As we all adjust to the coronavirus pandemic and the new normal, we think about opportunities for more positive change. For many people around the world going back to how things were isn’t an option. Central to this is stronger recognition of the growing need for care as the pandemic has continued to highlight just how essential care work is to our economy, health, and wellbeing.

We know that before COVID-19, heavy and unequal care responsibilities were already trapping women in time and income poverty and locking them out of public and political life, with women providing 12.5 billion hours of unpaid care work per day—three times more than men. Now, it’s even more.

WE-Care has responded to this in the last quarter by supporting access to water for families in countries such as Zimbabwe, undertaking research to understand how lockdowns are affecting men and women’s unpaid care work in Kenya and the Philippines, and communicating powerful calls for action to governments, journalists, community and religious leaders, civil society partners and communities—using innovative social media to reach over 25 million people through the #HowICare campaign.

This new research highlighted that while COVID-19 and the related containment efforts have caused increases in women’s—and men’s—unpaid care workloads, women are still doing the bulk of this work. It shows the real consequences this has for the health, economic security, and wellbeing of these women and their families, with women reporting feeling more anxious, depressed, overworked, or ill because of their increased unpaid care work.

Right now, we have a historic opportunity to set things right and to enable an economic recovery that prioritizes investments in care. There is a great demand, and many opportunities, for evidence-based advocacy to push and accelerate governments’ and private sector commitments to a future based on feminist thinking that makes care work visible, and a policy priority, listening to the voices of the most marginalized people in society, and building inclusive economies founded on the value of care.
WE-CARE REACHES MORE THAN 25 MILLION PEOPLE THROUGH THE #HOWICARE CAMPAIGN

OXFAM AND PROMUNDO LAUNCHED A HIGH PROFILE GLOBAL CAMPAIGN #HOWICARE IN THE RUN UP TO FATHER’S DAY 2020. WE-CARE COUNTRY TEAMS AND PARTNERS JOINED THE CAMPAIGN TO HIGHLIGHT THE INCREASING AMOUNT OF UNPAID CARE AND DOMESTIC WORK (UCDW) THAT WOMEN AND GIRLS ARE DOING AS A RESULT OF COVID-19 AND CALL FOR MEN AND BOYS TO STEP UP THEIR FAIR SHARE OF WORK.

A data-informed social media campaign, #HowICare aimed to shed a light on the realities, difficulties, and disparities of providing care, specifically in caring for children, in order to advocate for additional support for caregivers—including the parents and care workers who are most impacted—during the COVID-19 crisis and beyond.

The campaign also aimed to encourage men as individuals, employers, and advocates in ensuring that care is a collective responsibility: shared equally and supported by structures and policies.

The #HowICare campaign featured new, rapid response polling data from the US, Canada, UK, Philippines, and Kenya.

continued on page 4...
WHY CARE?
Globally, we know that women carry out three times the amount of household and child care that men do (women also make up more than 80 percent of paid care workers, from health services to early childhood).

Now more than ever we need a radical shift: in who does the care work at home—with men taking on an equal share—in how we support those who do the care work within our communities, and in how we support parents and caregivers to care for children—particularly those who are most impacted, including single parents, people of color, essential workers, and low-income families.

The work of caring for children—and others—needs to be valued, paid, supported, and fully equal in terms of men doing their fair and equal share, both in paid and unpaid care work.

WE-CARE’S ASKS
Across the multi-country WE-Care programme—Ethiopia, Kenya, Uganda, Zimbabwe, and the Philippines—including the regional Pan-Africa and global components, the #HowICare campaign served as an opportunity to deliver key UCDW influencing messages to relevant sectors, such as governments, private sector companies, and men.

In our focused programme messaging, we called for:

1. Governments to increase access to affordable household water to reduce women and girls’ heavy and time-consuming unpaid care work

Evidence from low-income contexts shows that access to household water can reduce women’s time on UCDW by up to four hours a day, giving them more time to take part in activities they choose, including paid work and education. Evidence from Nairobi’s informal settlements during COVID-19 likewise shows that water collection was one of the most time-consuming UCDW tasks.

Quality, affordable, and accessible water systems that include sufficient budget for ongoing operation and maintenance costs, and which considers non-financial access constraints for women and girls (e.g., distance of travel to/from water source, queuing times, safety and reliability of supply) are therefore warranted.

