectiveness Review runs in the same month

When working with a tight budget, be sure not to cut costs with the enumerators’ payment. Fair remuneration is not only important from an ethical perspective, but satisfied, skilful and well-trained enumerators are also key to collecting good quality data and ensuring a smooth data collection process. If enumerators are dissatisfied with the amount they are paid, this can cause disruptions and delays.

When developing a budget plan, go through each step of the data collection and analysis to make sure all costs are accounted for. The headings in this toolkit may help you to think about the different steps that need budgeting, such as adjusting the questionnaire, translating the questionnaire, preparing mobile data collection, informing gatekeepers, sampling, selecting and training enumerators, piloting the questionnaire, data collection, data analysis, report writing, validation workshop and data dissemination. It is also important to budget for (inevitable) disruptions and delays in the process due to one or more external factors, such as adverse weather, political tensions, security issues, transportation strikes or epidemics (see Troubleshooting).
The budget outlined below follows feminist principles by involving stakeholders – local communities, leaders, women’s rights groups, youth and advocacy groups – in the process of research design and in the validation and communication of research findings. Consider the following expenses, which should follow national pay scales with decent working conditions and fair remuneration. If you are not familiar with localized salaries and operational costs, you could contact the national office of an INGO or UN agency for more information.

### Human Resources
- Research/project manager who oversees the whole process
- Translator to translate questionnaire into the local language(s)
- Programmer to upload and programme survey in SurveyCTO or equivalent software
- Researcher to test and adjust programmed survey
- Team leader to train enumerators and supervise data collection
- Team leader’s assistants to help with training and supervision of data collection
- Researcher to lead training on mobile data collection (if team leader is unfamiliar with it)
- Enumerators
- Drivers to drive enumerators and supervisors to the sampled households
- Local leaders or other contacts to help with sampling/informing or finding households
- Data analyst for data cleaning, analysis and report writing
- Copy editor/designer for finalizing report

### Venue, food and transport
- Venue for enumerators’ training and piloting (at least three days)
- Food/drinks for enumerators and team leaders during training (and data collection)
- Accommodation for team leaders (and enumerators and drivers if required)
- Car hire and/or fuel for transportation to the field
- Security personnel (if required)
- Childcare provision for enumerators or other team members

### Design, validation workshops, and dissemination and advocacy strategies
- Venue, transportation or online webinar costs to convene steering committee
- Venue, transportation for validation workshops and knowledge-sharing by/with stakeholder groups
- Design/communications consultants for infographics, videos, blogs or presentations
- Staff time/costs, transportation for influencing meetings

### Other expenses
- Subscription to SurveyCTO or equivalent software
- Electronic devices (one per enumerator, plus some spares)
- Power banks
- Printing (e.g. guidance documents, paper copies of questionnaires, activity cards)
- Laminating activity cards (e.g. for questions on perceptions of activities)
- Stationery for enumerators (e.g. folders, pens, pencils, bags for devices and materials)
- Phone credit allowance for enumerators (e.g. to call supervisors in emergency)
- Phone credit allowance for supervisors to call enumerators (and internet allowance for data upload if required)
- Unforeseen costs, e.g. related to disruptions and delays

### 3. Choose a team and involve stakeholders

Feminist research principles mean convening different stakeholders and research participants as key players in the design, implementation and analysis, rather than involving them only as recipients of data. Convening a steering committee of representatives of the organizations, communities, businesses and institutions involved can strengthen the ownership and understanding of the research, broaden the use of findings and help promote the actions inspired by new knowledge. A particularly useful stakeholder to include in the planning, implementation and analysis phases is a representative from the national statistical agency. This helps to increase government buy-in and can also help ensure that the data is seen as valid.
In most contexts, permission from local authorities at different levels is also needed to obtain access authorization. Usually an information letter at regional or district level is sufficient, but sometimes national-level authorization may be required. It is important to allow enough time to present the research, introduce the teams and answer any questions that leaders may have. The research team may also want to propose holding a validation workshop to present draft findings to local leaders, and a final dissemination workshop or report launch [see Sharing and discussing the findings].

Is the community engagement gender-transformative?

Does the research strive for full and meaningful participation of different gender diverse and socially excluded groups as ‘change agents’ during the different stages of the research cycle, including defining the research agenda, analysis, validation workshops and use of the research results?

See Oxfam guidelines, Integrating Gender in Research Planning. 28

Local leaders can also help with sampling, finding and mobilizing households. When leaders of local focal points help to identify respondents or spend time sensitizing/mobilizing community members, their contribution needs to be compensated. This should be discussed and accounted for in budgeting.

Choosing a well-qualified research team is also crucial for collecting quality data. The HCS project manager supervises field and research teams. While the field team is generally responsible for data collection, the research team designs the questionnaire, analyses the data and writes the report.

<table>
<thead>
<tr>
<th>Team members</th>
<th>No.</th>
<th>Key responsibilities</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Field team</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Field team leader</td>
<td>1</td>
<td>• Coordinate piloting and data collection</td>
<td>• Good research skills and knowledge of field techniques as well as SurveyCTO [or equivalent] are recommended.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Conduct training</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Supervise enumerators</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Upload questionnaires and monitor data</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Provide feedback</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Troubleshooting and guidance</td>
<td></td>
</tr>
<tr>
<td>Assistants/ supervisors</td>
<td>1-2</td>
<td>• Support team leader with training and supervising enumerators</td>
<td>• Depending on the specific setting, a mix in terms of gender, age, ethnic, religious or language background may be advisable.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Observe enumerators during interviews and provide feedback</td>
<td></td>
</tr>
<tr>
<td>Enumerators</td>
<td>10-15</td>
<td>• Collect data and upload to server [if using data collection software]</td>
<td>• If it is more appropriate for women [and children] to be interviewed by female enumerators and the women’s questionnaire is longer than that for men, you may want to hire more female enumerators.</td>
</tr>
<tr>
<td>Drivers</td>
<td>3-4</td>
<td>• Drive enumerators, team leaders and assistants to and from the sampled households</td>
<td>• Drivers may not always be necessary, for example if households can be reached on foot or if enumerators can use their own means of transport (e.g. bikes, motorbikes).</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Avoid using cars with NGO logos or other branding, as this can limit access in some circumstances.</td>
</tr>
</tbody>
</table>
All team members listed above working with Oxfam need to adhere to the Oxfam Code of Conduct. For help with drafting Terms of Reference for the team members, please see Oxfam Guidance on Writing Terms of Reference for Research and Terms of Reference for Research Template. For a template of a personal data processing agreement, please see appendix 3 of Oxfam’s Going Digital guidelines on privacy and data security.

### 4. Set a timeline

In our experience, the whole process of preparing, conducting, analysing and reporting on HCS research usually lasted between 6-12 months, with 12 months being more common. How long it will take depends on many different factors, including the research context, sample size, experience of the research team and whether they have other commitments.

First, the lead organization will need to secure a budget, propose research locations, agree the top-level research strategy with major partners/stakeholders, and agree governance, oversight and/or decision-making processes. This foundational or preliminary phase may take one or two months. Once this is all in place, consider the following steps and estimated timeframe:

- Team selection/recruitment: about 1 week
- Preparing data collection, and adjusting and translating the questionnaire: 4-6 weeks
- Setting up and testing the questionnaire in SurveyCTO or equivalent software: 1-3 weeks
- Preparing an ethics and safeguarding plan and training manual for enumerators: 1-5 days (if safeguarding focal points and ethics resources are already in place; otherwise this will take far longer)
- Informing local leaders/authorities: about 1 week
- Sampling: 1-2 days
- Training, piloting and data collection: 2-3 weeks
- Cleaning and analysing data: 4-6 weeks
- Writing draft report: 3-5 weeks
- Finalizing report (including feedback, editing, formatting): 4-8 weeks
- Validation and dissemination workshops: 2-3 weeks
We recommend keeping timeline tables summarizing what activity will take place where, when and with whom (see Example timeline).

### When to conduct the HCS?

Putting some thought into when to collect the data is also important. You may want to think about the following:

- Are there any public events that could interfere with the data collection, such as election days, religious celebrations or bank holidays?
- What season would be best for collecting the data? Are there patterns of seasonal migration? Are there periods of the year when most people are unavailable because of agricultural work? Are some villages inaccessible during heavy rainfall?
- When are the school holidays?

We recommend collecting a similar amount of data on each day of the week (it is very important to include weekends) to avoid biasing the data and to account for differences in time-use patterns throughout the week.

When choosing the time of the day, keep in mind that men, women and children may be unavailable during working hours because of work or school. In this case, you may want to consider phone interviews, visits at the weekend, or interviews early in the morning or later in the day.

When conducting interviews early or late in the day, always make sure that enumerators’ safety is not compromised. For example, in Kenya, enumerators worked in pairs and were accompanied by local gatekeepers when collecting data early or late in the day.

### 5. Develop an analysis plan

Developing an analysis plan before the data collection can help you to adjust the questionnaire and will make the analysis easier. In some countries where we did not develop an analysis plan before the data collection, we experienced some challenges and ended up not using some of the collected data.

Ideally, some members of the steering committee or other stakeholders will be involved to gather information about their expectations of the analysis. A (non-technical) discussion can also help manage expectations about the scope and detail of results, given the available budget. The analysis plan should build on your objectives and propositions (see Define the research objective/s and hypotheses) and should be developed to answer your research and/or learning questions. It is useful to include a list of descriptive statistics that you want to produce, as well as an overview of the correlations you want to explore. For the correlations, you may want to create a table that lists the relationships you want to look at for each proposition. For example:

<table>
<thead>
<tr>
<th>Proposition</th>
<th>Dependent variables</th>
<th>Independent variables</th>
<th>Control variables</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proposition 1: Provision of public services and infrastructure decreases women’s time spent on UCDW, improves women’s participation in paid work activities and leisure, increases girls’ hours spent on schooling and leisure, and increases men’s participation in UCDW</td>
<td>• Women’s time spent on UCDW  • Women’s time spent on paid work activities  • Women’s time spent on leisure  • Girls’ time spent on leisure  • Girls’ time spent on schooling  • Men’s time spent on UCDW</td>
<td>• Access to/use of improved water source  • Access to/use of electricity  • Access to/use of childcare facilities  • Access to/use of healthcare facilities</td>
<td>• Age (women, men)  • Location (e.g. urban, rural)  • Education (women, men)  • Number of children aged under six</td>
</tr>
</tbody>
</table>
### Proposition 2
Access to time- and labour-saving technology and paid care work services decreases women’s time spent on UCDW, improves women’s participation in paid work activities and leisure, increases girls’ hours spent on schooling and leisure, and increases men’s participation in UCDW.

<table>
<thead>
<tr>
<th>Proposition</th>
<th>Dependent variables</th>
<th>Independent variables</th>
<th>Control variables</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women’s time spent on UCDW</td>
<td>Ownership of fuel-efficient stove</td>
<td>Age (women, men)</td>
<td></td>
</tr>
<tr>
<td>Women’s time spent on paid work activities</td>
<td>Water tap on compound</td>
<td>Location (e.g. urban, rural)</td>
<td></td>
</tr>
<tr>
<td>Women’s time spent on leisure</td>
<td>Ownership of equipment to fetch water (e.g. bicycle)</td>
<td>Education (women, men)</td>
<td></td>
</tr>
<tr>
<td>Girls’ time spent on leisure</td>
<td></td>
<td>Number of children aged under six</td>
<td></td>
</tr>
<tr>
<td>Girls’ time spent on schooling</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Men’s time spent on UCDW</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Adjust the questionnaire

The questionnaire includes the following sections:

1. Introduction and consent
2. Household and individual characteristics
3. Assets and income
4. Adults’ time use
5. Children’s time use
6. Perceptions of UCDW
7. Social norms and roles
8. Upbringing and UCDW
9. Sanctions and violence
10. Decision making
11. Wellbeing and time constraints
12. Time- and labour-saving equipment (products and services)
13. Infrastructure, external support and schemes
14. End of interview

For a holistic understanding of the division of UCDW and its determinants, we recommend including questions from each section. However, for each question that you include, it should be clear why it is asked and how it will be used in the analysis. In our experience, the women’s questionnaire usually took around one hour, the men’s questionnaire about 30-40 minutes, and the children’s questionnaire about 20-30 minutes.

