‘You Cannot Live Without Money’: Balancing Women’s Unpaid Care Work and Paid Work in Rwanda

Brigitte Rohwerder, Catherine Müller, Birasa Nyamulinda, Deepta Chopra, Elena Zambelli and Naomi Hossain

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Summary

This paper summarises the findings of mixed-methods research that was carried out in Rwanda as part of the ‘Balancing Unpaid Care Work and Paid Work: Successes, Challenges and Lessons for Women’s Economic Empowerment Programmes and Policies’ research project (2015–17). It reflects the voices and experiences of women and their household members participating in women’s economic empowerment (WEE) programmes across four sites in the rural districts of Musanze and Huye. Participants in two WEE programmes are represented, namely the state-run Vision 2020 Umurenge Programme (VUP), and ActionAid Rwanda’s Food Security and Economic Empowerment Programme. The question addressed by the research was: How can women’s economic empowerment (WEE) policies and programmes take unpaid care work into account in order to enable women’s economic empowerment to be optimised, shared across families and sustained across generations?

This study and its findings indicate that women are the primary caregivers in families, although older children in particular and spouses to some extent also engage in some care tasks. There is little help with care from outside the nuclear family. Women’s paid work opportunities are more limited than men’s because of gender norms around certain types of work and because they have less time to find out about paid work opportunities due to their involvement in care work. Women may do more than one job, and much paid work is temporary, occasional and irregular, as well as seasonal. Women’s income from paid work is important; but, whether sole earnings or combined, it is not always enough to meet household needs.

Balancing paid and unpaid work is a daunting task for the majority of women. Both care and paid work are often physically challenging and time consuming. Women have little time for leisure and personal use. Women who are the sole adult earners and carers for their families are struggling the most. Women who are relatively better off tend to live in families which have other adults also contributing to providing income and care.

**Keywords:** unpaid care work, paid work, women’s economic empowerment, Rwanda.

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## Contents

Summary, keywords and author notes 3  
Acknowledgements and abbreviations 7  

1 **Introduction** 8  
1.1 The relationship between women’s economic empowerment (WEE) and unpaid care work 8  
1.1.1 Searching for the ‘double boon’ 9  
1.2 Methodology 9  
1.2.1 Qualitative and participatory data collection 10  
1.2.2 Quantitative data collection 10  
1.2.3 Data management and analysis 11  
1.2.4 Ethics 11  
1.2.5 Challenges 11  
1.3 Structure of the paper 12  

2 **Context** 12  
2.1 Country context 12  
2.2 Programmes 15  
2.2.1 ActionAid 15  
2.2.2 Vision 2020 Umurenge Programme (VUP) 16  
2.3 Sites 17  
2.3.1 Musanze district 17  
2.3.2 Huye district 17  
2.4 Sample characteristics and description 18  

3 **Findings** 20  
3.1 Analysis of interaction between care work and paid work 20  
3.1.1 Social organisation of care 20  
3.1.2 Paid work 25  
3.1.3 The drudgery of care work, paid work and its effects on women 34  

4 **Discussion – Factors influencing women’s experiences of ‘double boon’ as compared to double burden** 39  
4.1 Striking the balance – the ‘double boon’ 40  

5 **Conclusions** 42  
5.1 Aspirations and solutions proposed 42  
5.1.1 Decent work 42  
5.2 Conclusion 44  

Annexes – Research tools: a summary 46  
Annexe 1: Quantitative survey 46  
A1.1 Synthesis of the questions contained in each module 46  
Annexe 2: Summary of in-depth interview guides for the household members 48  
A2.1 In-depth interview guide for women, spouse and other adults living in their household 48  
A2.2 In-depth guide for interviews with children 50  
Annexe 3: Summary of qualitative key informant interview guides 51  
A3.1 Interviews with WEE programme staff 51  
A3.2 Interviews with community leaders 52  
Annexe 4: Participatory toolkit 53  
A4.1 Short description of the tools 53  

References 57
Figures
Figure 3.1: Current types of work of female survey respondents across the sites 26
Figure 3.2: Current types of work of primary male household members across the sites 27
Figure 3.3: Estimated time taken by respondents to travel to the working place (share of respondents reporting) 31
Figure 3.4: Share of respondents expressing importance levels of income through the three main types of jobs 33
Figure 3.5: Average number of hours during which time was spent on different activities 35