2. Governments to invest in quality and affordable childcare for all, particularly for low-income workers

Systems of childcare are on the verge of collapse the world over. Access to quality and affordable childcare in low-income settings is already a challenge that is made worse by COVID-19. Government investment in affordable childcare for low-income communities is essential to our economies and our societies.

3. Equal, fully paid, non-transferable parental leave for all parents, as a supplement to maternity leave, not an alternative; and family leave for all

Parental leave is crucial for all parents to provide care for their children; and we need all parents, including men,

continued on page 5...
to take it. Nowhere in the world are men taking the full leave even when leave is available. Policies like parental leave, and shifts in norms are needed to support women, men, and all caregivers in having access to, and taking their full leave.

Governments and employers must offer equal, fully paid, non-transferable parental leave for all parents, as well as embed paternity leave in national policies as a supplement to maternity leave, not an alternative. And when leave is offered, advocate for men—in particular—to take it.

4. Men to step up and do their fair share of care work—challenging the idea that care work is ‘women’s work’

Harmful norms and sexist beliefs that see care work as the responsibility of women and girls lead to an unequal, gendered distribution of care work and perpetuate economic and gender inequality—inequalities which have already been exacerbated during the COVID-19 crisis.

Men, hence, need to step up to equally fulfill their responsibilities on care work to address the disproportionate amount of care done by women within households and communities.

CAMPAIGN TACTICS
In the week-long #HowICare campaign, WE-Care country teams and partners used a variety of tactics on different platforms to send our messages across. We saw critical engagements from different sectors—from social media (primarily of Facebook and Twitter) to traditional media platforms, such as television, radio, and print.

Here’s a brief rundown of the strategies our country teams:

In Ethiopia, we utilized previously collected research and stories to highlight the realities of increasing UCDW in the midst of the COVID-19 pandemic. In our country messaging, we tied the UCDW issues to the growing cases of gender-based violence in the country to also respond to key systemic barriers that are often
overlooked. The country team also engaged male allies from within Oxfam, as well as from their local partners and social media networks, to deliver messages that support our campaign calls.

In Kenya, aside from conducting a rapid gender assessment in Nairobi to inform the campaign (see story on page 10 for more details), we also engaged male social media influencers to deliver UCDW messages to wider audiences. Our key country message that celebrates the fact that more men are now doing care work during the pandemic was also shown on television during the primetime event ‘Nation Leadership Forum.’ Our partners Youth Alive! Kenya and PAWA 254 also led social media initiatives, such as a video documentation of how men can be more involved in childcare duties.

In Uganda, our social media strategy focused on sharing stories from continued on page 7...
community members, as we engaged different actors led by our partner the Uganda Women’s Network. We also amplified our calls as we went on radio to call on men to share the workload at home.

In Zimbabwe, our campaign engagements were powered by a series of activities, from a Facebook event on the role of media in shaping social norms to radio guestings, involving our local and national partners in the country. We also joined a televised panel discussion to talk about the campaign and our key asks, where Oxfam, our partner Padare, and the Director of Gender in the Ministry of Women’s Affairs exchanged meaningful insights on challenging harmful social norms in the country.

In the Philippines, we employed a ‘gamification’ strategy through the Facebook promotions called ‘Lodi Kong Tatay’ (in English, ‘My Idol Father’), which encouraged family members to share photos and stories of fathers doing care work duties at home. This strategy led to positive and better engagement, as we received a total of 120 entries. In time for Father’s Day, 10 fathers where selected and given a special ‘Father’s Day lunch treat’, which was delivered straight to their homes. Our media engagement was likewise successful, as we published the results of the Philippine rapid gender assessment on four media outlets in the country.

CAMPAIGN IN NUMBERS
Combining the social media and traditional media reach of our campaign, we reached more than 25 million people with UCDW-related messages.

For more information about the campaign, write to Vin Aranas (MAnanas@oxfam.org.uk).

