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GROWTH AND ECONOMIC OPPORTUNITIES FOR WOMEN (GrOW) – EAST AFRICA

FROM PROMISES TO ACTIONS:
SHIFTING GENDER NORMS AND PUBLIC PERCEPTIONS ABOUT UNPAID CARE WORK IN WORKPLACES AND FAMILIES IN UGANDA

ABRIDGED BASELINE REPORT

August 2022

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Funding: This research was done under the Growth and Economic Opportunities for Women (GrOW) – East Africa programme supported by International Development Research Centre (IDRC) Canada, Bill & Melinda Gates, and Hewlett Foundation.

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1. Introduction

Social and Gender Norms (SGNs) and unpaid care work are intrinsically linked. Global perceptions on SGNs have evolved with globalisation but remain entrenched in most societies at varying levels. The SGNs (Box 1) continue to shape unpaid care work. The 2030 Sustainable Development Goals (SDGs) demonstrate a need to address the negative SGNs that continue to derail women and girls' progress in the world of work. SDG 5 target 5.4 recognises unpaid care and domestic work and calls explicitly for monitoring the time spent on unpaid work (United Nations, 2015).

Box 1: Definition of social norms, gender norms and unpaid care work

1. *Social norms* are informal rules and shared social expectations that shape individual attitudes and behaviour (Arias, 2015; Marcus and Harper, 2015).
2. *Gender norms* are social norms that relate specifically to gender differences. A common gender norm, for example, is that women and girls will and should do most of domestic work (Marcus and Harper, 2015).
3. *Unpaid care work* refers to all unpaid services provided within a household for its members, including care of persons, housework and voluntary community work (Elson, 2000). These activities are considered work, because theoretically one could pay a third person to perform them.

- Unpaid = the individual performing this activity is not remunerated.
- Care = the activity provides what is necessary for the health, well-being, maintenance, and protection of someone or something.
- Work = the activity involves mental or physical effort and is costly in terms of time resources.

Source: Elson, 2000; Arias, 2015; Marcus and Harper, 2015

In Uganda, there needs to be impact evaluation research on the correlation between time use, unpaid care work, social norms, and economic well-being. Adopting the POWER model components, such as the use of Village Savings and Loan Associations (VSLAs), model men, model couples (SASA!), and community engagements, will foster the estimation of the impact of the model on shifting SGNs to address time spent and perceptions on UCW in communities and workplaces. This abridged report presents findings of the baseline study that establishes the status quo to set a benchmark for post-intervention evaluation. The objectives of the baseline survey were to:

i) Measure the extent and division of care work in households.
ii) Map out the social and gender norms and perceptions of UCW among men and women, boys and girls at the family and community levels.

The findings from the survey have informed the implementation of the POWER model interventions. They will support interventions by both state and non-state actors in designing appropriate avenues for addressing the 4Rs of the care economy, i.e. recognise, reduce, redistribute, and represent.

2. Approach

The theory of change for this study is highlighted in annex Figure 1A. In this regard, mixed methods (quantitative and qualitative) were applied at the baseline in the districts of Mbarara, Masindi, Mpigi, and Pallisa to understand care-related and social norms dynamics in households and communities. The quantitative approach, using a slightly modified Oxfam's Household Care Survey (HCS) tools, targeted women (wife), men (husband,) and children (boy and girls aged 8 years and above). The standard modules in these tools were time spent on unpaid care work and the social norms and perceptions about UCW. Out of the 1,600 randomly selected households (at least 100 households per parish), only 1,485 households had complete information. Analysis in this baseline is at the sample level and hence not weighted. However, results are presented by treatment type (Box 2) to see if randomisation at baseline and the treatment arms are balanced.

Box 2: The intervention categorization

Selected parishes were randomly assigned to either control or treatment groups within each sampled district for analysis. In this regard, the households/VSLA in the respective parishes would then automatically belong to the respective randomly assigned treatment parish.

Below is the categorisation and description of the interventions by treatment arm.

1. Control group (T0) - No intervention for this group.
2. Treatment 1 (T1) – Full 'POWER' Package: This category comprises households that will receive a full package POWER (individual and meso/macro-level) intervention. The full package of interventions will comprise training for married women and men separately; engaging men and boys to challenge GSNs and perception towards UCW, community dialogues, experts training and sensitization and policy engagement events.
3. Treatment 2 (T2) - 'PO' - Promoting and Organizing: This category households that will receive only household-level interventions. This will entail women in VSLA and husbands/partners of the participating women members.
4. Treatment 3 (T3) – 'WER' – Working, Engaging and Reaching out: This category will receive community level interventions involving the identification of champions of change (who could in turn form community action teams); and advocacy arm to include civil society organizations and Community-based organizations. It will involve policy engagement meetings and round table discussions with the key policy actors in the relevant government MDAs, CSOs, Private sector and Media, among others.

In the qualitative approach, Focus Group Discussions (FGDs) and Key informant Interviews (KIIs) were conducted to complement the quantitative findings in selected study districts. These were conducted with adults and youth/adolescent community members at a community level. While the KIIs unstructured interviews targeted district and sub-county officials and local, cultural, and religious leaders. The interviews helped to contextualise the nature of social norms when these manifest among whom, the

key influencers, factors that keep them in place, and how interpretations of these social norms influence policy and practice. In this regard, 25 FGDs (12 for males and 13 for females) and 31 KIIs (17 males and 14 females) were conducted.

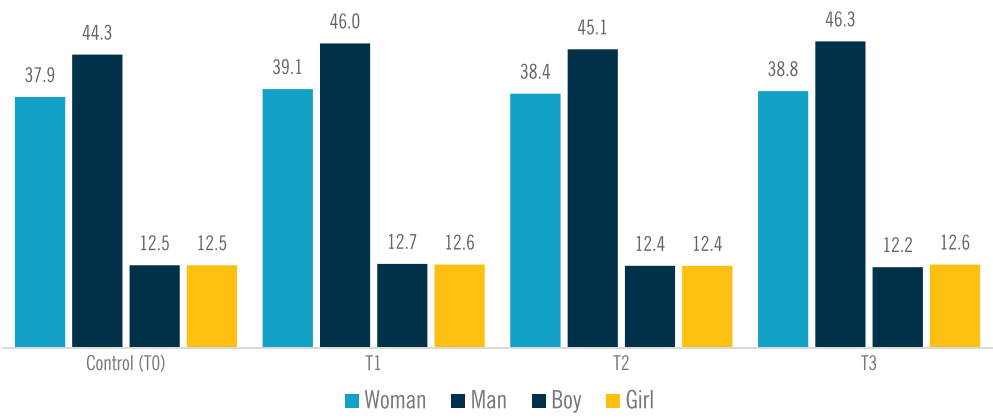
3. Summary of findings

In line with this study's vital outcome measurement indicators, the findings of the baseline survey in this report cover issues regarding time spent on unpaid care activities and societal perceptions concerning unpaid care work. The essence of the baseline is to show that balance in treatment groups has worked. After our interventions, the endline results/shifts can be attributed to the interventions this project put in place, controlling for all other aspects within these communities/parishes. The baseline survey also provides contextual information about the study participants.