Tables
Table 1.1: Sampling framework for Rwanda 10
Table 2.1: Sample characteristics from the quantitative survey in Rwanda 18
Table 3.1: Social organisation of care across the field sites 21
Table 3.2: Characteristics of the three main types of income-generating activities 30
Table 3.3: Average number of hours spent on personal care, hygiene, eating, attendance of training programmes and leisure 34
Table A2.1 Summary of the modules included per type of respondent 48
Table A4.1 Summary of the participatory research method used per group of respondents 53
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Abbreviations

AAI          ActionAid International
AAR          ActionAid Rwanda
AM           Activity Mapping
CB           Care Basket
CBM          Care Body Map
CC           Care Calendar
CEDAW        Convention on the Elimination of All Forms of Discrimination against Women
CPS          Care Public Service map
CWM          Care Work Matrix
EDPRS        Economic Development and Poverty Reduction Strategy
GBV          gender-based violence
GrOW         Growth and Equal Opportunities for Women programme
ILO          International Labour Organization
ISST         Institute of Social Studies Trust
KII          key informant interview
MIGEPROF     Ministry of Gender and Family Promotion
NGO          non-governmental organisation
RWAMLEC      Rwanda Men’s Resource Center
SACCO        savings and credit cooperative organisation
VUP          Vision 2020 Umurenge Programme
WEE          women’s economic empowerment
WWI          ‘What Would happen If…’
1 Introduction

This paper is based on data collected and analysed for the ‘Balancing Unpaid Care Work and Paid Work: Successes, Challenges and Lessons for Women’s Economic Empowerment Programmes and Policies’ research project within the Growth and Equal Opportunities for Women (GrOW) programme. This study was carried out in four countries: India, Nepal, Rwanda and Tanzania. This paper presents the findings pertaining to Rwanda, where research was implemented in the districts of Huye and Musanze. The overall objective of the research is to contribute to creating knowledge on how women’s economic empowerment (WEE) policy and programming can generate a ‘double boon’, by which we mean ‘paid work that empowers women and provides more support for their unpaid care work responsibilities’.

1.1 The relationship between women’s economic empowerment (WEE) and unpaid care work

The links between women’s economic empowerment and their unpaid care work responsibilities are multiple and numerous. Unpaid care work encompasses care of people, care of animals, as well as household tasks such as cleaning, collecting water, fuel and firewood. Unpaid care occupies large amounts of women’s and girls’ time, restricting their participation in civil, economic, social and political spheres. Razavi highlights how the unequal burden of unpaid care work on women corrodes their ability to seek employment and income, thereby increasing the risk of ‘economic disempowerment’ (2007: 22). Women in the paid labour market may not also be able to adequately substitute for their care responsibilities, and therefore the care and human development outcomes of both the women, and those being cared for, may be compromised. Finally, women and girls’ net income from paid work may be spent on substitute care, which undermines the basis for women’s economic empowerment.

Regardless of the share of household income they earn, evidence indicates that women do most unpaid caregiving in all contexts (Elson 1995; Razavi 2007; Eyben and Fontana 2011). As Kabeer (2012) highlights, women’s increasing entry into paid work has not been accompanied by a change in the gendered division of unpaid care work, ensuring the persistence of gendered disadvantage in the economy through the structures of constraint on women’s paid working opportunities. While much of the feminist literature on women’s work is premised on an understanding of the double burden of paid work and unpaid care work that women bear, the consequences of this double burden for the wellbeing of women have been mainly captured through the concept of time stress, time poverty and time available for rest and leisure (Antonopoulos and Hirway 2010; also see Bittman and Wajcman 2000). The clarion call for the recognition, reduction and redistribution of unpaid work (Elson 2010) also comes from an understanding of the disproportionate burden that women bear of unpaid work. Even so, research that seeks to specifically unpack the contours and consequences of the double burden for women’s emotional and physical wellbeing, particularly for women from low-income households, as well as the ways in which women from these households manage their double burdens is sparse (although see Swaminathan 2005. This paper situates its analysis within that space.