#HowICare Campaign

<table>
<thead>
<tr>
<th>Estimated Reach*</th>
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<tbody>
<tr>
<td>28,649 people in Ethiopia</td>
</tr>
<tr>
<td>1,366,343 people in Kenya</td>
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<tr>
<td>5,045,722 people in Uganda</td>
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<tr>
<td>2,535,626 people in Zimbabwe</td>
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<td>16,490,406 people in the Philippines</td>
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* Based on the country reports submitted to the WE-Care PMU.
GARDEN TRUST-FUNDED ‘PIPED WATER SCHEME’ REDUCES THE INTENSITY & TIME-SPENT COLLECTING WATER IN HATCLIFFE, ZIMBABWE

Harare, Zimbabwe—As a social good, UCDW fuels the development of healthy societies and growing economies. However, for many poor families in the Hatcliffe Suburb who have no access to adequate public infrastructure and services, the daily task of collecting water has been labor-intensive and time-consuming.

Boreholes, for example, have become seasonal due to insufficient rainfall and retreating water source, causing water scarcity issues in the area. Without access to a nearby water facility, domestic chores take longer.

continued on page 9...
time to complete, with women and girls spending more time to fetch water for drinking and domestic use. With COVID-19 increasing the need for more frequent hand washing to combat the virus, water issues in Hatcliffe become more pressing.

To help address the issue, Oxfam in Zimbabwe installed a solar piped water scheme in Hatcliffe to provide families with safe drinking water, reducing the distance that women and girls have to walk each day to fetch water.

The piped water scheme includes five water points located in different areas in Hatcliffe, which serve around 3,000 households.

Oxfam’s post-distribution monitoring and data collection exercises showed that because of the water points, families with five household members have experienced an increase in the quantities of water they can collect each day—from just 30 liters to at least 60 liters.

To some extent, the piped water scheme has also reduced the distance covered by community members to fetch water: 84% indicated that they now travel less than 500 meters to and from the water source.

While significant progress has been made, a recent survey conducted in Hatcliffe and two other suburbs (i.e., Glen View and Budiriro) in Harare—which was aimed at understanding how work (both paid and unpaid) is changing under the massive social and economic dislocations caused by the COVID-19 pandemic—showed that while men are contributing more time to perform UCDW tasks during the pandemic, women are still doing the bulk of UCDW tasks at home.

In the WE-Care Stories 2020-1 issue, Oxfam Zimbabwe also reported the distribution of time- and labor-saving equipment in Hatcliffe. To read this update, click here.

Read the story of Shylet who lives in Hatcliffe on page 23 of this issue. Photos by Tavonga Chikwaya/Oxfam

For more information about WE-Care in Zimbabwe, write to Regis Mtutu (RMtutu@oxfam.org.uk) or Sarah Hall (Shall2@oxfam.org.uk).
OXFAM IN KENYA AND PARTNERS UNDERTAKE RAPID GENDER ASSESSMENT, CAPACITY BUILDING, & MULTI-STAKEHOLDER ENGAGEMENT

OXFAM IN KENYA REPORTS RECENT DEVELOPMENTS IN THEIR UNPAID CARE AND DOMESTIC WORK (UCDW) PROGRAMMING—FROM GENDER ASSESSMENT TO INFLUENCING.

COVID-19 GENDER IMPACT ASSESSMENT

In May 2020, Oxfam in Kenya’s Humanitarian and Women’s Rights Programme conducted a gender rapid assessment in Nairobi’s informal settlement to understand the impacts of COVID-19 on men, women, boys, and girls. The assessment also aimed to ensure that a gender and social inclusion lens is mainstreamed in policies and COVID-19 interventions.

The findings suggest that coronavirus and the related containment efforts have caused a further increase in women’s and men’s UCDW workloads.

While men reported a greater increase in UCDW time-spent during COVID-19 (i.e., 1.7 hours as compared to 1.4 hours for women), it is still women who are performing more UCDW tasks before and during the pandemic.

To influence national discussions on COVID-19 impacts on UCDW, Oxfam partnered with key Kenyan...
government agencies and departments, UN Women, UNFPA, and CARE International to generate credible data through a national rapid gender assessment.

This new study mirrors the objectives of the Nairobi assessment. **Oxfam’s particular interest lies in understanding the UCDW patterns in the country and to use the findings for wider advocacy.** The assessment is ongoing.