You may want to focus on aspects of the questionnaire that are most relevant for your project or interest. Adjust and contextualize the questionnaire to incorporate your objectives and propositions, and to reflect your analysis plan. For example, if your objective is to understand the social norms underpinning UCDW and to develop social norms interventions, include relevant questions on social norms.

Make sure the questionnaire reflects the local context: care allocations, household compositions, infrastructure and social norms are all very much context-specific. It can be very helpful to look at national (or other) time-use surveys that have been conducted in your country. This can help you to identify locally relevant questions and codes, and can make the HCS comparable to national time-use survey data. You could make a list of locally relevant factors that might influence care work patterns and include questions on the most important factors in the questionnaire. Some HCS researchers felt that they did not adjust the questionnaire enough, which meant that locally relevant factors might have been ignored. For example, in some contexts the presence of a co-wife, domestic worker or live-in young relative can shape UCDW, while in other contexts bride price or dowry payments, ethnicity, religion or caste might be important. But to ensure consistency and allow cross-site comparison, we recommend asking the same questions, albeit with slightly different wording and slightly different options.
The HCS Toolkit: Part B provides detailed guidance on the survey tool and how to adjust it. For each section of the questionnaire it explains the core questions, what they are based on, what their purpose is, how to adjust them and what to look out for when asking them. We also provide an overview of additional questions that could be added.

7. Translate the questionnaire

It is very important that all enumerators use the wording exactly as it appears in the questionnaire in order to reduce biases in the data. For that reason, the questionnaire should be translated into the local language(s) that respondents speak. Ideally, if the budget allows, the translated versions will be back-translated by a different translator to test accuracy and clarity, and to reconcile any differences.

In our experience, some enumerators were not confident with reading the local language(s), as the language was mainly used orally and they had only learned how to read and write in English. Enumerators thus preferred using the English questionnaire and translating it into the local language(s) during the interview.

If possible, we discourage this approach because it can bias the data. However, if this approach is followed it is very important to spend a long time going through the questionnaire and translation with enumerators to make sure that they properly understand the questions and that they all translate them the same way.

We also recommend providing enumerators with copies of the translated questionnaire to help them with the on-the-spot translations, and insisting that enumerators use the translated questionnaire when reading out the consent forms, vignettes and some social norms questions where the wording is particularly important.

All of the questions, cover sheet and codes should be translated. SurveyCTO and other equivalent software usually allow the questionnaire to be entered in different languages and enable the user to switch between languages during the interview, as needed. If several languages are spoken in the research setting, we recommend entering translations for all relevant languages in the software and selecting the respondent’s preferred language for the interview.

A professional translator is likely to produce a good translation, but this may under some circumstances be more ‘academic’ than ‘locally relevant’. If this is the case, the research team or team leader might be able to produce the best translations for the given purpose. We found that team leaders/researchers generally did a good job of translating the questionnaire. We found it very useful to discuss the translation(s) during the training with the enumerators, and to adjust it/them based on enumerators’ comments and knowledge of local dialects and expressions. The team can usually flag any awkward or inaccurate translations through discussion.

8. Prepare mobile data collection

If you use mobile data collection, the questions and codes will need to be entered into your chosen software. We used SurveyCTO – you can email us for a template of the HCS to be imported into SurveyCTO. You need a licence to use this software, but similar free options are available. We recommend using software based on Open Data Kit (ODK) and paying attention to data security, user friendliness and availability of support. Also keep in mind the device requirements: some software may, for example, be incompatible with older devices’ operating systems.

When programming the survey, it is very important to think about ‘skips’ (e.g. only ask a question if the answer to a previous question was ‘yes’) and restrictions/relevance (e.g. do not ask whether old people are enrolled in a nursery). Putting thought into the survey design can help avoid many mistakes in data collection. Consider the following:

- Use codes rather than text boxes for location variables (villages, sub-county, parish). This saves enumerators’ time and makes data cleaning easier.
• It is important to think carefully about how to make sure household members can be matched later. If the same enumerator interviews all household members, programme the survey so that data from all household members is recorded in the same questionnaire form. This means that you do not have to match household numbers at the end (there were many cases where household numbers were recorded incorrectly). Otherwise, consider preloading household IDs or generating them on the spot. More information on how to do this can be found in Oxfam’s Going Digital guidelines on improving data quality. You could also ask enumerators to enter the household ID number twice (e.g. at the beginning and at the end).
• Do not ask for respondents’ names again in the household roster, unless this is done as part of data quality checks.
• If you are interviewing single/widowed respondents, make sure they are not asked questions about their partners.

The Going Digital guidelines provide detailed information on how to programme questionnaires in SurveyCTO to improve data quality, for example though consistency checks or randomization features.

It is very important to allow enough time to test the programmed version of the questionnaire on the devices to make sure that all the questions work well. The more people to test it, the better. Generally, we recommend assigning the role of desk-testing the survey to a particular person, though the more people to test it, the better. Go through each question and each answer code to make sure that the skips/restrictions etc. work well and all the right questions are asked. For example, select ‘widowed’ as marital status and go through the whole questionnaire to make sure only relevant questions are asked, or select ‘100’ for child’s age to see if the survey asks you to reconsider your answer. Thorough desk-testing can take more than a week (see Desk-testing template). If time and budget do not allow for such thorough desk-testing, we recommend asking all team members to test the survey and to encourage enumerators to test the survey during piloting.

Once the questionnaire is finalized, upload it to the devices that will be used for the mobile data collection. In some situations, we underestimated the amount of time needed to set up the devices, so we recommend starting the process well in advance. Oxfam’s Going Digital guidelines on data security include a device set-up checklist with detailed instructions, in appendix 2. Some important steps and considerations when setting up the devices include:

• Charge and encrypt devices
• Install SurveyCTO (or chosen software)
• Install parental control app (e.g. Kids Place) to make sure enumerators do not use the devices for other purposes
• Install Meraki app to remotely delete data (in case device gets lost)
• Turn off GPS
• Adjust the time-out setting or ‘sleep’ setting to 2 minutes
• Turn the device to silent mode

Detailed information on how to use mobile devices and design mobile surveys and more can be found in Oxfam’s Mobile Survey Toolkit.

**Mobile data collection vs. paper questionnaires**
In the first rounds of HCS data collection we used paper questionnaires, but we soon moved on to mobile phones or tablets. We found mobile data collection easier to use and more accurate. The survey can be programmed with skips and restrictions so that enumerators cannot enter illogical data (e.g. a mother being older than her child). Mobile data collection also means that the data does not need to be entered manually. This saves time and money and avoids potential data entry mistakes.
However, mobile data collection requires extra training, and using it might be difficult at first when enumerators and supervisors are not familiar with it.

<table>
<thead>
<tr>
<th>Advantages</th>
<th>Disadvantages</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Speed</td>
<td>• Securing devices</td>
</tr>
<tr>
<td>• Accuracy</td>
<td>• Charging</td>
</tr>
<tr>
<td>• No data entry needed</td>
<td>• Lack of confidence with a new process</td>
</tr>
<tr>
<td>• Multiple languages</td>
<td>• Programming survey takes time</td>
</tr>
<tr>
<td>• Quick top-line statistics</td>
<td>• Expense</td>
</tr>
<tr>
<td></td>
<td>• Respondents may be apprehensive (e.g. if they fear being recorded)</td>
</tr>
</tbody>
</table>
Oxfam’s Going Digital guidelines on using digital technology for data collection provide more information on the mobile data collection vs. paper questionnaire discussion; also see table: Cost comparison of paper vs. mobile data collection in the Develop a budget plan section above.

9. Define sample and mobilize respondents

The Oxfam guidelines on sampling list the following three steps of the sampling process:

1. Determine the population of interest: The population of interest depends on the research questions and objectives. Generally, the HCS has not been used so far to produce results that are nationally representative, but usually focuses on a particular community or geographic area of interest.

2. Identify the sampling frame: This means finding the most comprehensive list that can be obtained of the sampling units [usually households] in the population of interest. Census data or data from national statistics offices can provide lists of areas/neighbourhoods/villages and sometimes even households. In some circumstances, we found that local leaders kept a list of all households in their village.

3. Select the sample: Select who will be interviewed. We generally recommend using probability sampling or random sampling techniques where participants are selected randomly from the list of households. Simple random sampling means that households will be selected randomly from the list. Stratified random sampling means that households are grouped into categories and then randomly selected from each category.

What is sampling?

Sampling is the process of selecting a group of respondents from a larger population that is being studied. Information from a sample can be used to draw inferences about the whole population. The more representative a sample is, the more accurate the inferences based on it are likely to be. Some terms used in sampling include:

- **Sampling units**: The type of entity on which data is sought (individuals, households, schools, etc.).
- **Population (universe)**: The full set of units of analysis about which you want to infer conclusions.
- **Sampling frame**: A list of all units of analysis in a given population.
- **Census**: The collection of data from all units of analysis in a given population. Sampling is different from the procedure used in administering censuses, when the whole population is surveyed.
- **Sample**: A subset of units drawn from the sampling frame or sometimes directly from the population.

In all countries where the HCS has been implemented, the districts/provinces were purposefully selected, usually based on a specific programme or to be representative of the population. Villages and respondents were then selected randomly or according to evaluation criteria. In some countries, the ‘random walk’ method was used, where respondents were selected based on a random walk through the village. However, this method runs the risk of sampling only a certain type of respondent (e.g. those who are at home during the day). The most rigorous approach is to select participants randomly from household registers [see box below for an example of a rigorous sampling procedure in Uganda].

It is best to sample households before the start of data collection and to note their names on sampling lists. On the sampling lists, make sure to group neighbouring households to avoid unnecessary travel. It helps to keep several copies of the sampling list.

We recommend creating reserve lists that follow the same sampling procedure as the main sampling list. Reserve lists can have the same number of households or slightly fewer households than the main sampling lists. They will only be used if households from the main sampling lists are unavailable.

To estimate the required sample size, statistical procedures should be used. For example, in Zimbabwe, we used 24,000 community members as the population size, 95% as the confidence interval and a 5% margin of error to calculate the required sample size to be representative of the target population. In most countries, the sample size was between 200 and 500 households. However, in the case of small budgets even a small sample can provide some
interesting results. The smallest HCS sample we had was in Colombia, where only 69 households were interviewed. Even though the findings had to be used with caution, they shed light on inequality in patterns of care and potential determinants. We only conducted one interview per household.

To date, due to time and budget constraints, the focus of the HCS has generally been on couples of women and men (and in recent rounds, also their children). This can help us to understand household dynamics of time use and power. It is especially important for understanding how UCDW can be redistributed at the household level.

In several countries, following ethical guidelines and safeguarding measures (see Prepare ethics and safeguarding plan), the oldest girl and oldest boy (between 8 and 18 years old) living in the household were also interviewed. Due to budget constraints, we have not interviewed all household members. However, we recognize the importance of taking a lifecycle approach to UCDW and highly recommend doing interviews with other children and other adult men and women in the household. For example, grandparents and mothers-in-law are likely to provide a significant amount of UCDW and this can be important information to capture, depending on the research objectives and time and budget constraints.