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The work of Shirin Rai, Catherine Hoskyns and Dania Thomas (2011) in delineating the concept of ‘depletion of the body, the household and the community’ maps and analyses the contours of the double burden, rooted in a concept of depletion. In this paper, we seek to build on their work on depletion to study the relationship between paid work and unpaid care work in order to better understand the relationship between women’s participation in paid work and economic empowerment.

1.1.1 Searching for the ‘double boon’

This research is also interested in exploring whether, and if so how, women (may) achieve a positive balance between their unpaid care work and paid work responsibilities. In exploring the pathways towards this balance, this paper examines the social organisation of care in low-income households, and the different roles that families, the state, private actors and the not-for-profit sector play in the provision of care. A key research assumption here is that care needs to be redistributed more fairly across these different institutions within the ‘care diamond’ (Razavi 2007) for policies and programmes to contribute effectively and sustainably to women’s economic empowerment. More specifically, the project’s hypothesis is that taking unpaid care work into account in WEE policies and programmes has the potential to significantly strengthen the empowering outcomes of women’s participation in paid work. This will come about because support for unpaid care work will:

- Optimise women’s economic participation, by enabling them to work without deepening their time poverty, or worrying about the amount and quality of care their families receive in their absence. This in turn will help make it possible for them to choose better-paid and more empowering types of work, rather than being forced into low-paid ‘flexible’ work.
- Share the gains of women’s economic empowerment across all females in the family, so that younger girls and older women are not left to carry the burden and disempowered as a result, and so that economic benefits are not eroded by the cost of substitute care.
- Sustain the gains of women’s economic empowerment across generations, by ensuring that the quality of childcare improves rather than deteriorates, as a result of their mothers’ paid work.

The main research question that we sought to answer was: How can women’s economic empowerment (WEE) policies and programmes take unpaid care work into account in order to enable women’s economic empowerment to be optimised, shared across families and sustained across generations? In Rwanda, the two WEE programmes that were selected for this research were: the state-run Vision 2020 Umurenge Programme (VUP) and the ActionAid Rwanda Food Security and Economic Empowerment Programme.

1.2 Methodology

The research adopted a mixed-methods approach, with primary data consisting of quantitative and qualitative data. The quantitative data was collected through a survey tool aimed at women respondents. This tool was designed specifically for the project (see Annex 1), and contained modules on household-level data, the characteristics and interactions of paid work and of unpaid care work and its organisation with each woman’s household, and also on decision-making and social norms.
1.2.1 Qualitative and participatory data collection

There were two types of qualitative data collection tools – one type was semi-structured interviews, guides for which were developed for interviewing women, men and children in each chosen case study household (Annexe 2). These guides sought to elicit information about the organisation of care and paid work, and different perceptions and constraints surrounding women’s care work and their paid work.

The other type of qualitative tool was a participatory toolkit (Annexe 4), which comprised participatory and visual exercises carried out with a group of respondents, including men, women, girls, boys and some mixed groups. The participatory tools were aimed at eliciting site and community-level views on how paid work and unpaid care work were organised, the infrastructure and social services available, the norms and expectations around care work; and to identify specific case studies that could be of interest. Key informant interview (KII) guides were developed and used to interview community leaders, as well as staff involved in the delivery of the chosen WEE programmes (Annexe 3).

All tools were developed through a methodology development process involving the project team across the four countries, followed by an iterative process of piloting and feeding back from each country team, such that these were relevant to the local contexts yet made sense across a range of sites and countries.

1.2.2 Quantitative data collection

The survey was administered as per a sampling framework (Table 1.1), reaching a total of 200 women across four sites. These women respondents were chosen iteratively through the participatory exercises, as well as through suggestions from local partners. Inclusion criteria included that each woman was in paid work, from a low-income household, and had at least one child under the age of six years.

From this larger sample of 200 women, 30 women across the four sites were purposively chosen for in-depth qualitative case study work, which involved semi-structured interviews with them, their husbands/significant male carers, an older woman and the oldest child, where feasible. The project also had the objective of exploring differences between participants in the chosen WEE programmes, and those that were in similar socioeconomic circumstances, but were not participants. Mbazi acted as the control area for the VUP. The sampling framework in Rwanda was constructed as per Table 1.1.