The rapid gender assessment likewise informed Oxfam in Kenya’s participation in the global #HowICare campaign in June 2020. **For more information about the campaign, check page 3.**

**Oxfam in Kenya contributes to Oxfam International (OI) briefing paper on care**

The findings of the rapid gender assessment in Nairobi’s informal settlements were included in OI’s briefing paper, which presented findings from multi-country research conducted in the USA, Philippines, UK, Canada, and Kenya. **See page 17 for more info about this briefing paper.**

**Capacity building of feminist movements on UCDW**

Also in May 2020, the Women Rights Program Officer in Kenya served as a guest speaker in a webinar on UCDW during COVID-19.

The session which was organized by **FES Kenya** (Friedrich-Ebert-Stiftung) brought together feminists who have a keen interest in taking forward the discussion to influence UCDW policies in their respective spaces.

Both the HCS and the rapid gender assessment, as well as the lessons from the WE-Care programme, helped share the discussions.

This gathering was a step in building the capacities of Oxfam’s allies to advocate the 4R framework of care (i.e., recognition, reduction, redistribution, and representation) in Kenya and beyond.

**Oxfam in Kenya joins the National gender-based violence (GBV) working group**

To help address GBV concerns in the country, which have been laid bare by COVID-19 pandemic, Oxfam joined a national GBV Working Group along with civil society organizations and government departments.

Within a week of joining the forum, **Oxfam got an opportunity to influence COVID-19 home-based care guidelines.** Oxfam joined a technical committee that was tasked with improving the Ministry of Health guidelines.

The feedback from the Kenya team will go a long way to increase people’s awareness of UCDW (particularly caring for the sick), reduce care responsibilities for people who look after COVID-19 patients at home, increase government involvement in promoting redistribution of care, and address the gender issues that arise from the guidelines.

**For more information, write to Akuwam Ebenyo (AEbenyo@oxfam.org.uk).**
There’s no ‘pause’ button for care
The Coronavirus is highlighting just how essential care work is to our economy, health and survival. The idea that we are in an economic ‘shutdown’ is a misnomer. Huge amounts of unpaid care work are forcing many (mainly women) to work overtime at home—as “teachers”, “cleaners”, “cooks”, and “nurses”.

While many sectors have been scaled down or put on hold, we cannot similarly press ‘pause’ on the life-sustaining work that is currently holding up our households, communities, care homes and hospitals. It’s a telling thought experiment to think what would happen to projections of the world’s declining GDP figures if unpaid care work was included in GDP calculations, as feminist economists have long been arguing for (hint: Global GDP would increase by at least 8%).

Care and the fault-lines of inequality
The pandemic is exposing and exploiting existing gender and economic inequalities, which have for centuries marginalized and invisibilized women’s labour. In the words of an unpaid carer in the U.K., highlighted in Oxfam’s latest briefing paper, “We were invisible before, and now behind closed doors I think we are more so.”

These fault-lines run deep. Before COVID-19, heavy and unequal care responsibilities were already trapping women in time and income poverty and locking them out of public and political life, with women providing 12.5 billion hours of unpaid care work per day—three times more than men. In Bolivia, 42% of women say unpaid care work is the biggest obstacle to their political participation.

It has taken a global pandemic and nearly 250,000 deaths to spark public outrage in governments’ chronic...
underinvestment in health and social care infrastructure weakened by debt, austerity and regressive taxes, and for governments to consider care workers as ‘essential’.

Governments have been slow to recognize the needs of domestic workers— the majority of which are women and 90% of which do not have access to social security and half of which have no limits on their weekly hours—but quick to agree to massive bailouts for airlines and fossil fuel industries. Meanwhile, billionaires have profited to the tune of $308 billion since the start of the pandemic.

This is an inequality crisis as much as it is a public health crisis—and care is at the core.

Coronavirus and care: Pushing women further to the margins

Oxfam research has shown that women in rural areas of sub-Saharan Africa, already spend up to 4 hours a day collecting water.

Under COVID-19, women—particularly those living in poverty—are spending even longer hours on essential care tasks outside the home such as shopping at the market, getting medicine, or queuing for water—all which put them at higher risk of exposure to the disease.

With school closures, 320 million children will miss out on free school meals—it will likely be women who step up to fill this gap or risk having their children go hungry.