Example sampling strategy: HCS 2014 in northern Uganda

- **Selecting sub-counties:** Three sub-counties were selected to take part in the women’s leadership project, and we selected three control sub-counties that were close by and similar.

- **Selecting parishes:** We used a list with parishes from the National Bureau of Statistics for all selected sub-counties. We ranked the socio-economic status of each parish to get more variety in the sample. As we could not find data, we asked local contacts to rank the areas for the following categories: road network, health facilities, water supply, electricity, NGO presence, secondary schools and poverty levels. We randomly selected one area with high and one with low socio-economic status for each sub-county.

- **Selecting villages:** We found a list of villages for each selected parish online and selected four villages per parish randomly by numbering the villages and generating random numbers in Excel.

- **Selecting households:** We trained local NGO staff to select households. They went to each selected village and asked the local leader for a handwritten register with all the household names. They selected households randomly by picking numbers from a bag. They only selected households that included husband and wife (in later rounds of HCS data collection, we also included single/widowed men and women). They also selected households for reserve lists in case the selected household wasn’t available.

- **Mobilizing respondents:** To try to make sure that the selected respondents would be available for the interview, we asked the local village leaders to inform and encourage people to be available during a specific time slot (morning or afternoon).

In some contexts, single/widowed men or women were also interviewed. This showed that marital status is an important factor determining care work hours. However, this approach meant that for questions on household dynamics, some of the data could not be used or be collected in the first place. Think about what factors you are most interested in. For example, if you are looking at the impact of equipment and infrastructure, interviewing single men and women might be fine, whereas if your focus is on decision making or social norms, interviewing couples is recommended.

If possible, inform sampled households about the upcoming interview to make sure that they will be available. We found it especially important to mobilize men in advance; across countries, one of the key challenges was finding men to interview. We found it very helpful to work with local leaders and other gatekeepers to identify and inform respondents.

For more information on sampling processes, see the Oxfam guidelines on sampling, the USAID guide to sampling for impact evaluations or an overview of sampling techniques compiled by Better Evaluation.
10. Prepare ethics and safeguarding plan

Protecting the physical, social and psychological wellbeing of all participants should always be a priority in research. The Oxfam guidance on *Undertaking Research with Ethics*\(^2\) summarizes the minimum ethical standards required in all research conducted or commissioned by Oxfam. It highlights the following three principles:

- **Respect**: The researcher must recognize the capacity and rights of all individuals to make their own choices and decisions, and their right to be treated with dignity.
- **Beneficence**: The researcher’s primary goal must be to improve the lives of participants and protect their physical, mental and social wellbeing.
- **Justice**: The researcher must ensure that the benefits for participants are at least as great as the risks.

### Is the ethics approach gender-transformative?

Will there be opportunities throughout the research cycle to be reflexive and aware of your own gender assumptions, biases and power as a researcher?

See Oxfam guidelines *Integrating Gender in Research Planning*\(^3\).

To ensure that these ethical principles are considered in the research, we recommend developing three documents:

1. **Ethics plan**

You may want to create an ethics plan listing how ethical standards can be addressed at the different stages of the research, as in the following example:

<table>
<thead>
<tr>
<th>Stage of research</th>
<th>Examples for ethical considerations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adjusting the questionnaire</td>
<td>e.g. Design questions (e.g. questions on domestic violence) to reduce risks for participants, use culturally appropriate language.</td>
</tr>
<tr>
<td>Sampling</td>
<td>e.g. Make sure that no participant faces more risks than benefits from participating in the survey.</td>
</tr>
<tr>
<td>Selecting the field team</td>
<td>e.g. Carry out background checks and interviews to make sure team members do not have any criminal convictions.</td>
</tr>
<tr>
<td>Training</td>
<td>e.g. Train enumerators on ethical standards and requirements, and share information on ethics and safeguarding with selected candidates.</td>
</tr>
<tr>
<td>Data collection</td>
<td>e.g. Obtain informed consent (see HCS: Part B); conduct research in places that are socially comfortable for the participant and where they are able to speak freely; supervise enumerators; provide information to participants in case they want to contact researchers; follow safeguarding plan.</td>
</tr>
<tr>
<td>Data analysis and report writing</td>
<td>e.g. Change names and remove any identifying information from knowledge products (e.g. reports, blogs, infographics).</td>
</tr>
</tbody>
</table>

2. **Ethics guidelines for enumerators**

We also recommend producing ethical guidelines for enumerators. These should explain ethical standards and principles and why they are important. As a minimum, the following three important points should be included:

**Consent**: Researchers must gain informed and voluntary consent from respondents. This means that the participants must have the relevant information about what the research is; understand the research, including the possible risks and benefits to themselves; be free to choose whether or not to participate, without inducement; give their consent, either written or verbal; and have the right to withdraw from the research at any time. Researchers must ensure that no participants are forced to take part, for example by their employer, their parents or village elders.

**Privacy and confidentiality**: Participants in should be told how Oxfam would like to use the research findings (e.g. as part of a campaign/research report). Their answers should remain confidential. This means that enumerators are not allowed to talk about the interview – not even to other enumerators.
Support services: We recommend compiling a list of contacts and services available in the area and printing out a copy for each enumerator. In our experience this was useful, as many respondents asked enumerators for help. It can also improve the benefits that participants get from the research.

We recommend discussing the Oxfam Responsible Program Data Policy with enumerators. This policy sets out the treatment of data, from planning to collection through to disposal.

3. Safeguarding plans
Lastly, we recommend preparing plans for misconduct/safeguarding issues and sharing them with enumerators. Safeguarding includes protection of children and vulnerable adults, and protection from sexual harassment, exploitation and abuse. Safeguarding plans outline what enumerators should do if they observe a child or adult being harmed by another person. This usually includes information on enumerators’ duty to report, reporting channels and referral protocols. The safeguarding procedures will be different in each context. Please ask your Safeguarding focal point for help.

Anyone working with or on behalf of the research team must NOT:

- Have sexual intercourse or engage in any form of sexual activity with a child
- Engage in games/make comments that are sexually provocative
- Engage in any form of inappropriate touching
- Change a child’s clothes if they can do it themselves
- Invite children to stay at their home
- Share a bedroom with a child
- Hit or otherwise physically assault a child
- Shame or humiliate a child
- Put a child at risk of harm
- Condone child behaviour that is illegal, unsafe, exploitative or abusive
- Allow children to use inappropriate language unchallenged

See Oxfam’s Safeguarding Children and Prevention of Sexual Exploitation and Abuse policies.

Research with children
Children need special protection due to their physical and mental development. There are many useful guidelines on research with children (e.g. UNICEF guidelines). Oxfam’s Child Safeguarding Policy outlines the following considerations when conducting research with children:

Obtain informed consent from a parent/guardian and from the participating child. Emphasize that children do not need to participate in the interview, even if their parents give consent (See HCS: Part B).

When interviewing children, it is important to treat them with respect and to try to decrease hierarchies.

Enumerators should never be alone with a child behind closed doors. There must always be a parent/guardian in sight, i.e. a parent/guardian doesn’t need to be sitting next to the child and listening to the interview, as this can influence the answers the child gives, but they must be able to see the child.

Enumerators should also protect children from potential harm caused by the research. For example, the research may uncover hidden feelings, such as feeling unjustly treated or being overworked.

Do not offer advice to a child’s parent on the basis of the research findings. For example, do not tell them off for assigning too much work to the child.

Duty of care: there are limits to confidentiality when there is a risk of harm, for example in the case of a child telling you they are abused, a parent telling you they are abusing their child, or your own observation of abuse. In such cases, enumerators should report the incident (see Safeguarding plans for more details).

We recommend printing the Oxfam Child Safeguarding Policy and passing it around during the training for enumerators to familiarize themselves with it.
11. Train enumerators

Training enumerators is extremely important. The more time you have for the training and piloting, the better. We recommend spending at least two days on training. The training has three purposes: 1) to improve the data collection procedures (e.g. teaching enumerators about the questions and mobile data collection); 2) to inform enumerators about ethics and safeguarding; and 3) to improve the questionnaire and translation. Even though the focus is usually on the first point, it is important to remember the other points too.

During the training, introduce enumerators to the research project and questionnaire. It is useful to allow enough time for questions and suggestions from enumerators, especially as some may be unfamiliar with our understanding of UCDW. This can also help to identify any issues or uncertainty about questions, codes, translation, skips or restrictions. Generally, it works best to have a Powerpoint presentation (please email us for some sample slides) or hand-outs, but to involve enumerators as much as possible. For example, we found that asking enumerators to read out the questions in the questionnaire worked well to keep them engaged, and it helped them to familiarize themselves with the questions. We also suggest giving special attention to the most difficult questions during the training. You may want to use the HCS Toolkit: Part B as a guide. Present the questions and explain what they are based on, why they are asked and what to look out for when asking them. Schedule in enough time to go through the questionnaire and allow for sufficient breaks as the process can take a long time (e.g. in Zimbabwe it took five hours).

Training enumerators on how to use the devices can also be time-consuming. However, it is very important that enumerators get a chance to practise using the devices during the training. Role-play activities can help. Ask enumerators to act out the roles of enumerator and respondent, and to interview each other using the devices.

Sample training schedule

Checklist for training and piloting

- Set up and charge the devices
- Prepare a draft translation of the questionnaire before the training
- Print questionnaires (English and translated), data collection guidelines for enumerators, device sign in/out sheet, symbol cards
- Laminate symbol cards (and cut out the cards on perceptions)
- Make little packs with beans for each enumerator (for children’s time-use questions)
- Book a room for the training
- Make sure projector works
- Organize flipchart and pens for training
- Organize lunch and drinks for training
- Select location for piloting, inform local leaders and respondents
- Organize transport to the field for training

Day 1
- Introductions (e.g. split up into pairs, introduce each other, present the other person to the group).
- Set rules for working together; discuss and sign code of conduct.
- Overview of the project activities, the purpose of the survey, understanding of UCDW.
- Introduce the questionnaire (explain each question, why it is asked and how to ask it).

Day 2
- How to use the devices.
- Practise data collection/role play (enumerators can pair up and interview each other).
- Who should be interviewed (how to use sampling lists, how to reach respondents, what to do if sampled household is unavailable).
- Guidelines on data collection (see Guidelines for enumerators).
- Think about what could go wrong.
- Ethical considerations and safeguarding (e.g. explain safeguarding plan, conduct group exercises with scenarios of ethical challenges, discuss data privacy and informed consent). Get in touch for example code of conduct, data privacy and informed consent.
The Oxfam guidelines on working with enumerators provide more information on recruiting, training and working with enumerators.

12. Prepare logistics for data collection

The more you prepare before the beginning of the data collection, the easier it will be in the field. Here are some points to think about before starting the fieldwork:

- Have transport, training venue, accommodation and food been organized?
- Is there Wi-Fi in the accommodation? (This is very important for uploading the data.)
- Do we have all the necessary materials? (See checklist below.)
- How will we print the questionnaires, visual aids and training material? (Printing in the field is often more expensive and time-consuming; we recommend printing some material before the fieldwork or bringing a printer.)
- Are the devices all set up properly? (See Prepare mobile data collection.)
- Have enumerators and drivers been informed about when and where to meet?
- Do supervisors have enough phone credit (and battery) to call enumerators?
- Do supervisors have the phone numbers of all enumerators (and vice versa)?