1. Persons that included women, men, and children across the districts for treatment and control groups have no significant differences regarding their ages and education levels. Specifically, the average age for women was 38 years, for men -45 years, and for children- boys and girls, 12 years old (Figure 1). This implies that we will compare people by gender with similar age groups across treatments and control groups.

Concerning education levels, no significant differences in educational attainment among women, men, boys, and girls between most of the control and treatment parishes for persons with no formal education attained some primary and completed primary education levels (see detailed report). On average 41 percent of the women had some primary education while 15 percent had completed at least O'level compared to 22 percent among men. However, significant statistical differences were observed with

Figure 1 Mean age distribution by sex



Source: EPRC's computations using baseline survey, 2021

higher education attainment for most of the categories.

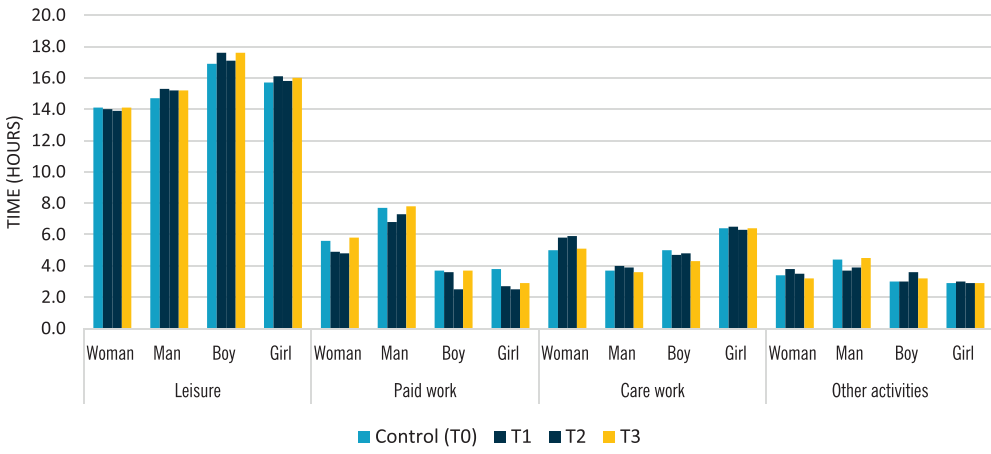
2. Time use on primary activity: Figure 2 summaries time spent in 24 hours on primary activities while annex Table A.1 shows the details by treatment arm to ensure at the endline this dynamic is understood. More specifically, baseline results show that:

a. *Leisure and other activities*: No statistically significant differences between the control and treatment arms and within treatment parishes on time spent on leisure and other activities. The findings show that most time is spent on leisure and resting for both men and women. On average, women spend 14 hours on leisure and resting activities while men 15 hours, boys 17 hours and girls almost 16 hours.

b. *On paid work* - there are statistically significant differences between T1 and T0 and T1 and T3 for men; between T2 and T0, T1 and T3 and T2 and T3 for women. On average, men spend more time on paid work (7.4 hours) than women (5.3 hours) and children (about 3 hours).

c. *Concerning care work*- among women, there are statistically significant differences between T1 and T0, T2 and T0, T1 and T3, T2 and T3, and T3 and T0 for boys. Notably, there are no significant statistical differences regarding the care work by both men and boys. On average, women spent about 5.5 hours, men 3.5 hours, boys - 4.6 hours and girls 6.4 hours on care and domestic work. This affirms other studies that have found that women and girls spend more time on care activities while men and boys spend more work on paid activities (UWONET & OXFAM, 2018; UBOS, 2018; UNICEF, 2020).

Figure 2 Time use of household member on primary activity (hours)



Notes: Care work defines caring for people and domestic work; other activities include education, community activities and other activities
Source: EPRC's computations using baseline survey, 2021

3. Social norms and perceptions: Unpaid care work solutions are centred around societies, communities, and families being cognizant of the 4Rs (Recognition, Reduction, Redistribution, and Representation).

Recognition: This is captured in terms of who contributes more to household-specific welfare activities. Key insights from the baseline survey revealed that women and men viewed contribution to the welfare of the families/households more in monetary terms than physical. Implying that unpaid care would not be recognised as a contribution even though women would take care of the sick, look for food and educate their children on behaviours- all of which cannot be monetised. Baseline quantitative results reveal that on average, about 62 percent of women respondents across treatment arms indicated that the *husband or other man* in the household contributed more to welfare while the wife or other woman in the household contributing about 31 percent. Almost 70 percent of male respondents named themselves or another man in the household to have contributed more to welfare compared to a wife or other woman—less than 25 percent on average (Table 1). Specifically, the women recognised that a wife or other woman contributes more to food than the household's husband; 51 percent of women indicated so. Across treatments, the recognition by women on welfare contributions was not statistically different other than on education in the control group and on medical bills in treatment 2.

Table 1 RECOGNITION-Who in the household makes the most significant contribution?

	Control (T0)	POWER (T1)	PO (T2)	WER (T3)
	percent	percent	percent	percent
Panel A: Response by woman				
a. Education				
Wife or other woman in the household	20.2	21.7	20.5	22.7
Husband or other man in the household	72.6	65.7	65.6	63.6
b. Food				
Wife or other woman in the household	45.3	52.3	52.6	50.7
Husband or other man in the household	52.8	46.9	43.7	45.5
c. Medical Bills				
Wife or other woman in the household	22.6	24.6	19.6	22.5
Husband or other man in the household	74.0	71.1	73.7	71.5
Average woman response across welfare items				
Wife or other woman in the household	29.4	32.9	30.9	32.0
Husband or other man in the household	66.5	61.2	61.0	60.2
Panel B: Response by man				
Wife or other woman in the household	32.2	19.9	23.1	24.6
Husband or other man in the household	65.2	74.0	69.0	70.6
Total number of households (N)	358	350	357	365

Notes: Responses for women were averaged over 3 welfare items i.e. education, food and medical bills while responses for men were general.
Source: EPRC's computations using baseline survey, 2021

The qualitative interviews and group discussions reveal that across the 4 study sites, women and girls do most of work at home than the boys and men. The gender division of care work is associated with women and men's identity linked to feminine traits (caring, nurturance and responsiveness, accommodating, emotional) and masculinity traits (strength, aggression, and outward among others) respectively. In this regard, domestic care work is predominantly done by women and girls while work that requires strength, such as splitting firewood, fetching water, construction, is often done by men as this voice from one of the study areas testifies;

> *Women do the cooking, cleaning the house, then sweeping the compound is usually done by children if you have them at home, and then the man does the work that brings in money like for fees, yes. Majorly the unpaid care work is for women and children. Men do work that requires strength…* (KII, Male Cultural leader, Bunyoro Kingdom, Masindi)

It was observed that only in families where there are no girls, boys engage in work that is perceived as women's work such as cooking, cleaning the homestead, childcare and care for the sick. Men are expected to engage in income-generating activities outside the home to provide for the family, a role women have taken on together with domestic care work. The current narrative across all the district is that men have left their roles to women.