In low income countries 92% of women work in precarious and informal employment and among informal workers are overrepresented in sectors hardest hit by the pandemic. In addition, in many of these contexts, government-provided social protection and safety nets are limited or non existent.

READ THE FULL BLOG HERE

For questions, write to Amber Parkes (AParkes@oxfam.org.uk).
CARE WORK FOR AFRICA’S WOMEN AND GIRLS WAS ALWAYS TOUGH—COVID-19 HAS MADE IT TOUGHER

The COVID-19 pandemic is threatening the global development narrative of ‘leaving no one behind.’ This particularly, for the more than 420 million Africans who live below the global poverty line, many of whom are women and girls.

Invisible carers
This pandemic has laid bare what has for too long been invisible: the heavy weight of unpaid care and domestic work (UCDW) that women and girls provide to keep our households and societies functioning.

Across Africa, the imposed lockdowns have halted the operations of already fragile care services forcing women and girls to embrace additional responsibilities beyond their daily routines to support their families.

continued on page 15...
Poor government investment in care facilities has made the situation more challenging for African women and girls, especially with poor quality health facilities and costly services, which often discourage patients from seeking professional care.

Where a healthcare facility is present, the challenge of limited capacity surfaces, leaving women and girls with increased responsibilities to take care of the sick at home, further exposing themselves to the virus.

**Stalling progress on gender equality**

Even before the pandemic, it was already well documented that the unequal sharing of UCDW between women and men in the household, coupled with inadequate government investment in care services and infrastructure, was stalling gender equality across Africa and globally.

Education has been touted as a great equalizer. At the outset of coronavirus, it was estimated that more than 26 million girls in Ethiopia, Kenya, Uganda, and Zimbabwe alone would be affected by country-wide school closures. Many of these school-age girls will assume additional household responsibilities at the expense of time they should be spending on schoolwork. Photos by Aurelie Marrier d’Unienville/Oxfam

**UNPAID CARE AND DOMESTIC WORK IN AFRICA**

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

READ THE FULL BLOG HERE.

For questions, write to Leah Mugehera (Leah.Mugehera@oxfam.org).
As COVID-19 grips the world, market economies have shuttered, schools have closed, and nearly half of the global population is confined to their homes. Yet millions of care workers step out every day to keep the lights on and support those in need, for very low wages.

Majority of these care workers are women—nurses, community health workers, nursing home staff, sanitation workers, laundry workers, and others—whose work has been serially undervalued and underpaid. This highlights a fundamental contradiction in our political economy; that we’ve put the least value on work that is most critical for survival of our economies, systems, and society.

This paradox is equally stark within households. According to International Labour Organization ILO, women spend 4.1 times more time than men in Asia and the Pacific on unpaid care work which involves tending to others, cooking, cleaning, fetching water and firewood and other non-market essential daily tasks within households that go unremunerated.

In some countries, women end up spending 11 times more time than men on such tasks. This ‘invisible’ work contributes at least US$10.8 trillion a year to the global economy and encompasses both reproductive and productive work on which humanity and economies depend, and yet it has remained heavily ignored.

READ THE FULL BLOG AND THE AUTHORS’ RECOMMENDATIONS FOR THE IMMEDIATE AND LONG TERM.
New research by Oxfam and partners reveals that while COVID-19 and the related containment efforts have caused increases in women’s—and men’s—unpaid care workloads, women are still doing the bulk of this work.

Women living in poverty, single mothers, and essential workers—as well as those belonging to minority racial and ethnic groups—are being pushed furthest to the margins.

It shows the real consequences this has for the health, economic security and wellbeing of these women and their families with women reporting feeling more anxious, depressed, overworked or ill because of their increased unpaid care work.

Care work is essential to the healthy functioning of our societies and economies and must be better supported through policy and social norms change. Care work must be at the heart of a feminist COVID-19 recovery.

DOWNLOAD THE PUBLICATION HERE
IN EARLY JULY, WE-CARE HELPED ORGANIZE AN EVENT AS PART OF A SERIES OF CONVERSATIONS ON OXFAM’S WORK RESPONDING TO THE COVID-19 PANDEMIC.