**Checklist: What to bring to the field**

- Devices (one per enumerator + spares)
- Power banks (if available)
- Chargers for devices
- Extension leads (if not enough sockets are available to charge all phones overnight)
- Plastic bags to protect devices (one for each enumerator + spares)
- Printed paper questionnaires (10 per enumerator + spares)
- Printed translated paper questionnaires (10 per enumerator + spares) (if English version not being used)
- Printed Guidelines for Enumerators, including phone numbers (one per enumerator + spares)
- Printed and laminated activity cards (adapted for the context; one per enumerator + spares) (see HCS Toolkit: Part B)
- Printed list of support services (one for each enumerator + spares)
- Printed sampling lists (one for each supervisor + spares)
- Printed Sign in/out sheet for devices (for team leader)
- Clipboards and/or folders (one per enumerator + spares)
- Packs of beans for questions on children’s time use (one pack of 24 beans per enumerator + spares)
- Notebook and pens to take notes (for supervisors)
- Pencils and erasers (one per enumerator + spares)
- Transport and emergency support (e.g. fuel, spare tyre)
- First aid kit

**Note on food and drinks**

We recommend providing enumerators with lunch and drinks during the data collection, especially when this is in rural or remote areas. We found that some enumerators did not bring lunch or water when they were given a lunch allowance. This meant that they were hungry and thirsty or took time off to go and buy drinks or snacks. This can reduce the time available for data collection and can impact on enumerators’ wellbeing and the quality of the data. If you decide to provide a lunch allowance, we recommend keeping a few bottles of water in the car in case enumerators forget to bring water.
13. Conduct piloting

We recommend piloting the tool straight after the enumerator training. The more thorough the piloting, the better the data will be. Take at least one day for piloting. We suggest testing the questionnaire with randomly selected participants in a nearby village/neighbourhood with similar characteristics – for example in terms of demographics, living conditions and geography – to the selected villages/neighbourhoods. The piloting site should be close to the research site but there should be no risk of crossover.

We recommend that each enumerator interviews at least two households. If you are using devices, ask enumerators to use them for the piloting. This enables you to make further minor edits to the questionnaire and to correct enumerators’ mistakes. It is important to check the data collected during piloting and to present common mistakes to the whole group.

After the piloting, you might consider asking enumerators the following debrief questions:

- What did you think about the questionnaire?
- What worked well? What didn’t work well?
- Are there any questions you would like to adjust?
- Was there a missing answer code? Any incorrect skips or restrictions?
- Were there any issues with the devices?
- Did you encounter any situation that we did not discuss collectively, where you found yourself hesitating about how to fill in the questionnaire?
- Were there any questions that you felt made people uncomfortable?
- Do you feel confident circulating in the area where you will be collecting data?
- Were there any safety or safeguarding issues?

To get feedback from enumerators, it helps to ask probing questions; for example, going through the questionnaire and for each set of questions asking whether they worked well, with a particular focus on the most important or complicated questions (e.g. time use, social norms). Having one-to-one conversations with each enumerator is particularly useful for getting feedback.
Section 3: Running a Household Care Survey

Enumerators and supervisors work closely together when collecting data. This is what a usual day of data collection may look like:

Guidance for supervisors/team leaders

Supervisors are responsible for the smooth running of data collection. They provide materials to the enumerators, such as the devices/paper questionnaires, beans and activity cards. Supervisors also allocate households to be interviewed to the enumerators based on the sampling lists, deal with challenges and provide general support.

If phones/tablets are used, supervisors are in charge of the devices. They hand them out in the morning and collect them again in the evening. To make sure that devices do not get lost, we recommend keeping a Sign in/out sheet for devices that enumerators sign when taking out or returning a device. Supervisors are responsible for charging the phones and uploading the data. If a device gets lost or stolen, supervisors delete the data stored on the lost phone remotely (we recommend installing the Meraki app for this purpose).

Another important role of supervisors is to monitor the data (unless this is done by another researcher).

Tips for data monitoring

<table>
<thead>
<tr>
<th>During data collection</th>
<th>At the end of each data collection day (with enumerators)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Observe at least one interview per enumerator.</td>
<td>• Gather enumerators and ask them how the data collection went. This should help identify where support is needed.</td>
</tr>
<tr>
<td>• Stay in the background; do not interrupt the interview.</td>
<td>• You may ask them to consider the following questions:</td>
</tr>
<tr>
<td>• Take notes of points to discuss (e.g. how were the questions asked? How professional was the enumerator? Was the enumerator sensitive to the needs of participants? Did they ask for ongoing consent?).</td>
<td>- What went well? What didn’t go well?</td>
</tr>
<tr>
<td></td>
<td>- Any unusual events or challenges? Any concerns or complaints?</td>
</tr>
<tr>
<td></td>
<td>- How to improve for the next day?</td>
</tr>
<tr>
<td></td>
<td>• Data collection days can be long and there is not always time for in-depth discussions, but even just asking a couple of general questions while driving home is better than nothing.</td>
</tr>
<tr>
<td></td>
<td>• Take notes of the discussion and think about how to address issues/challenges.</td>
</tr>
</tbody>
</table>
**At the end of each data collection day (at home)**

- When you are home, upload all the data. You can use the Monitoring form for uploading data.
- On your computer, log into the software (e.g., SurveyCTO) to monitor the data. If you need troubleshooting help with SurveyCTO, please email us.
- Go through a couple of questionnaires each night to see if there are any issues.
- You can also look at data from specific questions that need more attention (e.g., time use, social norms).

**Before each data collection day**

- Discuss findings from the monitoring with enumerators.
- If there is time, advise enumerators individually.

**At the end of the data collection period**

- It is very useful to have a final discussion about the data collection once it is completed. This can help to identify potential biases in the data and to improve data collection in the future.
- You could ask some of the following questions:
  - What went well? What didn’t go well?
  - How did people react to the research and the questions? Were there any concerns?
  - How did you experience the data collection process?
  - What questions did you or respondents have difficulties with?
  - If devices were used: what were the challenges and benefits of using the devices?
  - Have there been any ethical concerns?
  - Have there been any issues with finding the selected households?
  - Is there anything else you would like to tell us?

Please take notes and share them with the WE-Care team.

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**The role of enumerators**

The main role of enumerators is to conduct interviews. It is very important that enumerators understand all the questions in the questionnaire, why to ask them and how to ask them (see HCS Toolkit: Part B). The questions should be read out exactly as they appear in the questionnaire, without adding, reducing or changing words. No question should be left out (apart from skips) and all data should be entered during the interview. There will be time pressure, but quality must not be compromised.

Enumerators are the first point of contact with respondents. They should make sure that respondents understand the reason for the survey and the questions in it. Enumerators should answer any questions that respondents may have or ask their supervisors for help. If anything unusual occurs (e.g., interruption of the interview), enumerators should add a comment about this at the end of the questionnaire. However, the questionnaire is not the appropriate channel to report any misconduct or harm (see Prepare ethics and safeguarding plan for information on reporting channels). Some additional important principles are:

- **Objectivity:** Remain neutral about the subject of the interview.
- **Privacy:** All the questions should be asked in complete privacy; this also means that partners/spouses should not be present. However, there must always be a parent/guardian in sight when children are interviewed.
- **Confidentiality:** Never discuss the answers with anyone.
- **Professional behaviour:** Be confident, polite, patient, well presented; use eye contact and stay focused during the interview.

Enumerators should adhere to ethical standards and safeguarding plans (see Prepare ethics and safeguarding plan).

Interviews should ideally be completed in a single visit. This means that before starting the interview, enumerators should make sure that all household members who need to be interviewed are available for the interview. However, in contexts where it is difficult to reach all household members at home at the same time, enumerators may need to arrange times to come back. Enumerators should not interview respondents who are ill or drunk. We found that in some countries, it worked best to interview the husband first because they often became impatient when their wives were interviewed before them.
Some enumerators felt that respondents gave socially desirable answers, i.e. saying what they thought enumerators wanted to hear. If enumerators get the feeling that an answer is not honest, they should emphasize the objectivity and confidentiality of the research.

Enumerators should think about whether the data they enter makes sense (e.g. would someone sell products at a market at 2am?). Spelling is important, and enumerators should follow guidance on capitalization (e.g. all letters capitalized or only the first letter of proper nouns capitalized).

If using mobile data collection, enumerators should show respondents the device; if respondents do not want to be interviewed with the device, enumerators should use a paper questionnaire instead. Enumerators should also use a paper questionnaire if the battery on the mobile device has dropped below 15% (this should not happen if devices are charged in the evening, kept in airplane mode, and set to go to sleep after two minutes).

Here are more detailed Guidelines for enumerators that explain enumerators’ roles and good practice for data collection. We recommend printing a copy of these guidelines for each enumerator.

**Targets for data collection**

It is useful to have clear targets regarding the number of interviews that enumerators should complete each day. Targets depend on how scattered households are, how easy it is to find the sampled household members and how likely it is that they will be available. Other considerations might be how literate/used to questionnaires respondents are and how experienced enumerators are. The piloting can help you to define targets.

Targets should be ambitious but realistic. If they are too ambitious the data quality might suffer, as enumerators might rush through questions to meet their targets. To give an example, in Zimbabwe and the Philippines the target was about three households (husband, wife, two children) per day per enumerator, and was mostly achieved. In Uganda, the initial target of five households (husband, wife) was too high and was soon reduced. You may consider having a lower target for the first few days to make sure that there is enough time for feedback and supporting enumerators.
### Troubleshooting

The reality of fieldwork is often messy, and unexpected situations are likely to occur. Before starting the data collection, it can be useful to think about potential challenges and how you would deal with them. The table below summarizes some examples of challenges we encountered, and how we addressed them. Can you think of anything else that could happen?

<table>
<thead>
<tr>
<th>Challenge</th>
<th>Mitigation/solution</th>
</tr>
</thead>
</table>
| Devices do not work as intended/break         | • Bring a couple of spare devices that are set up and charged.  
  • Bring enough paper questionnaires.  
  • Familiarize yourself with the devices and software and know how to get support. For troubleshooting help with SurveyCTO, please email us. |
| No internet connection at night               | • Bring a modem with enough data.  
  • If this is not possible, go to an internet café/a place with Wi-Fi at least every other day to upload the data. |
| No electricity at accommodation at night      | • Bring a good torch.                                                                                                                                 |
| The sampled household members cannot be found | • Make sure to sample enough households on reserve lists.  
  • Work closely with local leaders so they can help you find and mobilize households.  
  • Stick to the sampling strategy.                                                                 |
| Many husbands cannot be found                 | • You might want to visit them at their workplace or come back later.  
  • You can also ask for their mobile numbers and conduct the interviews over the phone.                                                      |
| Many households refuse interviews             | • Try explaining the purpose of the research again.  
  • Never interview a respondent if they do not want to be interviewed!  
  • Be sure to sample enough households on reserve lists.                                                                                       |
| Sampled respondents are drunk or ill          | • Do not interview them if you think they would not be able to respond properly or if they are too weak for the interview (e.g. in one interview, the respondent had given birth the previous day; she should not have been interviewed!). |
| Tensions between husband and wife (e.g. husband is waiting for food) | • Cut the interview short if you feel that the woman’s safety is being put at risk.                                                            |
| Poverty, expectations and requests for support| • Explain that there are no direct benefits from taking part in the research.  
  • Carry a list of support services and refer participants to these.                                                                                  |
| Respondents are unhappy with the survey (e.g. ‘we do not get anything out of it’; ‘it is taking too long’) | • Listen to their concerns and show that you care.  
  • Explain the purpose of the research.  
  • Never interview a respondent if they do not want to be interviewed!                                                                                              |
| Respondents get aggressive                     | • Stay calm and professional.  
  • Do not argue.  
  • Ask supervisors for help.                                                                                                                                 |
| Local officials are unhappy about data collection | • Involve local leaders in the data collection.  
  • Take enough time to explain the research purpose to them.  
  • You may want to provide compensation to local leaders for helping with the sampling and identifying households. |
| Misunderstanding about Oxfam affiliation (e.g. in one country, the car had a European Commission logo; in another country, enumerators were mistaken for electricity workers) | • Do not use branded cars or clothes, to avoid confusion.  
• Inform local authorities well in advance. |
<table>
<thead>
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<tbody>
<tr>
<td>Enumerator gets sick</td>
</tr>
</tbody>
</table>
| Accidents and illnesses (e.g. flat tyre, enumerator bitten by a dog) | • Carry a spare tyre and first aid kit with you.  
• Think beforehand about what could happen, and plan for it. |
| Enumerators are unhappy (e.g. too little pay, too much work, not enough support) | • It is very important to take time to listen to their concerns and show that you take these seriously.  
• Try to address the issues or come up with compromises. |
| Rain, storm, roads inaccessible | • Check the weather forecast.  
• Bring covers for the devices and rain gear.  
• Try to avoid roads that will be inaccessible in heavy rainfall. |
| Events interfere with the research (e.g. religious celebrations, funerals, election day, collective gardening day) | • Plan the data collection period so that it does not interfere with major events.  
• If you encounter a group event, be flexible and refer to the reserve lists. |
Section 4: Analysing Household Care Survey data