Both men and women recognised that the most problematic domestic work and unpaid care activities were fuel collection, as reported by 39.7 percent of women and 41 percent of men followed by water collection-24.9 percent of women and 23 percent of men while caring for children- 11.5 percent of women and 14.3 percent of men reported these as problematic. Across treatment arms, the problem was cited by 45.5 percent of women and 51.2 percent of men in T1 and 48.7 percent of women and 54 percent of men in T2 on fuel collection. This reveals a common understanding in recognising the top three problematic domestic work and care activities by women and men.

Reduction through Time- and labour-saving equipment and support services: Quantitative findings indicate no significant differences between the control and treatment arms in asset ownership. We found statistical differences between treatment and control parishes in the proportion of households that own water, fuel, food preparation and clean clothes in broader categories. Specifically, significant differences exist in the reservoir, water in the compound, shower, toilet, solar system, flask for liquids, refrigerator, suitcase, flatiron, and basins. The findings show that well-to-do homes found in more urbanised parishes had more assets and equipment that would reduce time spent on care and domestic work compared to households in parishes that were majorly rural. However, note that analysis was not at level of residence.

Infrastructure and services, especially social ones (such as electricity use, an improved water source, and health facility) were available in similar proportions across the control and treatment parishes. However, availability didn't imply that time spent to access the services was uniform, such as walking

to the water source and distances to the marketplace. For instance, the women in the treatment parishes T2 are more likely to take more than 13 minutes to fetch water from the water source than their counterparts in the control parishes. Similarly, women in the control parishes were 11 percent more likely to report electricity usage than their counterparts in the treatment parishes. Generally, childcare services were almost not available and not significantly different in all parishes, nonetheless the use of childcare services where these were available were significantly different between T2 and T3. Qualitative findings support this narrative. Participants in FGDs revealed that there are a few services in the communities that are related to UCW.

> *"Here in the district, they have ensured every village has a water source. Like they have wells, boreholes and there is Water Trust which is doing that but in partnership with the district in order to identify areas which are in need other than duplication of the services."* (KII Labour Officer and CDO Masindi)

Services especially water, energy saving stoves and electricity are available though they have yet to be fully availed in the districts' rural areas. Though these services help reduce the burden of UCW, participants reported that the services have not been fully availed. Participants reported that water is available in urban areas but has yet to be fully connected in rural areas. One said that:

> *"And electricity is also not available here. There was also an energy-saving stoves programme that had started. NGOs are doing that but I have not seen them around here. I have not seen them come to teach us or anything."* (KII Religious leader Mbarara)

Redistribution: domestic care and unpaid work activities are distributed based on underlying perceptions (shaped by norms) about who does what by gender. Empirical estimations using a constructed perceptions index reveal that the perception index for women ranges between 0.24 – 0.26, and 0.17 – 0.18 for men across the treatment groups (Table 2). The index was significantly higher

Table 2 Perception index

	Treatment arms				tt-tests					
	Control (T0)	T1	T2	T3	T1-T0	T2-T0	T3-T0	T1-T2	T1-T3	T2-T3
	Mean	Mean	Mean	Mean						
Woman	0.22	0.26	0.24	0.25	0.04***	0.02	0.02	-0.02	-0.01	0.001
	(358)	(350)	(357)	(365)	(3.60)	(2.07)	(2.19)	(-1.54)	(-1.44)	(0.11)
Man	0.18	0.17	0.17	0.18	-0.01	-0.001	-0.0002	0.005	0.006	0.001
	(345)	(331)	(342)	(357)	(-1.02)	(-0.16)	(-0.04)	(0.85)	(0.99)	(0.13)

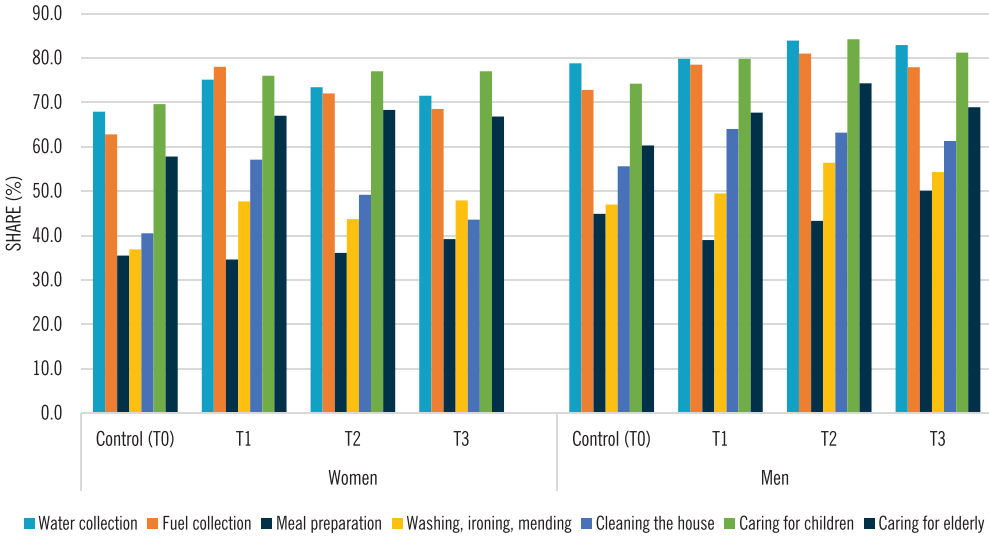
Notes:
1/3: T1-POWER; T2-PO; and T3-WER. T_i-T refers to the difference in treatment means
2/3: In the parenthesis are Number of households and t-tests
3/3: *, **, and *** indicate significance at the 90 percent, 95 percent, and 99 percent confidence intervals, respectively
Source: EPRC's computations using baseline survey, 2021

for women in T1 parishes than their counterparts in the control parishes. There were no statistically significant differences in the perception index for men across all the treatment parishes. The average index is smaller among men (0.17) than women (0.24), implying that GSN are entrenched more among men than women.

More specifically, baseline results from quantitative analysis indicate no statistical difference between the control and treatment parishes in how domestic work and unpaid care activities are distributed for both men and women (Figure 3). The few differences in domestic and UCW only exist in fuel collection, washing, ironing, and mending, cleaning the house and caring for the elderly. For instance, women in households in treatment parish T1 are 10 percent more likely to engage in fuel collection than those in treatment T3. Similarly, women within treatment parishes T3 are 14 percent more likely to clean the house than their counterparts in T1.