Table 1.1: Sampling framework for Rwanda

<table>
<thead>
<tr>
<th>Name of site</th>
<th>WEE participants</th>
<th>Non-WEE participants</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No. of women</td>
<td>No. of women</td>
</tr>
<tr>
<td></td>
<td>surveyed</td>
<td>interviewed for</td>
</tr>
<tr>
<td></td>
<td></td>
<td>in-depth case study</td>
</tr>
<tr>
<td>Muko (Musanze): Food</td>
<td>59</td>
<td>7</td>
</tr>
<tr>
<td>Security and Economic</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Empowerment Programme</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Simbi (Huye): VUP</td>
<td>34</td>
<td>9</td>
</tr>
<tr>
<td>Gishamvu (Huye): VUP</td>
<td>28</td>
<td>1</td>
</tr>
<tr>
<td>Mbazi (Huye) – control</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
1.2.3 Data management and analysis

All tools were translated into Kinyarwanda, and training was provided to a data collection team. This provided the testing ground for translations – and helped overcome the challenges inherent in a purely technical translation of tools. Consistent meanings of terms were arrived at through this collective process. This initial preparation also stood the teams in good stead for translations of interview data into English, to ensure that meanings were not lost.

However, because of the two-staged translation (from and to English) and the risks of losing/misunderstanding information – the analysis has not relied on counts or occurrences of words/phrases. Instead, the analysis has been undertaken through developing a coding framework that has been agreed to and accepted by the research teams, codes whose meanings have been jointly accepted. Coding has been done in NVivo, allowing systematic use and analysis of this extensive data. Regular monitoring and feedback from project leaders, and coding being carried out by the core research team that carried out qualitative interviews and participatory tools, have ensured rigour and reliability of the analytical process.

Such mixed-methods research has had its advantages – the complementarity of the qualitative and quantitative data collected at the household and community level has enabled us to produce a contextualised ‘case archive’ resulting from a holistic rather than ‘sequential integration’ (Camfield and Roelen 2012). The development of and use of a suite of participatory tools alongside conventional data collection tools by us as the core team of researchers has built our repertoire of research capacity for development of tools, data collection and analysis. At the same time, this has allowed for a more nuanced and rigorous process of research and more comprehensive analysis.

1.2.4 Ethics

Participation in the study was voluntary, and based on respondents’ fully informed consent and right to withdraw at any stage of the research. Children’s participation was ensured through a two-step informed consent expressed by them and their parents. Also, in recognition of the different ways in which research with children needs to be carried out, we developed specific exercises within the interview guides and in the participatory tools in order to ensure that they would be at ease with the research process.

Confidentiality of the quantitative and qualitative data has been consistently maintained throughout the research process, with a detailed system of storing and managing data. All respondents’ names have been changed to ensure their anonymity in the qualitative interviews; while the quantitative data works with codes rather than names.

1.2.5 Challenges

The most challenging aspect of this research project has been to ensure consistency of meanings and maintain the conceptual and methodological rigour needed for this research. These challenges were overcome primarily by providing extensive training in tool development and piloting, and close monitoring throughout the process. However, administering quantitative and qualitative tools in local languages was difficult, as were participatory tools, which took time and experimentation to generate good quality information.
Capacities in the data collection were uneven; in some sites, the teams undertaking the survey were capable and closely aligned to the lead researchers undertaking the qualitative and participatory work, but in other sites the oversight and the relationship with the researchers was weaker. We overcame this by replacing team members, and working closely with local organisations to gain contextual understandings for each site. Support by the local partners also helped in gaining trust of respondents, and to respond to different queries about basic services/provisions – which would have been difficult to do otherwise with an external team. However, reticence amongst the women to elaborate as to their circumstances and the uneven capacities in the data collection meant that many of the interview transcripts were short.

Another challenge was to accept and work with the intricacy of the research tools within the given time and budget. We realised mid-way through the data collection process that our initial plans were ambitious, and therefore proposed an alternative timeline and budget extension for the project. It was not possible to capture potentially important seasonal variations in time use, as the data was collected in a single period. Qualitative research tools were, however, used to capture perceptions of these variations.