The event aimed to highlight the impact of the pandemic on women and girls around the world, to share experience from Oxfam and our partners, and to advocate for women’s economic empowerment and unpaid care to be at the forefront of a just recovery from the pandemic.

We were joined by Magdalena Sepúlveda, Executive Director of The Global Initiative for Economic, Social and Cultural Rights and ex-UN Special Rapporteur on poverty and human rights. Magdalena talked about unpaid care as a critical human rights issue and essential to gender equality, sharing the experience of Latin America, and highlighting the need for policy responses to address issues of gender responsive fiscal policies—including reforms on tax systems alongside care-responsive policies and infrastructure.

Rita Aciro-Lakor, Executive Director of the Uganda Women’s Network, a WE-Care partner, talked about the organization’s approach to working on unpaid care and domestic work (UCDW), including innovative social media, campaigning, and advocacy to influence government reforms.

Thalia Kidder, Women’s Economic Empowerment Lead at Oxfam GB, talked about evidence from the WE-Care programme and recent Oxfam research, which has shown that the with the COVID-19 pandemic and lockdown, women and girls in five countries are facing increasing workloads. Across all five countries, almost half of women surveyed said they were feeling more anxious, depressed, overworked, isolated, or physically ill because of their increased UCDW workload during the pandemic.

With participation from corporate partners—such as Sainsbury’s, the Co-op, Burberry, and Unilever—and colleagues from DFID, Sida, and a host of others, we hope the event is the start of a conversation with our partners on the critical need for governments, companies, and civil society to ensure that a just recovery from the pandemic makes critical investments in care.

There is a great demand—and many opportunities—for evidence-based advocacy to push and accelerate governments’ and private sector’s commitments to a future path based on feminist thinking that makes care work visible, and a policy priority, listening to the voices of the most marginalized people in society, and building inclusive economies founded on the ethics of care.

LISTEN TO THE RECORDING OF THE WEBINAR HERE.
Before COVID-19, heavy and unequal unpaid care and domestic work (UCDW) was already trapping women in time and income poverty and locking them out of public life, with women providing 12.5 billion hours of unpaid care work each day—that’s three times more than men.

Now, during the pandemic, women across the world—particularly those living in poverty and from marginalized groups—are spending even more time on unpaid care, following the closure of schools, school feeding programs, and child care centres. This is having a huge impact on women’s time poverty.

OUR EVIDENCE
To better understand these impacts, we conducted a rapid phone survey in five of Nairobi’s informal settlements. These informal settlements are characterized by extreme poverty, precariousness, and informal work.

continued on page 20...
Our findings reveal that almost half of both women and men said their time on unpaid care and domestic work had increased significantly during the pandemic. Yet women were still spending far more time on care work than men, with women spending around 5 hours a day during lockdown, compared to 3.5 for men.

We found that the top 3 care tasks consuming women’s time during the pandemic are: (1) washing/cleaning/sweeping, (2) caring for or supervising children, and (3) collecting water.

We also looked at the impacts or opportunity costs of this increased time on unpaid care work for women and girls. A striking 62% of women compared to 38% of men said they weren’t able to do their usual paid work due to the increase in time spent doing UCDW. Further, 67% of women said that the increases in time spent on UCDW meant they were now not even able to look for paid work, while only 33% of men said the same.

**IMPLICATIONS OF THESE FINDINGS**

Clearly, women’s increasing unpaid care workload threatens to further entrench economic inequalities between women and men, leaving women with less time and choice to engage and remain in paid work—now and once lockdown lifts.

This underscores the importance of ensuring any employment or entrepreneurship initiative considers women’s time poverty before being rolled out.

For example, there are currently lots of exciting initiatives on digital accessibility to support women’s employment. But unless they consider time accessibility, they will at best fall short and at worst do harm.

**ROLES OF CIVIL SOCIETY, DEVELOPMENT ACTORS, AND DONORS**

First, they need to gather evidence to understand and mitigate the impacts of unpaid care work. Oxfam has developed a tool called the [Rapid Care Analysis](#) that assesses who in a community carries out unpaid care, so that where care work is heavy and unequal it can be recognized, reduced and redistributed.