While men in the T2 treatment parishes are 10 percent more likely to care for children than their counterparts in control parishes. Similarly, men in the T2 treatment parishes are 14 percent more likely to be involved in caring for the elderly than their counterparts in T0. Within the treatment parishes, men's engagement in UCW seems similar except for meal preparation. Men in the treatment parishes T3 are 11 percent more likely to prepare meals than those in T1. Key insights show that while women and men engage in similar domestic and unpaid care activities, the difference is brought out when the time element spent on such activities is factored in (see Figure 2 and annex Table A1).

Figure 3 Division of household domestic and unpaid care activities by gender



Notes: The percentages are mutually exclusive by gender. T1-POWER; T2-PO; and T3-WER.
Source: EPRC's computations using baseline survey, 2021

The clear distribution of domestic and care activities is deeply entrenched in women's and men's mindsets. As quantitative results also show, most of the respondents indicated that there were tasks that women were better at than men—99 percent, while also the reverse was true—97 percent (annex Table A.2). The tasks that were considered better at by women by both women and men respondents were, meal preparation, caring for children and cleaning the house/compound. While again, both men and women said that tasks such as house construction/repair, taking care of farm animals and carpentry/making furniture were done best by men compared to women.

The evidence above is supported by the data from the qualitative interviews and FGDs on unpaid care work for women, girls, men, and boys (Table 3). Participants indicated that if men or boys are seen engaging in UCW, it would be perceived as funny, strange, shameful, and unacceptable behaviour attracting ridicule and a sign of poor upbringing not aligned with typical behaviour in the community. For example, in Masindi district, one of the key informants observed.

> *"Women do the cooking, cleaning the house, then sweeping the compound is usually done by children if you have them at home, and then the man does the work that brings in money like for fees, yes. Majorly the unpaid care work is for women and children."* (KII, Male Cultural leader, Bunyoro Kingdom, Masindi)

While the youth in Pallisa observed;

> *"Just imagine finding your father with a mingling stick cooking "kalo" [local millet bread], it is very funny! It doesn't make sense. That is what we have grown up seeing and [we] were made to believe that some work is meant for girls".* (FGD Male Youth Pallisa)

> *"If need arises, a man can do it [UCW]. It also depends on the home where you grew up from. Many people have grown up in homes with only boys, will you just sit and not sweep the compound or do dishes? It doesn't make sense. For us at our home we had just two girls but by the time we were growing up they were too young to do anything, meaning that we had to do all the work. We mingled, swept the compound etc."* (FGD Male Youth Pallisa)

A female key informant also shared that:

> *"There are people who feel if a man entered the kitchen and began cooking, he now gets another name, they say he is there to count the pieces of meat and interfere with a woman's work. So, the kitchen is a no-go area for men, but you can do other work like picking firewood or sweeping the compound, ferrying water that should ideally be done".* (KII Female Gender Focal Person Pallisa)

Table 3 Typical domestic work associated with women, girls, boys, and men

Typical work	Masindi		Mpigi		Mbarara		Pallisa	
	Girls/ Women	Boys/ Men	Girls/ Women	Boy/ Men	Girls/ Women	Boy/ Men	Girls/ Women	Boys/ Men
Preparation of and serving meals for the family -children, husband, and other members in the household	√	√[1]	√		√		√	√[2]
Fetching water	√	√	√	√	√	√	√	
General cleanliness of the home (mopping, sweeping/cleaning the compound, house, toilet etc)	√		√	√[3]	√		√[4]	
Washing utensils/dishes	√		√		√			
Digging/Gardening and weeding G-nuts, beans	√		√		√	√[5]		√
Collecting firewood	√					√	√	
Attending to the sick	√							
Caring for children (feeding, bathing)	√				√		√	
Caring and serving the husband -take water for bathing for the man	√		√		√		√	
Washing clothes/ironing clothes	√		√		√		√	
Putting things in order	√							
Weeding maize		√						
Grazing animals (goats, cows, sheep etc)		√		√	√	√		
Splitting logs/firewood		√						
Distributing work and supervising/training children	√		√		√		√	
Going to the market to buy food					√			
Operating a family business - grocery shop					√			
Constructing the family shelter, toilets						√		
Slashing the compound						√		
Milking						√		
Providing Sex							√	

Source: SWGS-MAK, qualitative baseline survey, 2021

1 Cooking in a family of only boys
2 Cook and fetch water for crippled wife
3 For boys
4 Cleaning the house (smearing cow dung)
5 Working in the plantation, cutting the banana suckers

Furthermore, qualitative engagements noted that the unequal distribution of UCW was primarily attributed to cultural beliefs that regard domestic and care work as a women's tasks as several participants noted;

> *"Cultural beliefs have contributed a lot to unequal distribution of care work because very many people in our communities still believe in those traditional cultural ways of domestic work being a woman's task and not a man".* (FGD, Male Youth Masindi)

> *"The Banyankole believe that the woman stays home and does the work at home. When a man marries a woman that works outside home, people believe that that home will be broken and they will expect the woman to sit at home and do the UCW".* (KII Female Religious leader, Mbarara)

> *"Men as heads of families think it's culturally accepted that a woman must cook, you can never tell a man to cook. He will be like since the great grannies, men used not to cook…, culturally since we know that it's the woman to cook. Even the child grows up knowing that it's the mother to cook. Even when he marries, it's the wife to cook. Do you think when that child grows up will help the wife in future? What he sees is what he takes as it should be. So, children do what they see their parents do. More so for the children from drunken families, the father goes for ludo and when he comes back for lunch, should he find when the food is not ready, then the wife may be beaten."* (KII VSLA Mpigi)

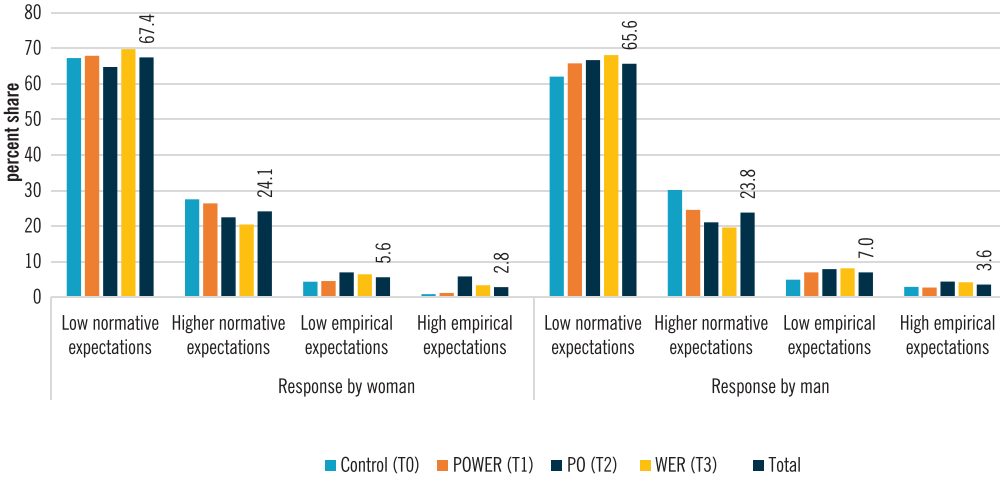
> *"Since the man is the head of the family, basically culture doesn't expect him to engage in this kind of work, but the woman must… women are seen to be responsible for UCW."* (KII Cultural Leader, Bunyoro Kingdom, Masindi)

So, an ideal woman is believed to not work outside the home environment or her home and community. It is believed in the community that if a man is engaging in domestic and care roles designated for women, he is not normal and must have been bewitched.