Once you have collected the HCS data, the data analysis can start. For most of the Household Care Surveys we used Stata to clean and analyse the data, but other tools, such as SPSS and R, can also be used. Please contact us if you want us to share Stata HCS do-files. We have summarized some suggestions for data analysis below, but the specific analysis will depend on the context, the objectives, proposition, adjusted questionnaire and analysis plan (see Define the research objective/s and develop hypotheses, Develop an analysis plan, Adjust the questionnaire).

Is the analysis gender-transformative?

- Does your programme power analysis consider gendered inequalities of power? What strategic approaches will be used for responding to them?
- Does your programme highlight the initiative and agency of women, girls and members of gender-diverse communities, rather than just portraying them as vulnerable and passive groups?

See Oxfam Guidelines on Integrating Gender in Research Planning. 50

Data entry and cleaning

If the data is collected with mobile devices, no data entry is necessary. You can simply download the data from SurveyCTO or an equivalent tool and import it into Stata, SPSS or equivalent software. Otherwise, we recommend working with an experienced team of people to enter the data (we used Excel or Epidata for data entry). Supervisors should oversee the data entry and check that all data is entered correctly. Double entry (with reconciliation in case of differences) is usually seen as best practice.

Data cleaning refers to the process of altering or removing incorrect data from a database. Using devices can make data cleaning much easier, especially if you think carefully about skips, restrictions and constraints to prevent enumerators from entering illogical/incorrect data (see Prepare mobile data collection). You may consider the following points when cleaning the data:

- Delete data collected during the piloting and training days.
- Clean open-ended question variables to make sure the same spelling is used; for example, if ‘Oxxford’ or ‘oxford’ was entered for location, change to ‘Oxford’. Regular expression functions (regex) make this process easier.
- Make sure the location variables are correct; for example, check that village variables and district variables match.
- Replace illogical answers with ‘missing value’ (e.g. respondent cannot have started living with a partner when they were one year old).
- Replace secondary activity with ‘missing value’ when the secondary activity is ‘sleeping’.
- Replace 99, 98 and 97 with ‘missing value’.
- Go through the answers specified when ‘other’ was selected and replace with a relevant code if available (especially for the one-day recall data).

Since the HCS explores household dynamics, if culturally appropriate, we recommend programming the survey in such a way that data from all household members is collected as one case. For example, after an interview with a household member, enumerators will be asked whether they want to interview another household member. If the data from different members of the same household is collected separately, cases will need to be merged using the household number variable (see Prepare mobile data collection).
Creating variables

Because we aim to understand correlations between different factors, especially between time spent on UCDW and other factors, we need to establish dependent, independent and control variables.

**Types of variables**

- **Dependent variable**: Also known as the ‘outcome’ or ‘response’ variable (e.g. primary care hours). The dependent variable is conceptualized as ‘depending’ on the independent variable.
- **Independent variables**: Also known as ‘explanatory variables’ (e.g. access to improved water source). These are the variables upon which the dependent variable is thought to ‘depend’.
- **Control variables**: Independent variables that are not of primary interest but constitute a third factor whose influence is controlled for in regression analysis (e.g. age, level of education).
- **Continuous variables**: Numeric variables that have an infinite number of values between any two values (e.g. age).
- **Binary variables**: Variables which only take two values (e.g. access to electricity).

**Dependent variables**

For most of the analysis, UCDW indicators should be the dependent variables. Over the years, we developed a variety of UCDW indicators, out of which we found the following the most useful:

<table>
<thead>
<tr>
<th>Dependent variable</th>
<th>Construction</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary care</td>
<td>Number of hours respondents spent on UCDW as a primary activity [based on the</td>
<td>Continuous</td>
</tr>
<tr>
<td>(women, men)</td>
<td>question ‘What were you doing yesterday from [TIME]?’].</td>
<td></td>
</tr>
<tr>
<td>Primary care</td>
<td>Number of hours children spent on UCDW as a primary activity [based on the</td>
<td>Continuous</td>
</tr>
<tr>
<td>(boys, girls)</td>
<td>questions on meal preparation, fuel collection, water collection, cleaning</td>
<td></td>
</tr>
<tr>
<td></td>
<td>the house or compound, washing clothes, caring for younger children, caring</td>
<td></td>
</tr>
<tr>
<td></td>
<td>for adults).</td>
<td></td>
</tr>
<tr>
<td>Primary or</td>
<td>Number of hours respondents spent on UCDW as either a primary or a secondary</td>
<td>Continuous</td>
</tr>
<tr>
<td>secondary care</td>
<td>activity [based on the questions ‘What were you doing yesterday from [TIME]?’</td>
<td></td>
</tr>
<tr>
<td>(women, men)</td>
<td>and ‘What else were you doing at the same time?’].</td>
<td></td>
</tr>
<tr>
<td>Any care</td>
<td>Number of hours respondents spent on UCDW as either a primary or a secondary</td>
<td>Continuous</td>
</tr>
<tr>
<td>(women, men)</td>
<td>or a supervision activity [based on the questions ‘What were you doing</td>
<td></td>
</tr>
<tr>
<td></td>
<td>yesterday from [TIME]?’ ‘What else were you doing at the same time?’ ‘Were</td>
<td></td>
</tr>
<tr>
<td></td>
<td>you responsible for looking after a child (&lt;18 years) during that hour?” and</td>
<td></td>
</tr>
<tr>
<td></td>
<td>‘Were you responsible for looking after a dependent adult during that hour?’].</td>
<td></td>
</tr>
<tr>
<td>Multi-tasking care</td>
<td>Number of hours respondents spent doing at least two UCDW activities at the</td>
<td>Continuous</td>
</tr>
<tr>
<td>(women, men)</td>
<td>same time (primary, secondary or supervision).</td>
<td></td>
</tr>
<tr>
<td>Ratio of primary</td>
<td>Men’s primary UCDW hours divided by women’s primary UCDW hours (i.e. a ratio</td>
<td>Continuous</td>
</tr>
<tr>
<td>care</td>
<td>below 1 indicates that men spent fewer hours than women did).</td>
<td></td>
</tr>
<tr>
<td>(women/men)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ratio of any care</td>
<td>Men’s any UCDW hours divided by women’s any UCDW hours (i.e. a ratio below 1</td>
<td>Continuous</td>
</tr>
<tr>
<td>(women/men)</td>
<td>indicates that men spent fewer hours than women did).</td>
<td></td>
</tr>
</tbody>
</table>

To be consistent with the [SDG indicator](#) on UCDW, you may also want to create an indicator for the proportion of time spent on UCDW (daily number of hours spent on UCDW, divided by 24 and multiplied by 100).

We also suggest creating indicators for adults’ and children’s primary time spent on each UCDW activity (e.g. meal preparation, water collection, fuel collection, etc.). We used the following other primary time-use categories for men, women, boys and girls:

- **Paid work**: Selling products, work in own business, fishing, tending livestock, agriculture, income-generating activities, care work for pay.
- **Leisure, rest, sleep**: Doing nothing, sleeping, napping, personal care and eating, leisure time.
- **Education**: Attending school, training or studying, attending school-related events.
- **Total work**: Time spent on care work and paid work as a primary activity.
Independent variables
To understand how patterns of UCDW are shaped by different factors, we recommend creating a variety of independent variables. Variable construction will depend on your analysis plan (see Develop an analysis plan) and the types of descriptive and inferential analysis you want to do (see Descriptive statistics below and Regression models). Please see Independent variable construction for a detailed overview of suggested independent variables.

Control variables
Which control variables to construct and include in the regression analysis also depends on the data and the local context. When selecting control variables, think about what factors may affect either your dependent or independent variables, or both. For example, age might shape how much time women spend on UCDW and can also influence variables that may shape UCDW (e.g. ownership of a fuel-efficient stove, social norms, decision-making power). In the regression analysis, we usually controlled for the following variables (as a minimum):

<table>
<thead>
<tr>
<th>Control variable</th>
<th>Construction</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (men, women, children)</td>
<td>Number of years **or dummy variables for different age groups</td>
<td>Continuous</td>
</tr>
<tr>
<td>Education (women and men)</td>
<td>Highest level of schooling achieved on an ordinal scale **or dummy variables for different levels of education or binary variable that takes the value 1 if respondent has received at least primary education</td>
<td>Categorical</td>
</tr>
<tr>
<td>Number of children under six years old</td>
<td>Number of children under six years living in the household **or binary variable that takes the value 1 if household has at least one child under six years living in the household</td>
<td>Continuous</td>
</tr>
<tr>
<td>Wealth</td>
<td>Asset index that divides households into quintiles (relative poorest 20% to richest 20%) **or dummy variables for different wealth quintiles</td>
<td>Categorical</td>
</tr>
<tr>
<td>Marital status (if single women/men were interviewed)</td>
<td>Takes the value 1 if respondent is married/living in a union</td>
<td>Binary</td>
</tr>
<tr>
<td>Urban (if research took place in urban and rural areas)</td>
<td>Takes the value 1 if respondent lives in an urban area</td>
<td>Binary</td>
</tr>
</tbody>
</table>

The table on Independent variable construction may provide some more ideas for potential control variables (especially those listed under individual and household characteristics).

Descriptive statistics
We recommend presenting descriptive statistics for all the dependent, independent and control variables used in the regression analysis (see Regression models).

As a minimum, produce descriptive statistics for time-use indicators, basic demographics (e.g. location, age, education, marital status) and key variables of interest (e.g. ownership of time- and labour-saving equipment, project participation). The box to the side proposes some core descriptive statistics. The Kenya HCS report may also give you an idea about what descriptive statistics to report.

Some tips for reporting on variables:
Continuous variables: Report the mean, standard deviation, minimum, maximum and total number of observations. For example, ‘women’s average age was 35 (SD=12.51, Min=18, Max=80, N=361)’.

Binary and categorical variables: Report percentages, frequency and total number of observations. For example, ‘36% of women [132, N=368] reported owning a fuel-efficient stove’.