1.3 Structure of the paper

In Section 2 we provide an overview of the country’s socioeconomic characteristics, of the four research sites, and of the two WEE programmes selected.

In Section 3 we discuss the main findings of the research in relation to how care is socially organised within the low-income households of the case studies, women’s experiences of paid work, and the ways in which the two spheres of care and work interacted with one another as seen not only through the eyes of the women themselves, but also of their spouses/significant male in the household (if any), and children. We also discuss the extent to which the two WEE programmes analysed support women in their day-to-day management of paid work and unpaid care work.

The findings on what is affecting gender norms, which in turn impact the social organisation of care, are discussed in Section 4. We also look at findings across the case studies to understand the factors that can facilitate the ‘double boon’ for women. Finally, in Section 5, we discuss the solutions that women suggested for supporting them in balancing paid work and unpaid care work in ways that their empowerment is not achieved at the expense of anyone else. These provide us with broader recommendations for WEE programmes that are rooted in women’s experiences and aspirations.

2 Context

2.1 Country context

Rwanda is a small landlocked country located in East Africa, with limited land, minerals and other natural resources (Sorensen 2016). Vision 2020 and the Second Economic Development and Poverty Reduction Strategy (EDPRS II) guide the Rwandan development path with the aim of ensuring the country achieves middle-income status by 2020. Taking into account Rwanda’s scarce resources, Vision 2020 aims to put in place reforms which will help Rwanda transform from a subsistence agricultural economy to a knowledge-based society, with a vibrant class of entrepreneurs (MFEP 2000). With an estimated population of
10,117,033 (NISR 2010) and a population density of 471 per square kilometre (UNDESA 2015), Rwanda is the most densely populated country in sub-Saharan Africa. This population is expected to rise to 12.6 million by 2018 (CIA 2017). Agriculture provides work for nearly 78 per cent of the population and contributes 34 per cent to the gross domestic product (GDP) (ibid.). Almost 80 per cent of the rural population are still subsistence farmers (FAO 2013). Vision 2020 aims to replace subsistence farming by a fully monetised, commercial agricultural sector by 2020.

Rwanda has undergone an impressive socioeconomic transformation in recent years, with the rate of poverty reduction accelerating from 44.9 per cent in 2010/11 to 39.1 per cent during 2013/14, and of extreme poverty from 24.1 per cent to 16.3 per cent (NISR 2016). These impressive rates of poverty reduction can (at least in part) be attributed to Rwanda’s far-reaching development policies, including land reform, rural modernisation and agricultural transformation. People’s lived experiences of socioeconomic change have not been unequivocally positive as the policies have come at the expense of choice, voice and participation (Dawson 2015).

Like any other patriarchal society, Rwandan society is characterised by unequal social power relations between men and women, boys and girls (Abbott and Rucogoza 2011). Customarily, these relations translated into male dominance and female subordination (Republic of Rwanda 2010); women’s roles were focused on ‘running’ the house and raising children, and men were expected to work to provide for the family. Men – family heirs and responsible for the endurance of the family line – were seen as the breadwinners, life insurance for the family, and as the defenders of clan and country. Women were to adopt a domestic and dependent role within the family, bear children (with a preference for boys), and be reliant on the patriarchal figures in their lives. Young girls were taught that it was improper to speak in the presence of men, as they were considered subordinate to them, and to help their mothers with household chores.

Rwandan women have been disadvantaged in many areas of customary law. One of the most significant discriminations was related to female children not having the same rights to inherit land from deceased parents as male children. These land ownership and inheritance restrictions were first governed by customary laws that existed in pre-colonial times, and then enacted during the colonial period and extend to the independent state (Polavarapu 2014). However, one common aspect of each of the customary, colonial, and Rwandan regimes was that matrimonial and inheritance matters continued to be governed by custom, and women had no rights of their own to inherit or otherwise own land (ibid.) but only secondary rights, owning land only through their fathers or husbands, who were the primary holders of rights. The division of labour in agriculture meant men would assist women to clear the land while women would do the work of planting, weeding and harvesting. Men would then assist again in the marketing of produce, and the all-important cash transactions in the market.