> *"When a man is too engaged in unpaid care work at home, at the end of the day, people will say that the woman bewitched him because he is the one in charge of taking care of the children".* (KII, Female Opinion leader Mbarara)

Evidence from hypothetical scenarios or stories further show the depth of gender and social norms at community level. From Figure 4, **m**ajority of the respondents irrespective of gender – 67.4 percent of women and 65.6 percent of men – approved of a vignette that depicted low normative expectations in which **few men** in the village were undertaking caring for people and domestic work and at the same time **few people** did say that men should do caring for people and domestic work.

Figure 4 Share of women and men in the samples who approved of vignette describing (a) a gendered division of care work and (b) shared responsibilities



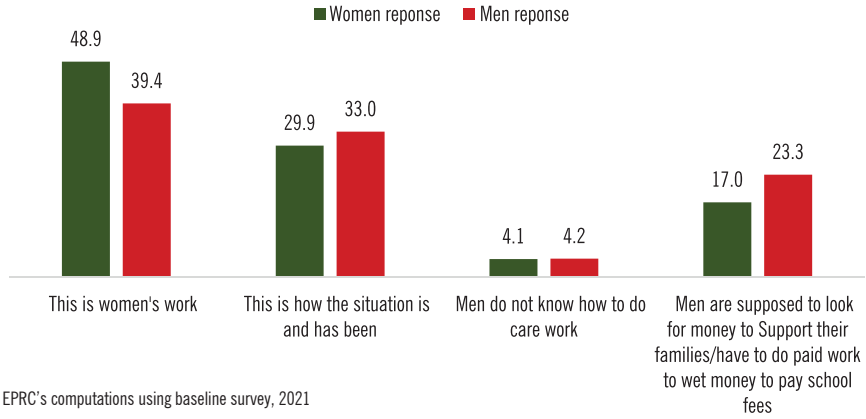
Source: EPRC's computations using baseline survey, 2021

This trend was not any different from the qualitative evidence in which most participants, young and old, concurred with the low normative expectation that few men in their village now do caring for people and domestic work, and at the same time, few people say that men should do caring for people and domestic work. For instance, the male youth noted;

> *"We have few men that are doing it. Few people also support it. For us we are in the village and a man is a man unlike in the urban areas where men are more comfortable to do housework. It is okay among the whites unlike us Africans, a man is taken as a small god. A*

Interestingly though, from Figure 5, most women respondents—48.9 percent report that the high low normative expectations findings in their communities, as shown by Figure 4 above, is because caring for people and domestic work was a woman's work compared to men respodents-39.4 percent. There are also men-33 percent who said that the scenario depicted is because that is how the situation is and has been in their communities. This depicts an element of behaviour that has transcendent generations. Also, there are women and men, on average at 4 percent who indicate that men do not know how to do care work and hence expected to look for money to look after their families—23.3 percent. Such expectations and views on UCW indicate that changing gendered work divisions to favour shared responsibilities around unpaid and domestic work will require tackling the mind-sets of many communities, and champions and discussing customs in detail to change the norm, with women at the core.

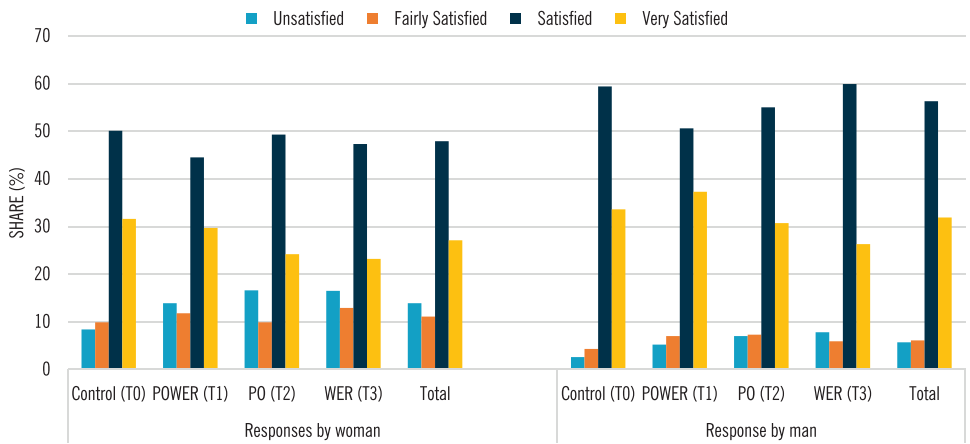
Figure 5 Share of respondents on why the scenario painted by the vignettes is like that in their communities



Source: EPRC's computations using baseline survey, 2021

Representation: Here, insights into this measurement are seen in terms of satisfaction with how domestic and unpaid care activities are divided within the home. On average, women were less satisfied with the division of domestic work and care activities. About 13.9 percent of women compared to 5.7 percent of men were unsatisfied with the division of domestic work and care activities in their households—this is an 8.2 percentage point difference in dissatisfaction (Figure 6). There were no significant differences in this response within treatment parishes; however, differences were observed between control and treatments parishes. Men were satisfied and very satisfied with the division of work compared to women. The key takeaway is that more needs to be done to bring men on board in appreciating and participating in domestic and unpaid care work as women are feeling the pinch in this uneven share of this burden but are not saying it openly due to cultural and societal norms along gender lines on who does what.

Figure 5 Satisfaction with division of household labour for women and men, %



Notes: The percentages are mutually exclusive by gender. T1-POWER; T2-PO; and T3-WER.
Source: EPRC's computations using baseline survey, 2021

***Women's decision-making*:** This is a form of empowerment; hence, the outcomes represent a woman's position in a home and over herself. Only women respondents were asked during the survey which domains they felt they needed more control over in decision-making in their households. Baseline quantitative results show that 30 percent of women would make decisions about own health when to go to the doctor, 29.7 percent made decisions on how they spend own time while 27.6 percent were empowered to decide on how many children to have and spacing of children (Table 4). Women's decision making was even lower concerning issues of monetary nature (taking a loan, engaging in productive/paid activities, large purchases).