Second, they need to invest in interventions that free up women and girl’s time, such as household water and time- and labor-saving equipment. Our research from Zimbabwe and the Philippines before COVID-19 shows that access to water can reduce women’s time on unpaid care by up to 4 hours. It also shows that women with new or improved water and laundry facilities spend around 1.3 hours more each day on paid work.

Third, they need to tackle social norms. This is a unique moment in history when more men are at home and doing more care work. It’s an opportunity to capitalize on positive shifts in attitudes and behaviors to support longer term social norms change towards a more gender equal society.

For questions, write to Amber Parkes (AParkes@oxfam.org.uk).
26-year-old Sarah is a resident of Kibuli, Kampala (Uganda’s capital, where she lives with her husband and their four children. Sarah sells fruit in front of a supermarket in Muyenga, one of Kampala’s affluent areas. She has been the sole income earner for the family for four years. For Sarah, the unpaid care and domestic work she does has increased considerably under COVID-19 restrictions.

‘Before, my children used to go to school early morning, and they were having lunch at school only returning later in

continued on page 22...
6 p.m. in order to beat the evening curfew and then start on the evening chores, including preparing supper, bathing the young children and helping them with their home studying. Most days, I sleep at 12 midnight after everyone else has gone to bed.’

Asked whether her husband helps with the care work at home, she says that he was not raised to do housework.

‘What really upsets me is going back home in the evening after vending and finding that even the chores I had left the older children to do, including their schoolwork, are not done because they have no adult reminding them, even when my husband is around.’

‘Getting to my business at 11 a.m. rather than 7.30 a.m. means losing out on potential morning customers. I also have to finish my vending by 11 a.m. rather than 7.30 a.m. means losing out on potential morning customers. I also have to finish my vending by

For more details, write to Charity Namara (Charity.Namara@oxfam.org). Photo by Sylvia Nankya Tracey/Oxfam
IN THE HATCLIFFE SUBURB, WE ARE SEEING PROGRESS—SHYLET

Shylet is a 43-year old Oxfam volunteer in the Hatcliffe Suburb in Harare, Zimbabwe. With passion to help fellow mothers in the suburb, she walks around Hatcliffe community to engage households to talk about unpaid care work issues at home.

‘Because of the scarcity of water here in our neighborhood of Hatcliffe, we are forced to go to boreholes at night and come back at dawn. After that, women start sweeping the yard, clean the house, do the dishes, and help their husbands prepare for work. Women simply bear most of the workload.’

As a care champion, Shylet goes around the community to teach families—through the support of Oxfam—to collectively help each other with the household chores. Besides the constructive sessions and workshops, households in the area were provided buckets, containers, and jerry to make their work easier.

‘We are now realizing that even boys should do the cooking, wash the dishes, and sweep the house—same as what girls do.’

Through our door-to-door campaigns as care champions, our male counterparts are also realizing that the traditional culture where men gather around and discuss community affairs while waiting for their wives to finish the chores was unfair. We are breaking the old mindset, and we are proud.’

For more details, write to Regis Mtutu (RMtutu@oxfam.org.uk).

Photo by Tavonga Chikwaya/Oxfam
ANNOUNCEMENTS AND OPPORTUNITIES

FOR MORE INFORMATION ON THE WOMEN’S ECONOMIC EMPOWERMENT KNOWLEDGE HUB WEBINAR SERIES (UPCOMING WEBINARS AND RECORDINGS OF PREVIOUS ONES), WRITE TO AISSA BOODHOO AT ABoodhoo1@oxfam.org.uk.

Our WEE Knowledge Hub Coordinator also compiles an up-to-date COVID AND GENDER RESOURCE LIBRARY that you can access through Box.

CHECK OUT OXFAM’S CORONAVIRUS INFORMATION CENTER. It’s a space where you will find all you need to know about our response to the Coronavirus pandemic: daily updates, program guidance, alphabet of links, FAQ, and more.

JOB OPPORTUNITIES AT OXFAM

• Advocacy Coordinator | APPLY NOW
• Gender Officer | APPLY NOW
• Humanitarian Programme Coordinator | APPLY NOW
• Consultant - Organizational Capacity Development & Systems Strengthening for Local Partners | APPLY NOW

FOR MORE INFORMATION ABOUT WE-CARE STORIES:
Contact Vin Aranas at MARanas@oxfam.org.uk
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