Rwanda’s recent history has transformed the customary model of gender, causing people to take responsibilities beyond the traditionally prescribed gendered roles and responsibilities. The 1994 war and genocide left many women as widows with new challenges as household heads and sole providers of all household needs and in control of family property including land (IFAD 2010; Abbott and Malunda 2015). In response to changed realities and international support, the Government of Rwanda made significant strides towards gender equality, introducing progressive laws and policies that promote empowerment for girls and women (UNDP 2013). These include a Girls’ Education Policy to ensure access, retention
and performance of girls and women at all levels. Rwanda has also enacted progressive laws on women and the economy such as (i) Law N°22/99 of 12/11/1999 related to matrimonial regimes, liberalities and successions, giving to women the same rights of succession as men; and (ii) Land Organic Law N°08/2005, granting equal access to land for men and women (African Development Fund 2013). The Constitution reinforces the principles of gender equality and elimination of all forms of discrimination against women and provides a very strong platform for gender mainstreaming in all sectors. It prohibits discrimination based on sex, and guarantees equal rights to spouses. It also has quotas for women, ensuring that they are granted at least 30 per cent of posts in decision-making organs. Consequently, Rwanda has been lauded for the high number of women political representatives in Parliament (Dudman 2014).

In addition, Rwanda has ratified international conventions and instruments such as the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the Beijing Declaration and Platform for Action, United Nations Security Council Resolutions 1325 and 1820, and the Universal Declaration of Human Rights. Nationally, gender-responsive laws and policies, including the National Gender Policy (2010) and the Law on the Prevention and Punishment of Gender-Based Violence (GBV) (2008) have been enacted, making domestic violence, spousal rape, child sexual assault and trafficking in persons illegal (USAID 2015). Several institutions and agencies have been set up to advance, monitor and sensitize gender equality in Rwanda. The Ministry of Gender and Family Promotion (MIGEPROF) is responsible for promoting gender equality and equity, children’s rights and family promotion. The National Women’s Council was mandated to mobilise women and to identify their needs and their constraints to be taken into consideration in development processes. The Gender Observatory has the mandate to hold accountable, with respect to gender issues, the various interveners both at public, private sector, civil society and donor community levels.

The National Women’s Councils were set up by the government to coordinate the functioning of Women’s Councils from grass roots to the national level. The Women’s Councils constitute a critical forum to empower women for their effective participation in the national development. The national gender cluster was put in place to play the role of coordinating, monitoring and guiding the implementation process of the national gender policy. The cluster is chaired by MIGEPROF and it brings together development partners, sector ministries and the civil society organisations, and the private sector. It plays a significant role in advocating for the implementation of the national gender policy. Additionally, civil society groups, such as Pro-Femmes/Twese Hamwe, Réseau des Femmes, and the Rwanda Women Network, play an important role in disseminating information about new laws to a largely illiterate population. Other programmes include training local leaders in the fight against gender-based violence by promoting the concept of ‘positive masculinity’. In 2012, the government initiated a programme called Akagoroba k’Ababyeyi, dubbed ‘Parents’ evening’. The programme brings together parents in villages to discuss issues affecting their families. Various governmental, developmental and health programmes are also taught during the meetings. During discussions, information on topics related to fighting malnutrition, promoting economic empowerment of women, promoting girls’ education, and women and good governance is provided. Women are mobilised to join cooperatives such as Umurenge SACCO and others in their communities, while efforts are also directed at reducing illiteracy among women by providing basic adult literacy skills. The programme has helped to reduce gender-based violence, increase awareness and sensitisation of women’s rights, improved girls’ education, increased women’s involvement in off-farm activities and other forms paid work, particularly in rural areas, and increased

2 Article 11.
3 Article 26.
4 Article 9.
women’s access to financial resources. In addition, men are encouraged to be more involved in family activities traditionally designated for women such as childcare, weeding, fetching water and cooking (Doyle et al. 2014).

However, despite these efforts, Rwanda remains a highly patriarchal society (UNDP 2013). There is limited awareness of existing gender-sensitive laws among poor women and men. Limited access to economic opportunities remains a major barrier to women’s economic empowerment in spite of efforts to overcome these barriers. More female-headed households live in poverty than those headed by males (47 per cent as against 44.3 per cent). Lower literacy rates (60 per cent female as against 70 per cent male) constrain women’s already limited opportunities in terms of accessing resources, creating and managing small businesses and participating in decision-making processes in the household and society (ibid.). Gender-based violence remains widely tolerated and under-reported (ibid.).