Table 4 Women's decision making by treatment, %

Indicator	Control (T0)	POWER (T1)	PO (T2)	W E R (T3)	Total
Decisions about children's schooling and health	21.7	31.8	22.7	28.3	26.1
Decisions about your own health and when to go to the doctor	33.6	33.0	28.0	28.6	30.8
Small daily purchases (e.g. food, toiletries)	30.4	18.5	23.9	18.5	22.8
Large purchases (e.g. land, cattle, cell phone)	19.1	25.5	19.0	19.3	20.7
How many children to have and spacing of children	34.2	27.0	25.9	23.5	27.6
Whether to take out a loan	20.3	22.4	16.9	17.4	19.2
Decisions about whether to visit relatives or travel	30.7	20.6	24.8	24.4	25.2
Decisions on how I spend my own time	33.9	23.6	28.9	32.2	29.7
Which family members should do domestic tasks, like sweeping, collecting water or caring for children	32.5	18.8	24.8	29.1	26.4
Which family members should do productive/paid activities, such as agriculture work, farm animals, or trading	15.9	13.9	16.9	15.4	15.6
Other	18.3	16.4	19.5	18.8	18.3

Notes: T1-POWER; T2-PO; and T3-WER.
Source: EPRC's computations using baseline survey, 2021

4. Unpaid care work and well-being: Wellbeing in the survey was measured if the respondent indicated to have suffered from any injury, illness, disability or other physical or mental harm because of undertaking unpaid domestic work or caring for people. Generally, the data shows that unpaid care work had similar effects across the control and treatment arms, except for back/joint aches, fatigue, and digestive problems, where statistically significant differences exist. More specifically, women in the treatment parishes T0 were 10 percent less likely to suffer back joints because of domestic and UCW than their counterparts in the treatment parishes T3. Similarly, women in the treatment parishes T1 were 11 percent more likely to report fatigue due to domestic UCW than those in the control parishes T0. Within the treatment parishes, women in T2 were 12 percent more likely to suffer back joints than those in treatment parishes T3. Furthermore, there were differences in the level of concerns about UCW causing injuries in the future among women in the control and treatment arms. For instance, women in the treatment parishes T1 were 9 percent less likely to be very concerned about having injuries from

UCW than their counterparts in the control parishes T0.

5. Unpaid care work and women's economic empowerment: The findings clearly showed that UCW limits women's time for formal employment and leads to low productivity. Similar effects were reported to affect participation in informal work e.g. business. While women combine UCW with paid work, men have increasingly neglected their gender roles to engage in paid work leaving it all to women.

4. Conclusion and implications

The clustering of the RCT by the 4 treatment arms successfully created equivalence in observable individual characteristics between control and treatment parishes. Though some differences were observed in demographic characteristics, the statistical power was low. Furthermore, analysis of specific indicators such as education level, primary activity, asset ownership, perceptions on the division of unpaid and domestic work, time use (hours), infrastructure, and well-being undertaken by treatment category presented more insights on the level of effects of the underlying factors that help in recognising, reducing, and redistribution of UCW and the SGNs that surround such divisions/roles towards such work. We find encouraging results in which most indicators were not statistically significant across and between treatments and the control parishes. However, where they are significant, district level environment and location probably explain some of these findings. In the final analysis, district level fixed effects will be controlled for.

The Research team plans to collect the endline data one year after the intervention commences, probably in September-October 2023. This will again include collecting men, women, and children's data on time use and perceptions surrounding UCW. Similar tools applied at the baseline will be used.

References

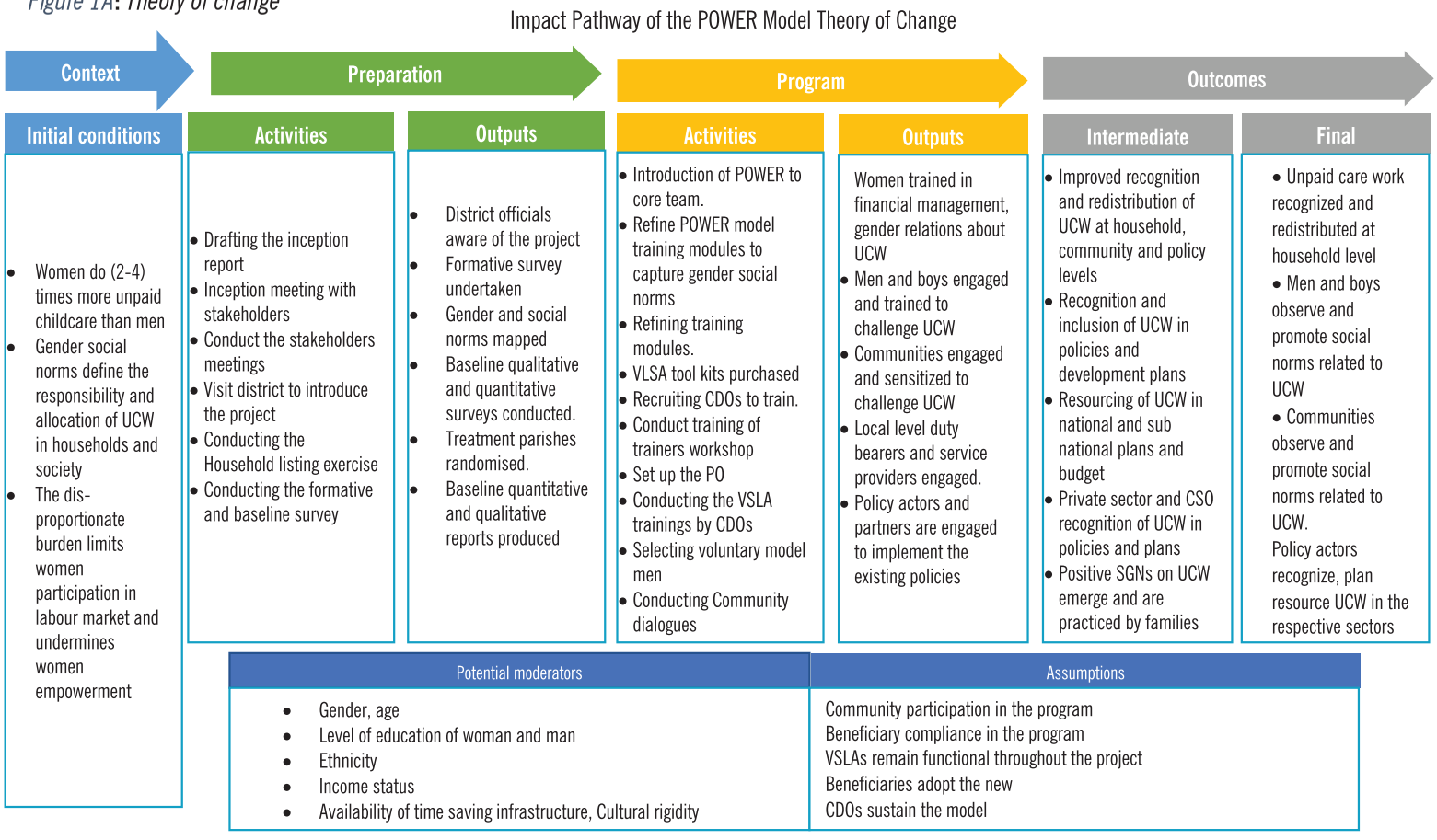
Uganda Bureau of Statistics (UBOS) (2018). The National Labour Force Survey 2016/17 – Main Report, Kampala, Uganda.