Time-use indicators: We usually reported average hours spent on different time-use indicators (see Creating variables). But to monitor change in time use and unpaid care work, especially for men and boys, ‘participation rates’ are also important. The participation rate is the percentage of men, boys, women and girls who report at least some time spent on care work.
Core descriptive statistics (to be produced separately for women, men, boys and girls, if data available)

- Average hours spent on primary care
- Average hours spent on any care
- Average hours spent on cooking/cleaning/washing/childcare/adult care/community care/firewood collection/water collection
- Average hours spent on paid work
- Average hours spent on sleep and leisure
- Average hours spent on total work (care and paid work combined)
- Total work hours
- Test difference in means by gender for the above time-use variables
- Number of respondents by location
- Average age
- Level of education
- Marital status
- Number of children aged under six
- Value of care scale
- Whether men should do UCDW
- Number of men/women that respondents believe approve of men doing UCDW
- Number of care activities men were taught
- Number of care activities men saw fathers do
- Whether woman has been harshly criticized for not doing UCDW
- Whether woman has been beaten for not doing UCDW
- Whether man has been mocked for doing UCDW
- Whether woman has suffered harm related to care
- Ownership of time- and labour-saving equipment
- Access to improved water source
- Access to electricity
- Whether at least one child is in nursery
- Participation in scheme/training/group

Please see Independent variable construction and Creating variables for more details on how to construct the variables.

Missing values should be handled carefully to avoid affecting the analysis. We recommend using consistent missing value codes (e.g. 999). When the number of cases of missing values was small, we usually dropped those values from the analysis. We suggest exploring how UCDW and other activities evolve through the lifecycle. This can help to shed light on the age dimension of UCDW and develop intervention points. For example, in many contexts, boys’ UCDW reduces drastically once they get married. The SDG guidance on the indicator on UCDW suggests that time-use data should be reported by sex (female, male), age (15+, 15-24, 25-44, 45-54, 55-64 and 65+) and location (urban/rural).

We also recommend carrying out a significance test to understand whether means differ by groups (* = difference significant at 10% level; ** = difference significant at 5% level; *** = difference significant at 1% level). For example, it would be useful to know whether women spend significantly more time than men on UCDW. Consider how the sample size may affect your results.

Think about the best way to present the findings. Sometimes tables or graphs work best, while at other times it is enough to mention averages in the text.

Regression models

The factors involved in determining amounts, distribution and perceptions of UCDW are multi-dimensional and operate at different levels. As a result, regression analyses tend to be the most appropriate method to employ. Regression models can help to develop a better understanding of the relationship between a dependent variable and a set of independent variables. However, it is important to keep in mind that it is usually impossible to assign a cause-and-effect relationship to any observed connections between a dependent variable and an independent variable.

A number of different models may be developed to explain the behaviour of a dependent variable of interest. If the dependent variables are continuous, a multiple linear regression model and Ordinary Least Squares (OLS) estimation procedures can be used to model the relationship between a dependent variable and multiple independent variables:

\[ y_i = \alpha + \beta_1 x_{1i} + \beta_2 x_{i2} + \ldots + \beta_k x_{ik} + e_i \]

where \( e_i \sim N(0, \sigma^2) \) independently for \( i=1, \ldots, n \)
The dependent variable is a function of the independent variables, where $\beta_1, \beta_2, ..., \beta_k$ are partial regression coefficients and represent the effect of the specific independent variable on the dependent variable.

There are several key assumptions inherent in the linear regression model (see HCS 2015 report p.31):

- Independence – the values of the dependent variables are statistically independent of each other.
- The dependent variable is a linear function of the independent variables.
- The error term is normally distributed with mean zero and constant variance.
- Normal distribution – given the independent variables, the condition mean of the dependent variable is normally distributed.

To meet the assumptions of the linear regression model, the independent variables should be examined for correlation – variables that are highly correlated may lead to ‘collinearity’, where variables are explaining the same variation in the dependent variable, which can lead to false results.

What relationships to look at will depend on the research objectives, analysis plan and the specific local context. Refer to the data analysis plan you developed before the start of the data collection (see Define the research objective/s and develop hypotheses, Develop an analysis plan, Adjust the questionnaire). For example, if your programme is focused on the effect of time- and labour-saving equipment on UCDW, you will need to conduct more detailed analysis on this association. Which variables to use will also depend on the nature of the data. For example, if only very few men reported time spent on UCDW, you may want to use a dummy variable indicating whether men engaged in UCDW or not. We have listed some suggestions for core regression analysis below.

### Core regression analysis

<table>
<thead>
<tr>
<th>Dependent variables</th>
<th>Independent variables</th>
<th>Control variables</th>
</tr>
</thead>
</table>
| • Average hours spent on primary care (women, men, boys, girls) | • Whether men should do UCDW  
• Respondents approve of men doing UCDW  
• Number of care activities men were taught  
• Number of care activities men saw their fathers do  
• How valuable care is considered to be  
• Whether woman has been harshly criticized for not doing UCDW  
• Whether woman has been beaten for not doing UCDW  
• Whether man has been mocked for doing UCDW  
• Decision-making scale  
• Whether woman has suffered harm related to care  
• Number of items of time- and labour-saving equipment household owns/has access to  
• Access to improved water source  
• Access to electricity  
• Whether at least one child is in nursery  
• Whether household has recently used healthcare facilities  
• Participation in scheme/training/group | • Age  
• Level of education  
• Marital status  
• Number of children aged under six  
• Wealth index |
| • Average hours spent on any care (women, men) |                                                                                       |                                    |
| • Ratio of primary care (women/men) |                                                                                       |                                    |
| • Ratio of any care (women/men) |                                                                                       |                                    |

Please see Independent variable construction or Creating variables for more details on how to construct the variables.

To strengthen an intersectional analysis and feminist research principles, you may also want to look at interaction effects between variables. For example, we found it meaningful to look at who benefits from government infrastructure and schemes (e.g. looking at interactions between government scheme participation and wealth, caste, religion, age, urban/rural location).

Please see the appendix of the 2017 HCS report for an overview of potential relationships you may want to explore. For more details on inferential analysis of household survey data, you could consult the UN guide on household sample surveys in developing and transition countries, which includes a chapter on statistical analysis of survey data.
Section 5: Using Household Care Survey data

HCS findings have been used for a variety of purposes, including evaluations of programmes with specific objectives to reduce or redistribute unpaid care work hours (e.g. in the Philippines and Zimbabwe and Malawi), research (all HCS reports), design of new interventions, learning, discussions with private sector officials and employers, online campaigns and policy events. In this section, we provide guidance on how to disseminate the research findings and how to use them for advocacy and programming.

Is the research gender-transformative?

• In your messaging and communications are you explicitly challenging the harmful narratives around norms, power inequalities, patriarchy and other structural factors that promote gender inequalities?
• Do the solutions and recommendations you have identified seek to lessen the impacts of gender inequality and also to fundamentally challenge and end it?
• Are there women’s organizations you can partner with for the purposes of your research? If so, have you reached out to them?

See Oxfam guidelines: Integrating Gender in Research Planning.

Reporting on the findings

HCS findings can be reported in different ways for different audiences, in English or other relevant languages. We will focus on research reports, blog posts, policy briefs and infographics.

Research reports

Most HCS findings to date have been summarized in a research report. The box below provides an example outline for a HCS research report. For inspiration, you may also want to look at previous HCS reports, such as the 2015 HCS, the 2016 HCS, the 2017 HCS or the Kenya HCS in 2019.

Some tips for developing the report are as follows:

• An easy-to-read executive summary with the key findings is critical, as most of the readers we want to reach will not take time to read more than three or four pages [see Oxfam guidance on Writing an Executive Summary].
• When reporting the findings, it helps to use boxes to provide more details and summarize the key findings of each section.
• Throughout the text, highlighting important points in bold or a different colour can also help to convey key messages.
• Each paragraph should evolve around a key argument or key word that could be highlighted in bold.
• Generally, bullet points and subheadings will make the text easier to read.
• References to other studies and theories can help to situate the research findings (but should not distract from them).
• Infographics can help to make the findings more accessible [see Infographics].
• Tables are generally easier to read than numbers within the text.
• Graphs can help to highlight important points. We recommend showing the time-use data in graph form [see example below].

The Oxfam guidelines on Writing for Impact make suggestions on how to use lessons from journalism to improve report writing.
Example report and executive summary outline

- **Executive summary**
  - Research objectives (minimal content on methodology)
  - Key findings (without jargon) and why these are considered significant, influential for policy/practice, or new
  - Recommendations

- **Introduction**

- **Study background**
  - UCDW: definitions and approaches (international, but include local and regional information too, if available)
  - Programme/intervention background
  - Research objectives and conceptual framework

- **Approach and methodology**
  - Study design
  - Sampling
  - Data collection
  - Fieldwork challenges and limitations
  - Ethical considerations

- **Findings**
  - Overview of the sample (see Descriptive statistics)
  - Time-use patterns (see Descriptive statistics)
  - Factors influencing UCDW:
    - Household personal characteristics
    - Time- and labour-saving equipment
    - Infrastructure and services
    - Social norms and perceptions
    - Women’s decision making
  - Wellbeing, time constraints and care work

- **Recommendations for policy making**

- **Highlights and conclusion**

- **Bibliography**

- **Appendix** (e.g. including additional information on sampling, tables with descriptive statistics and regression results)

**Figure 1 Example of time-use data**

Source: *Oxfam (2017) HCS*[^1]
Blogs
Blog posts can reach a large audience and are a good way to summarize the key findings. You can also include a link to the research report in a blog post.

For ideas and inspiration, you may want to have a look at the following blog posts about HCS findings: A Caring Economy: What role for government? or How improving access to water can help reduce care work. Also consider these examples from GROOTS in Kenya or UWONET in Uganda.

Policy briefs
You can use the findings from the report to develop a policy brief to be used to influence national governments. The UK Parliamentary Office provides some useful guidance on writing policy briefs. Remember to include sources of information.

The WE-Care policy brief for Africa or the Policy briefing for national governments on unpaid care might help you to develop a policy brief based on HCS findings. For example, the Africa policy brief explains why women’s disproportionate care workload is both a cause and consequence of gender inequality, how it can be addressed and why investing in care is key to achieving the SDGs, and presents evidence and good practice of investing in care in Africa. The policy brief uses colour, text boxes and graphics to convey the key messages in an accessible way.

These Oxfam guidelines: Creating Killer Facts and Graphics explain how to come up with punchy, memorable key facts and visuals.

Infographics
In reports, blogs or policy briefs, infographics can make the findings more accessible. The steering committee and other stakeholders participating in validation and communications workshops will have ideas about which findings are most compelling for their particular influencing, advocacy and knowledge-sharing efforts. Infographics can also be used in flyers or on websites. Below is an example of the infographics that the Kenyan team used for presenting HCS data (see more on p.9 of the Kenya HCS 2019 report).


For more examples of infographics, see these blog posts: A Caring Economy: What role for government? or How improving access to water can help reduce care work and the WE-Care project evaluation (p.10).
Sharing and discussing the findings

Results will be validated and discussed with a variety of participants and audiences. Involving research participants and a steering committee of local stakeholders is important for feminist research principles of reflexivity and power relationships, and of recognizing research participants as partners in the research process and agents of change. It can also help to validate the findings and ascertain whether they reflect the experiences of research participants.

Below, we have summarized some ideas for disseminating the data. Think about which points are most relevant for each audience and about translating the most relevant documents for local-language speakers/readers.