Against this backdrop, a significant amount of programming aims to support the economic empowerment of Rwanda’s rural women. The following section introduces two major programmes that are being implemented as part of women’s economic empowerment efforts. One programme is being implemented in Muko sector in Musanze district by ActionAid, while the other one – the Vision 2020 Umurenge Programme (VUP) – is being implemented by the Government of Rwanda. We chose to look at the VUP public works being implemented by the Ministry of Local Government in Gishamvu and Simbi sectors in Huye district. For the purpose of the study, Mbazi sector in Huye district serves as a ‘control’ sector, i.e. to help us understand the daily lives of women and their families in areas where no economic empowerment programmes are being implemented.

2.2 Programmes

2.2.1 ActionAid

ActionAid is an international federation with 45 member organisations, working with more than 15 million people for a world free from poverty and injustice. ActionAid Rwanda (AAR) was established in 1997 as a member programme of ActionAid International (AAI). More than 500,000 women have since benefited from AAR’s education, women’s rights, food rights and livelihoods programmes. AAR works in Northern Province, Southern Province and Western Province. Its programme Ubudehe – shared with the Rwandan government since 2002 – received a United Nations award in 2008 as the best managed and implemented development programme.

The three-year Food Security and Economic Empowerment Programme, which started in June 2014, aims to enable 1,200 of the most vulnerable women smallholder farmers and 300 vulnerable male smallholder farmers in Muko sector in Musanze district (Northern Province) to improve their food security and economic security through increased agricultural profitability. Three outcomes are envisaged in this programme:

- **Outcome 1** aims to mobilise smallholder farmers into 23 existing and 27 new cooperatives, representatives of which would receive training in leadership, community mobilisation, networking and coalition building.
- **Outcome 2** aims to enhance livelihood security and build disaster resilience through the establishment of community seed/grain banks, the enlargement and rehabilitation of the Susa stream (the main stream running through Muko), and the training of 200 women in sustainable agricultural practices and disaster risk reduction. Four Disaster Management Committees have been established and trained to monitor potential oncoming disasters, put mitigation strategies in place, and sensitise the community on risk reduction and resilience. These committees are expected to work closely with government authorities when planning for and responding to disasters.
• Outcome 3 aims to construct a maize processing plant and a cold room for storing fruit and vegetables. This is expected to increase women smallholder farmers’ involvement in the agricultural chain, giving them more control of and profit from their produce from production and processing to marketing and sales. Cooperatives would be supported to register, giving them access to credit and allowing women smallholder farmers to acquire the necessary inputs to improve their harvest and increase agricultural sales. Among others, it was hoped that if women earn more, their ability to influence household decisions would improve. As some evidence suggests that women are more likely than men to invest income in the nutrition, education and welfare of their children (see e.g. Hoddinott and Haddad 1995; Duflo 2003; Duflo and Udry 2004), this gendered approach to food security was meant to sustainably benefit approximately 6,000 children with greater food security.

2.2.2 Vision 2020 Umurenge Programme (VUP)

The VUP is a large-scale social protection programme owned and led by the government. It was launched in 2008 by the Government of Rwanda to accelerate the rate of poverty reduction. It is a flagship programme of the Economic Development and Poverty Reduction Strategy (EDPRS) 2008–2012, jointly financed and implemented by the Government of Rwanda, development partners and non-governmental organisations (NGOs). The programme started in a pilot sector in each of the 30 districts (about 600,000 people), and was then rolled out to cover all 416 sectors by 2016. The programme’s three key objectives are to:

• release the productive capacity of people;
• improve community livelihood assets; and
• provide social protection to the most vulnerable.