UWONET, & OXFAM. (2018). Gender Roles and the Care Economy in Ugandan Households. The case of Kaabog, Kabale and Kampala districts

UN (2015). UN. (2015). Transforming our world: The 2030 agenda for sustainable development [Resolution adopted by the General Assembly].

Annex

Figure 1A: *Theory of change*



Source: Authors' own construction, 2022

Table A1: Time use of household member on primary activity (hours)

	Treatment arms								tt-tests					
	Control (T0)		T1		T2		T3							
Characteristics	Mean	N	Mean	N	Mean	N	Mean	N	T1-T0	T2-T0	T3-T0	T1-T2	T1-T3	T2-T3
Leisure														
Woman	14.1	356	14.0	349	13.9	355	14.1	364	-0.15	-0.26	-0.05	-0.12	-0.09	-0.21
									(-0.75)	(-1.38)	(-0.28)	(-0.62)	(-0.48)	(-1.10)
Man	14.7	344	15.3	331	15.2	342	15.2	356	-0.62	-0.44	-0.43	-0.18	-0.18	-0.01
									(-2.40)	(-1.73)	(-1.72)	(-0.68)	(-0.72)	(-0.03)
Boy	16.9	221	17.6	208	17.1	208	17.6	202	-0.71	-0.24	-0.70	-0.47	-0.002	-0.46
									-(2.13)	(-0.72)	(-2.10)	(-1.38)	(-0.01)	(-1.37)
Girl	15.7	220	16.1	222	15.8	235	16.0	256	-0.40	-0.10	-0.30	-0.30	-0.10	-0.20
									(-1.36)	(-0.33)	(-1.06)	(-1.05)	(-0.35)	(-0.73)
Paid work														
Woman	5.6	250	4.9	229	4.8	245	5.8	254	0.63	0.73*	0.24	-0.10	0.87**	0.97***
									(2.28)	(2.68)	(0.89)	(-0.35)	(3.16)	(3.58)
Man	7.7	280	6.8	272	7.3	283	7.8	276	-0.92**	-0.47	-0.10	0.44	1.02**	0.58
									(-3.03)	(-1.58)	(-0.34)	(1.46)	(-3.35)	(-1.92)
Boy	3.7	83	3.6	71	2.5	76	3.7	76	-0.16	-1.18**	-0.06	-1.02**	0.09	1.11**
									(-0.45)	(-3.38)	(-0.19)	(-2.81)	(0.26)	(3.12)
Girl	3.8	45	2.7	45	2.5	67	2.9	77	-1.07	-1.30*	-0.9	-0.23	0.17	0.40
									(-2.09)	(-2.79)	(-1.98)	(-0.50)	(0.37)	(0.99)
Care work														
Woman	5.0	331	5.8	334	5.9	334	5.1	335	0.86***	0.90***	0.12	0.04	-0.74**	-0.78***
									(3.84)	(4.00)	(0.52)	(0.16)	(-3.33)	(-3.49)
Man	3.7	122	4.0	153	3.9	145	3.6	120	0.26	0.21	-0.10	-4.00	-0.35	-1.03
									(0.87)	(0.71)	(-0.31)	(-0.16)	(-1.19)	(-1.03)
Boy	5.0	202	4.7	189	4.8	199	4.3	190	-0.29	-0.16	-0.63*	0.13	-0.35	-0.47

Characteristics	Treatment arms								tt-tests					
	Control (T0)		T1		T2		T3							
	Mean	N	Mean	N	Mean	N	Mean	N	T1-T0	T2-T0	T3-T0	T1-T2	T1-T3	T2-T3
									(-1.20)	(-0.68)	(-2.64)	(0.53)	(-1.42)	(-1.96)
Girl	6.4	217	6.5	218	6.3	230	6.4	244	0.10	-0.15	-0.02	-0.25	-0.12	0.13
									(0.41)	(-0.63)	(-0.08)	(-1.05)	(-0.51)	(-0.57)
Other activities														
Woman	3.4	134	3.8	106	3.5	123	3.2	130	0.34	0.11	-0.23	-0.23	-0.58	-0.34
									(0.98)	(0.33)	(-0.70)	(-0.66)	(-1.64)	(-1.01)
Man	4.4	128	3.7	109	3.9	101	4.5	122	-0.76	-0.54	0.05	0.22	0.80	0.58
									(-1.79)	(-1.24)	(0.11)	(0.49)	(1.88)	(1.33)
Boy	3.0	86	3.0	65	3.6	77	3.2	59	-0.02	0.62	0.25	0.64	0.27	-0.37
									(-0.05)	(1.70)	(0.63)	(1.63)	(0.64)	(-0.92)
Girl	2.9	96	3.0	68	2.9	108	2.9	90	0.09	-0.03	-0.07	-0.12	-0.16	-0.04
									(0.32)	(-0.12)	(-0.26)	(-0.43)	(-0.55)	(-0.16)

Notes: Care work defines caring for people and domestic work, other activities include education, community activities and other activities
1/3: T1-POWER; T2-PO; and T3-WER. T_i-T refers to the difference in means
2/3: In the parenthesis are t-tests
3/3: *, **, and *** indicate significance at the 90 percent, 95 percent, and 99 percent confidence intervals, respectively

Source: EPRC's computations using baseline survey, 2021

Table A.2: PERCEPTIONS_ Tasks that women/men are naturally better at than men/women, percent

	Responses by woman					Responses by man				
	Type of treatment					Type of treatment				
	Control	POWER	PO	WER	Total	Control	POWER	PO	WER	Total
Panel A: Tasks that women are better than men										
Are there tasks that women are naturally better at than men? 1 if yes	*99.4*	*99.4*	*98.8*	*99.7*	*99.3*	*99.4*	*98.5*	*98.5*	*99.2*	*98.9*
Meal preparation	**97.4**	**96.0**	**94.4**	**95.8**	**95.9**	**96.5**	**97.2**	**95.8**	**93.2**	**95.7**
Planting/harvesting crops	26.2	22.9	25.1	24.2	24.6	19.0	16.9	20.5	15.5	18.0
Cleaning the house/compound	**71.4**	**73.2**	**68.4**	**73.5**	**71.6**	**71.1**	**69.2**	**59.1**	**66.7**	**66.5**
Drying/ processing agricultural produce	4.7	8.8	6.2	5.9	6.4	4.1	7.1	3.3	4.5	4.7
Caring for children	**79.6**	**82.3**	**80.8**	**78.9**	**80.4**	**85.4**	**83.1**	**84.0**	**78.8**	**82.8**
Carpentry/ making furniture	0.9	1.2	1.5	1.1	1.2	0.6	0.6	0.3	1.1	0.7
Caring for elderly/ill/disabled	12.5	15.9	11.5	9.9	12.4	12.2	14.8	6.8	10.2	11.0
House construction/repair	1.5	1.5	1.2	1.4	1.4	0.6	1.5	0.6	1.1	1.0
Fuel or water collection	32.7	38.7	34.8	30.4	34.1	32.1	36.3	32.3	30.2	32.7
Selling products/trading	6.7	8.5	8.0	7.6	7.7	5.2	4.9	4.2	7.3	5.4
Taking care of farm animals	3.2	8.8	7.1	7.0	6.5	3.5	5.2	5.9	8.2	5.7
Washing, ironing, mending clothes	**70.6**	**77.7**	**64.6**	**71.8**	**71.1**	**63.6**	**70.8**	**61.7**	**65.0**	**65.2**
Others	3.5	1.5	3.5	2.5	2.8					
Panel B: Tasks that men are better than women										
Are there tasks that men are naturally better at than women? 1 if yes	*95.1*	*96.7*	*98.0*	*96.1*	*96.4*	*97.7*	*98.2*	*99.4*	*96.1*	*97.8*
Meal preparation	0.9	1.3	1.8	0.9	1.2	0.9	0.9	1.2	0.9	1.0
Planting/harvesting crops	19.5	35.1	36.3	33.6	31.2	20.5	36.1	38.8	35.6	32.7