<table>
<thead>
<tr>
<th>Influencers and their audiences</th>
<th>Ideas</th>
</tr>
</thead>
</table>
| Research participants         | • Sense-making workshop [presenting preliminary findings to participants and co-analysing/interpreting them]  
                                | • Validation workshop to confirm findings and recommendations  
                                | • Co-create a flyer with key findings and distribute it to participants  
                                | • Organize an event or focus group discussions  
                                | • Organize a radio show/TV show |
| Local leaders/stakeholders    | • Sense-making workshop [presenting preliminary findings to participants and co-analysing/interpreting them]  
                                | • Validation workshop to confirm findings and recommendations  
                                | • Co-create flyer with key findings and ask representatives to distribute flyers among other leaders  
                                | • Organize meeting/focus group discussions to discuss findings |
| Colleagues                    | • Give a lunchtime presentation or webinar  
                                | • Include link to report/blog post in your email signature  
                                | • Share findings informally |
| Government officials          | • Involve the steering committee in sense-making and validation workshops  
                                | • Engage in policy dialogue at national and sub-national levels  
                                | • Prepare a policy brief [see Policy briefs]  
                                | • Organize phone calls/meetings to discuss the findings  
                                | • Attend roundtable events with sector ministries [water, social care, gender, finance, health, electricity/infrastructure, etc.] to share report findings and policy brief |
| International policy community| • Promote the HCS data as evidence to support policy around UCDW  
                                | • Participate in meetings/events and online fora and webinars  
                                | • Contact organizations that might be interested |
| Academic community            | • Write academic papers about findings  
                                | • Present at academic conferences  
                                | • Establish partnerships with research institutes/organizations interested in further exploring the HCS data |
| General public                | • Publish a report on an open access website  
                                | • Write blog post about the findings  
                                | • Use social media to disseminate findings [e.g. Twitter, Facebook, Instagram, LinkedIn]  
                                | • Use infographics to make the findings accessible |

Advocacy and influencing

Local-level advocacy may include stakeholders taking a look at the district development plan (or equivalent) and organizing meetings with traditional leaders and elected representatives of the community (either municipal or parliamentary).

At national level, you could start by seeking an audience with the most relevant sector ministry, for example water, social care, gender, finance, health, or electricity and infrastructure. Once you have an understanding with this ministry, together you could organize a meeting and invite all the key stakeholders at national level that your programme power analysis identified. At such meetings, it is useful to present the policy brief highlighting key messages from the HCS findings that are likely to appeal to your stakeholders. Together with the ministry and other stakeholders who have shown interest, you could then approach the parliamentary portfolio committees responsible for the various sectors relevant to the discussions. The chances of success in national influencing are
enhanced where alliances and coalitions exist between different stakeholders. Policy briefs and reports can help strengthen the call for greater investments in care-related infrastructure.

Case study: Using HCS data to influence local care policies in the Philippines

In the Philippines, following influencing using findings from the HCS, eight local governments passed Women’s Economic Empowerment and Care Ordinances (‘WEE-Care Ordinances’) – laws that make it mandatory to generate data and address unpaid care in all planning, budgeting and programming activities. This covers a wide range of areas, such as housing and land use, community-based conflict resolution, access to care-supporting infrastructure and services, and programmes to help women enter the labour market. This success paved the way for partners to work with the Salcedo government to incorporate questions from the HCS into the local community-based monitoring system. This is a nationally supported process, whereby a survey is conducted every five years to assess poverty and give policy makers and local implementers evidence to inform and track the impacts of their policies. With an expected reach of 5,100 households, the survey in Salcedo will ensure that evidence on unpaid care work, including women’s time use, is available to improve local policies – setting an important example for other local governments to follow.

Case study: Using the HCS to influence local and national government in Kenya

Following the completion of the HCS in five of Nairobi’s informal settlements, Oxfam together with partners NOPE and Youth Alive Kenya held a community consultation with women and men who were involved in the research, along with local partners and community leaders. The purpose was to share the draft findings and recommendations of the HCS, understand the extent to which they reflected the lived experiences of the research participants, and to hear whether the recommendations needed to be adapted. Following this, they held a second validation workshop with representatives from key county and national government ministries including the Kenya National Bureau of Statistics, Office of the Nairobi Women’s Representative, and Kenya Women’s Parliamentary Association, as well as with international and national NGOs and media houses. This allowed key government ministries to become familiar with the findings of the report before it was officially launched, and to provide input to the recommendations.

The report was finalized based on inputs from these two workshops. Oxfam and Youth Alive Kenya then rolled out an advocacy campaign that included a breakfast media launch with journalists, TV and radio interviews, and a month-long social media campaign using ‘killer stats’ and infographics from the report. They also developed a policy brief targeted at key county departments, to be used in advocacy meetings and roundtables with government.

For more information on national-level influencing, see Oxfam’s Guidelines on influencing for social justice and Guide to influencing on UCDW.
Programming

Findings from the HCS and RCA have been used to develop, inform and evaluate programmes and interventions on women’s economic empowerment, decent work, livelihoods and youth empowerment, among others. The WE-Care initiative is one example of a programme that has used time-use data to inform programming and advocacy. This WE-Care project report gives an overview of some of the activities and interventions that have been implemented in the Philippines and Zimbabwe.
Get in touch

We hope that you found this manual useful and that you will use the HCS questionnaire for your work. Care work underpins all development processes and is relevant to all development initiatives. We believe that generating data on and improving measures of care work is an important part of addressing inequalities in care and tackling gender inequality more broadly.

The Household Care Survey is a living tool. We have learned from every round of data collection and have adjusted our approach and the questionnaire accordingly. The work is ongoing, and we would very much appreciate your help. Please share your comments, concerns and suggestions with us. If you have used the HCS, please let us know what worked and what did not. What questions did you use? How did you adjust them? How did they work in the field? What results did they generate? How did you use the results?

Local research consultants have found it useful to talk to others who have implemented the HCS and were able to share documents and ideas. Researchers with experience on the HCS may be willing to speak with you. We are here to help and to share additional documents and best practice. Please get in touch.
## Appendix

### Example timeline

<table>
<thead>
<tr>
<th>Date</th>
<th>Activity [e.g., training, piloting, data collection]</th>
<th>Region</th>
<th>Ward</th>
<th>Village</th>
<th>No. of households</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*add rows as needed

### Desk-testing template

<table>
<thead>
<tr>
<th>Question number</th>
<th>Comments on wording, instructions, codes</th>
<th>Comments on skips</th>
<th>Comments on restrictions</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*add rows as needed

### Sign in/out sheet for devices

<table>
<thead>
<tr>
<th>Day 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Device ID</td>
</tr>
<tr>
<td>----------------</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

*add rows as needed

### Monitoring form for uploading data

<table>
<thead>
<tr>
<th>Device ID</th>
<th>Enumerator name</th>
<th>Location</th>
<th>Number of responses collected digitally</th>
<th>Paper-based responses</th>
<th>Battery level (%) end of day</th>
<th>Time to upload all data (via Wi-Fi)</th>
<th>Notes / issues</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*add rows as needed

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Go back to [Set a timeline](#)

Go back to [Go back to Prepare mobile data collection](#)

Go back to [Guidance for supervisors/team leaders](#)
Guidelines for enumerators

The enumerator role is central to the survey. It is very important that all enumerators follow the same procedures so that the data can be trusted. Please follow all of the instructions contained in this manual and those written on the questionnaire.

Your supervisor’s role

- You will be working closely with your supervisor.
- The supervisor will provide you with all the necessary materials and instructions.
- Your supervisor will assign your work to you at the start of each field visit.
- Inform your supervisor of any problems you encounter in the field. If you are in doubt, ask your supervisor what to do.
- Supervisors do checks in order to make sure that the interviews are being carried out consistently between enumerators:
  - She/he will examine all the data you collected to make sure that each interview has been carried out correctly.
  - She/he will observe one or more of your interviews to evaluate your method of asking the questions.
  - She/he will discuss and evaluate your work with you and report on your performance to the management team.

Your role

- Your principal task is to conduct interviews.
- Interviews are ideally conducted in a single visit, but more visits may be needed, for example if a particular survey respondent is not present at the time of your visit.
- You play a major role in getting responses from respondents and your role is vital to accomplish the survey objectives.

Meeting the respondent to be interviewed

- Be friendly, confident and polite.
- When meeting the household, explain the purpose of your interview. You are conducting a survey for Oxfam and partners to assess care work in households and the community. All the information recorded will be regarded as confidential. Please refer to the cover sheet of the questionnaire for the introduction.
- The behaviour of respondents towards you might be shaped by:
  - Expectations of getting something from the interviewer.
  - Suspicion about the purpose of the interview.
  - A feeling of being socially inferior to the interviewer.
  - A desire not to disappoint the interviewer.

Objectivity of enumerators

- Remain completely neutral about the subject of the interview. Do not show any surprise, approval or disapproval about the answers given by the respondent, and do not tell him/her what you think.
- If he/she asks you for your opinion, wait until the end of the interview to discuss the matter with him/her.
- If respondents seem to be giving socially desirable answers, i.e. saying what they think you want to hear, emphasize that you will not judge them and will not tell anyone what they say. Your main concern is recording honest responses.

Private nature of the interview

- All the information collected is strictly confidential.
- In principle, all of the questions should be asked in complete privacy.
- The only exception to this rule is when a respondent is under 18 (in which case, a parent/guardian must be in sight during the interview) or the respondent is incapable of answering the questions due to language difficulties or problems remembering things. In this case, look for someone else in the household who has the best knowledge of the household and the household members’ activities to assist the respondent in the interview.
- If there are other people in the room or around the place where you are conducting the interview, please ask them to leave. You can say that you are under instruction not to proceed with the interview if they do not leave.
- Never discuss the answers given with other members of the same household, members of another household or with any other person except the team supervisor and the project management team.
Suggestions for professional behaviour
- Be polite to everyone.
- Be well presented so that the respondent will be inclined to trust you as a reliable and responsible person. Do not wear any branded clothing.
- Be patient when conducting the interviews to avoid antagonizing the respondent or leading him/her to give answers that are not accurate.
- Avoid becoming involved in political and religious discussions. Symbols related to a political party or religion should be avoided as much as possible.
- Avoid using jargon.
- Do not ask for any gifts (e.g., ‘may I take this banana?’) and do not accept money. Before doing the pilot, discuss with your team leader if it is appropriate to accept food or drink that is offered and if so, under which circumstances.
- Turn off your personal phone and do not take calls during an interview.

How to ask questions
- Read questions exactly as they are written in the questionnaire, without adding, reducing or changing words. Do not use your own words, as this may alter the meaning of the question and can influence your respondent to give a different answer.
- Do not change the chronological order of the questions.
- Do not leave out a question due to previous answers or because you know the answer.
- Follow the questionnaire’s instructions.
- Do not read out the answer codes, unless stated. This is especially important for ‘why’ questions.
- Use a conversational tone when reading out the questions.
- When reading questions, control voice intonation. Avoid speaking too softly or too loudly, as that could bore or annoy the respondent.
- Use eye contact. At the end of each question, look at the respondent while you are waiting for his or her reply.
- Do not show the respondent that you are in a hurry or tired. Give them time to think.
- If the respondent does not answer in a reasonable time, he/she probably 1) has not heard the question, 2) has not understood the question or 3) does not know the answer. In any case, repeat the question. If there is still no reply, ask the respondent whether he/she has understood the question. If the answer is ‘No’, reword the question. If the difficulty lies in finding the right answer, help the respondent to consider their reply.
- The questionnaire should be completed during the interview. Do NOT record the answers on scraps of paper and transfer them to the software later.
- Do not record illogical time-use activities (e.g., selling products at market at 2am).
- Spelling (especially of names/locations) is important; be clear in advance about whether all letters should be capitalized or only the first letter.

Interviewing children
- Try to decrease hierarchies; for example, do not sit on a chair looking down on the child, and do not conduct the exercise as if you are teaching them something. Help them to place the beans, and do not insist that they do it if they feel shy.

Pace of the interview
- Determine the pace of the interview depending on the respondent.
- Avoid long discussions about the questions with the respondent.
- If you are receiving irrelevant or complicated answers, listen to the respondent and then lead him/her back to the original question.