	Responses by woman					Responses by man				
	Type of treatment					Type of treatment				
	Control	POWER	PO	WER	Total	Control	POWER	PO	WER	Total
Cleaning the house/compound	2.1	6.3	7.7	9.1	6.3	1.8	7.4	7.6	9.6	6.6
Drying/ processing agricultural produce	14.9	12.9	13.1	18.4	14.9	16.9	14.2	13.8	22.4	16.9
Caring for children	7.3	4.7	4.2	3.5	4.9	5.0	4.3	3.8	4.4	4.4
Carpentry/ making furniture	**49.7**	**62.4**	**52.7**	**52.6**	**54.3**	**52.2**	**60.5**	**52.1**	**50.7**	**53.8**
Caring for elderly/ill/disabled	1.5	4.4	6.0	2.3	3.5	1.2	5.2	4.4	2.3	3.3
House construction/repair	**77.1**	**77.1**	**69.3**	**72.8**	**74.0**	**77.7**	**77.5**	**72.4**	**70.0**	**74.3**
Fuel or water collection	17.7	23.5	20.8	24.0	21.5	19.3	20.1	19.4	27.4	21.6
Selling products/trading	29.3	42.0	25.3	28.9	31.2	25.2	44.4	31.5	27.7	32.1
Taking care of farm animals	**56.7**	**61.1**	**57.1**	**53.5**	**57.1**	**58.8**	**65.1**	**56.8**	**58.3**	**59.7**
Washing, ironing, mending clothes	1.5	1.9	1.2	1.8	1.6	0.6	1.2	1.2	0.6	0.9

Table A.3: Acceptance of violence, criticism and shaming

	Responses by woman						*Response by man*				
	Type of treatment						Type of treatment				
Indicator of violence and criticism	Control (T0)	POWER (T1)	PO (T2)	WER (T3)	Total		Control (T0)	POWER (T1)	PO (T2)	WER (T3)	Total
Panel A: Beat a woman if she:											
Spoiled/burnt/failed to cook a meal	9.2	7.8	4.2	8.2	7.3		3.5	3.6	2.9	4.2	3.6
Disobeyed her husband /uncle /father /brother	20.4	20.7	9.8	16.7	16.9		14.2	13.7	8.2	11.8	12.0
Spent money without asking	13.4	14.4	8.1	15.6	12.9		7.2	7.3	5.6	6.5	6.6
Failed to care well for the children	16.8	20.7	13.4	17.0	17.0		9.3	9.7	7.9	8.1	8.7
Left a dependent/ill adult unattended	11.7	13.5	9.0	14.0	12.0		6.7	6.7	4.7	6.2	6.0
Did not prepare her husband/uncle/father/brother's bath	8.4	8.3	4.2	5.8	6.7		2.9	2.7	2.6	2.5	2.7
Failed to fetch water/firewood for her husband/uncle/father/ brother	7.3	8.6	3.4	5.5	6.2		3.2	2.4	2.3	3.4	2.8
Left the house without asking	24.3	22.4	14.8	23.0	21.1		18.3	16.1	11.7	11.8	14.4
Panel B: Harshly criticise a woman if she:											
Spoiled/burnt/failed to cook a meal	27.4	34.8	17.9	24.7	26.2		24.1	32.2	19.3	19.9	23.8
Disobeyed her husband /uncle/ father /brother	38.0	47.1	28.3	35.9	37.3		38.8	42.2	27.5	32.3	35.1
Spent money without asking	26.3	37.6	25.8	32.6	30.6		24.1	33.7	22.2	25.8	26.4
Failed to care well for the children	35.2	49.7	33.9	36.2	38.7		34.2	41.0	28.9	32.9	34.2
Left a dependent/ill adult unattended	31.8	44.8	31.1	33.4	35.3		28.7	35.3	26.6	29.2	29.9
Did not prepare her husband/uncle/father/brother's bath	21.2	29.3	15.4	20.5	21.6		15.4	22.5	13.5	12.6	15.9
Failed to fetch water/firewood for her husband/uncle/father/ brother	20.1	29.0	14.6	19.7	20.9		15.9	24.9	10.5	14.0	16.3
Left the house without asking	45.0	44.5	34.7	41.9	41.5		42.6	38.6	28.7	37.6	36.9
Panel C: Shame or mock a man if he is:											
Cooking	11.1	13.7	7.3	8.4	10.1		11.6	18.2	11.1	11.5	13.0
Cleaning the house/compound	9.6	10.9	4.7	5.3	7.6		8.7	11.9	3.8	7.9	8.0
Washing clothes for other household members	9.6	12.5	6.4	8.1	9.1		11.0	16.7	11.4	10.4	12.3

Indicator of violence and criticism	Responses by woman						*Response by man*				
	Type of treatment						Type of treatment				
	Control (T0)	POWER (T1)	PO (T2)	WER (T3)	Total		Control (T0)	POWER (T1)	PO (T2)	WER (T3)	Total
Taking care of children	8.4	10.0	4.1	3.6	6.5		7.8	11.2	3.5	5.9	7.1
Bathing a child	8.4	11.9	4.7	8.1	8.2		9.3	15.5	6.5	9.6	10.1
Taking care of dependent/ill adult	7.6	8.2	4.1	3.4	5.8		6.7	9.1	2.3	4.2	5.5
Bathing a dependent/ill adult	7.0	8.2	3.2	3.1	5.3		7.5	8.5	2.3	5.3	5.9
Washing dishes	10.8	15.5	9.9	10.9	11.7		12.2	19.1	14.6	12.6	14.6
Fetching wood/fuel	7.3	8.5	4.4	5.3	6.3		7.0	8.8	4.1	7.9	6.9
Fetching water	7.0	7.9	3.8	5.6	6.0		6.7	8.5	4.7	6.7	6.6

Source:

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