How to deal with respondents’ behaviour
- If respondents lack confidence to talk, look tired and bored or are in a hurry to give answers, try to keep them interested with the questions.
- If respondents are very talkative, be careful that the interview does not take too long.
- If respondents start crying, give them time to cry, show sympathy and only continue to ask questions if they agree.
- If people are angry about a particular development project, listen to their concerns but stay objective and explain that you are just a researcher conducting a survey.
Checking the questionnaire

• After finishing each interview, check that all sections of the questionnaire have been correctly completed. Do this immediately after each interview and – most importantly – before leaving the village.
• Do not make any changes to the completed questionnaire without asking the respondent the relevant question(s) again.

Writing comments

• Before leaving the household, write comments in the comments box if anything unusual has occurred. This can be of any kind.
• It is compulsory to write a comment in the following cases:
  - If there is a missing field, you should explain why this is the case.
  - If you think a response given by the respondent is rather unusual (e.g. based on previous interviews with other respondents in the village), you should note this.

Thanking the respondent

• Before leaving the household, thank the respondent(s) for taking part in the interview.
• You should try not to stay around in the household for longer than necessary. If any household member asks you to stay for lunch/drinks, thank them kindly but say that you cannot accept the offer because you still have a lot of work to do.

Additional advice for mobile data collection

• Show the respondent the device and reassure them that no images or location information are being collected (see ‘Explaining the use of the device’, below).
• If they are not comfortable, use the paper version of the questionnaire.
• Use a paper questionnaire if the device battery has dropped below 15%.
• During the interview, avoid bright light and rain.
• Protect the device from rain with a transparent plastic bag.
• Do not leave the device lying around.
• Report to your supervisor immediately if the device gets lost or stolen.

Explaining the use of the device

Explain that you are using a device to conduct the interview to help speed up the data capture process and reduce input errors for example. “This is an Oxfam handset, and no information other than the questions you are asking will be captured by it. No GPS will be captured, and no photos taken. No SIM cards are inserted in the devices – they are being used solely for data collection. We are conducting all surveys this way, and the data will be uploaded and removed from the device at the end of the day for analysis.” Show the device to the respondent and demonstrate how the app works. Allow them to handle the device if interested, and confirm that they are happy to proceed with the interview. You will also have a paper version of the survey which you can show the respondent to provide an overview of the questions being asked, if helpful.

If a respondent is not comfortable proceeding with the interview being conducted via a device, switch to the paper version of the survey.

Using the device in the field

• Please take care of your device! The devices have been purchased by Oxfam to assist with the collection of information.
• Never change the device settings. These have been set up to maximize battery life and allow for the smooth running of the survey app.
• Do not take the battery out of the device.
• Do not try to install other apps, ringtones or images. There are no SIM cards in the devices, so it is not possible to make phone calls or send/receive text messages.
• Do not swap or share your device with others – each enumerator has been assigned a specific device that should not be transferred.
• Report loss or theft immediately so that the device can be tracked and potentially located, or data can be wiped remotely.
Troubleshooting
• If you accidentally click out of the app, reopen it and you should be able to carry on where you left off.
• If the app crashes, try reopening the app. If this happens repeatedly, try turning off the device and then restarting it.
• If the device freezes, try holding down the on/off button for several seconds, turning it off and then restarting it.
• If you are unable to get the device to work properly, please switch to the paper version of the survey.
• Please contact the supervisor as soon as possible if you are experiencing problems so that they can be explored and hopefully resolved.

Unlocking the device
• Turn on your device and enter passcode: XXXX followed by your unique two-digit code. Please note, if the device was turned off you will need to input this twice, first to decrypt the device and then to log in.

Coming back to a survey halfway through
• If you need to stop the survey halfway through and return to a household later, you can save the survey so that you can start where you left off. Follow these steps:
  • To save the form, go to the bottom right-hand side of the device (to the right of the home button). Select ‘Save Changes’. If you accidentally select ‘Ignore Changes’, a message will pop up to make sure that this is what you would like to do.
  • Go to the ‘Edit Saved Form’ section of SurveyCTO.
  • Edit saved form and choose the best place to restart the survey by selecting the relevant section. You can also start from the beginning (with your answers saved) or at the end if you prefer.

Finishing your survey
When you have finished your survey, please save and exit with the form marked as FINALIZED. If you need to come back to the survey for any reason – for example to make a change, check it through or because you need to return to the household – please ensure that the FINALIZED box is not selected.

Exit the SurveyCTO app and put your device to sleep while you move on to do your next interview.

In this survey, all results will be uploaded at the end of the day – ignore that the ‘Send Finalized Form’ button on the device has a number in brackets by it. This is the number of forms you have completed, and they will upload automatically when a connection to Wi-Fi is established.
Independent variable construction

<table>
<thead>
<tr>
<th>Category</th>
<th>Independent variable</th>
<th>Construction</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual characteristics</td>
<td>Income (women)</td>
<td>Women’s self-reported income from different sources over the last three months</td>
<td>Continuous</td>
</tr>
<tr>
<td></td>
<td>Control over income</td>
<td>Takes the value 1 if woman controls income independently</td>
<td>Categorical</td>
</tr>
<tr>
<td></td>
<td>(women)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
|                                | Work status (women, men) | 1 = not working: student, in retirement, disabled  
2 = own-use production work comprising production of goods and services for own final use: farming, rearing animals, fishing  
3 = unpaid trainee or volunteer work: apprentice, intern, trainee, volunteer  
4 = formal employment: work as an employee (formal) or own business activity (formal)  
5 = informal employment: engaged in paid domestic work, unpaid work for family business, work as an employee (informal) or own business activity (informal)  
** or dummy variables for ‘formal employment’ or ‘informal employment’ | Categorical |
<p>| Household characteristics      | Household size       | Number of members living in the household                                                                                                     | Continuous |
|                                | Extended family      | Takes the value 1 if there are at least three generations living in the household                                                               | Binary     |
|                                | Female to male ratio | Number of females in the household divided by number of males in the household                                                                 | Continuous |
| Perceptions of care work       | Ratio care value (women, men) | Value scores for care divided by the scores for paid work (i.e. if the ratio is larger, respondents value care work less than paid work)  | Continuous |
|                                | Ratio care skills (women, men) | Skills scores for care divided by the scores for paid work (i.e. if the ratio is larger, respondents think that care work requires fewer skills than paid work)  | Continuous |
| Social norms                   | Empirical expectations (women, men) | Number of men (out of five) that, according to respondents, had spent at least an hour on caring for people and domestic work the previous day | Categorical|
|                                | Personal normative beliefs (women, men) | Takes the value 1 if respondents reported that men should do caring for people and domestic work | Binary     |
|                                | Normative expectations – women (women, men) | Number of women (out of five) that, according to respondents, believe that men should do caring for people and domestic work | Categorical|
|                                | Normative expectations – men (women, men) | Number of men (out of five) that, according to respondents, believe that men should do caring for people and domestic work | Categorical|
| Sanctions and violence         | Acceptance of beating (women, men) | Takes the value 1 if respondents reported that it was acceptable to beat a woman in at least one of the scenarios | Binary     |
|                                | Acceptance of criticism (women, men) | Takes the value 1 if respondents reported that it was acceptable to harshly criticize or shout at a woman in at least one of the scenarios | Binary     |</p>
<table>
<thead>
<tr>
<th>Category</th>
<th>Independent variable</th>
<th>Construction</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Acceptance of mocking</strong> (women, men)</td>
<td>Takes the value 1 if respondents reported that it was acceptable to mock a man in at least one of the scenarios</td>
<td>Binary</td>
<td></td>
</tr>
<tr>
<td><strong>Upbringing</strong></td>
<td>Taught care (man)</td>
<td>Takes the value 1 if man had been taught to do at least one care activity as a child</td>
<td>Binary</td>
</tr>
<tr>
<td></td>
<td>Father care (man)</td>
<td>Takes the value 1 if man had observed father doing at least one care activity as a child</td>
<td>Binary</td>
</tr>
<tr>
<td><strong>Decision making</strong></td>
<td>Decisions scale (women)</td>
<td>For each area of decision making, 0 is assigned if a woman is not involved and cannot influence decisions, 1 is assigned if a woman is involved but cannot influence decisions, 2 is assigned if a woman is not involved but can influence decisions, 3 is assigned if a woman is involved and can influence decisions. ‘Decisions scale’ is the mean score of all areas of decision making combined.</td>
<td>Continuous</td>
</tr>
<tr>
<td><strong>Time- and labour-saving equipment</strong></td>
<td>Fuel-efficient stove</td>
<td>Takes the value 1 if the household has a fuel-efficient stove</td>
<td>Binary</td>
</tr>
<tr>
<td></td>
<td>Water tap</td>
<td>Takes the value 1 if the household has a water tap in the household or on the compound</td>
<td>Binary</td>
</tr>
<tr>
<td></td>
<td><strong>construct similar variables for other types of equipment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Public infrastructure and services</strong></td>
<td>Access to water source</td>
<td>Takes the value 1 if the household has access to an improved water source ** or binary variable that takes the value 1 if the household has access to a government-provided water source</td>
<td>Binary</td>
</tr>
<tr>
<td></td>
<td>Electricity</td>
<td>Takes the value 1 if the household has access to electricity ** or binary variable that takes the value 1 if the household has access to government-provided electricity</td>
<td>Binary</td>
</tr>
<tr>
<td></td>
<td>Childcare</td>
<td>Takes the value 1 if the household has access to childcare ** or binary variable that takes the value 1 if the household has access to government-provided childcare</td>
<td>Binary</td>
</tr>
<tr>
<td></td>
<td>Healthcare</td>
<td>Takes the value 1 if the household has used healthcare services in the last three months ** or binary variable that takes the value 1 if the household has used government-provided healthcare in the last three months</td>
<td>Binary</td>
</tr>
<tr>
<td></td>
<td>Government scheme</td>
<td>Takes the value 1 if respondent has participated in (relevant) government scheme</td>
<td>Binary</td>
</tr>
<tr>
<td><strong>Project activities</strong></td>
<td>Project participation (women, men)</td>
<td>Takes the value 1 if respondent has participated in at least one (relevant) project activity</td>
<td>Binary</td>
</tr>
</tbody>
</table>

[Go back to Creating variables]
NOTES

1. Implemented since 2013, Oxfam’s WE-Care initiative addresses unpaid care and domestic work as a key driver of gender inequality. WE-Care has had significant funding for programmes in Bangladesh, Colombia, Ethiopia, Kenya, Malawi, the Philippines, Tajikistan, Tanzania, Uganda, Zambia and Zimbabwe. For more information, see: https://policy-practice.oxfam.org.uk/our-work/gender-justice/womens-economic-empowerment/we-care


23. Ibid.


24. Ibid.


27. Ibid.


34. Ibid.


39. Ibid.


47. Ibid.

48. Ibid.


51. UN (2019). Indicator 5.4.1. Proportion of time spent on unpaid domestic and care work, by sex, age and location, op. cit.


53. UN (2019). Indicator 5.4.1. Proportion of time spent on unpaid domestic and care work, by sex, age and location, op. cit.

55 Oxfam (2015). Factors and Norms Influencing Unpaid Care and Domestic Work: Household survey evidence from five rural communities in Colombia, Ethiopia, the Philippines, Uganda and Zimbabwe, op. cit.


57 UN (2005). Household Sample Surveys in Developing and Transition Countries: Section E: Analysis of Survey Data, op. cit.


77 Ibid.


80 Oxfam (2020). Findings From a WE-Care Project Final Evaluation, op. cit.