Three key components have been designed to reach those objectives. The first component is **Public Works** which creates off-farm employment infrastructure through paid activities such as terracing, water harvesting, irrigation, roads construction, and building classrooms, health facilities, village settlements, etc. The second component, the **Ubudehe Credit Scheme**, fosters entrepreneurship and off-farm employment opportunities through credit to diversify or specialise farming and livestock activities and develop off-farm skills. The third component is **Direct Support**, which is an unconditional cash transfer to those households with no members qualifying for **Public Works**. The aim is to expand health and education coverage as well as to encourage the development of ‘appropriate’ skills (e.g. handicap) for the poorest people. The national guideline for allocation of resources is: public works (50 per cent), financial services (30 per cent) and direct support (20 per cent). The financial split by component varies at sector level, according to differences in poverty. Direct support is an entitlement and as such is prioritised and 100 per cent funded (see VUP 2011).

VUP uses a community-based poverty targeting mechanism (**Ubudehe**11) together with land and labour criteria to identify extremely poor households. The programme then targets the

---

5 In 2006, over 56 per cent of the population lived below the poverty line (NISR 2016).
6 The Department for International Development (DFID), the European Union (EU), UNICEF, the World Bank since 2009/10, and the Swedish International Development Cooperation Agency (Sida) from 2010/11.
7 A sector is an administrative unit in the decentralisation system below a district. Rwanda is made up of 416 sectors in 30 districts and four provinces plus Kigali city.
8 The targeted are extremely poor people (classified as Ubudehe 1 and 2) who have no land (less than 0.25ha) but who have at least one adult (≥18 years) able to do manual work.
9 The eligible households are those in category 1 and 2 of Ubudehe classification whose members can run small businesses. Categories 1 and 2 cumulate the population below poverty line.
10 The targeted are extremely poor households that have no land (less than 0.25ha) and no adults to do manual work.
11 The process used to classify the level and type of poverty that exists in the community.
poorest, labour-constrained households mainly found in category 2 of this classification. Targeting is done annually (around May/June) prior to the start of the next financial year. As such, there are no special provisions to include or target women specifically. Public works – the project component researched in this project – are labour-intensive community-based activities designed to provide temporary employment in order to gain an income, thereby beginning the process of migrating the household out of extreme poverty, and create productive sustainable community assets (VUP 2011). The total amount invested in 2013/14 was 5,171,351,898 Frw\(^{12}\) (7.5m USD) and a total of 104,310 households benefited. The number of male workers was high at 28,565 compared to 20,946 females in the same period. The proportion of women in each category of work differs, with the majority active in transport infrastructure, followed by water and sanitation, then health infrastructure, income-generating activities (such as construction of markets, hotels) while the least is information and communications technology (ICT)-related infrastructure.

In the next section we discuss the socioeconomic characteristics of the studied sites separately where the VUP and ActionAid programmes are being implemented. The concerned sites are Muko sector for ActionAid, Simbi and Gishamvu for VUP, and Mbazi sector serves as the control site for the VUP.

2.3 Sites

2.3.1 Musanze district

*Muko sector: ActionAid Rwanda Food Security and Economic Empowerment Programme*

Muko sector is located in Musanze district in Northern Province. The main economic activity in the area is agriculture and horticulture, and the dominant food crops are Irish potato and maize. According to IPAR–Rwanda (2015), Muko is one of the most insecure sectors and suffers from chronic food insecurity and flooding. High unemployment coupled with limited vocational education opportunities result in extreme poverty. Fifty-two per cent of the 3,886 households in Muko live below the poverty line and struggle to provide basic necessities such as food, medical care and school fees, and over 50 per cent of children (six months to five years old) suffer from chronic malnutrition. The road connecting Muko sector and Musanze town is under construction and it is expected to facilitate the transport of goods from Muko and enable people to access to the market and other services available in Musanze town.

2.3.2 Huye district

*Simbi sector: VUP*

Simbi sector is located in Huye district in Southern Province. It is located some 20km from Huye town and has access to the road connecting Huye and Nyamagabe districts. Although electricity is available, only a few households are connected and water sources are located at quite a distance for some households. Karama is the famous trading centre in the sector that attracts commercial activities, mainly for food-related products and beverages. The main economic activity in Simbi is farming, and its climate and soil characteristics make coffee farming very attractive. Food crops grown include bananas, sweet potatoes, cassava, beans, maize and some paddy. The VUP interventions currently undertaken in Simbi include terracing and road construction to improve infrastructure within Simbi to connect Simbi to other nearby sectors and Huye and Nyamagabe districts.

*Gishamvu sector: VUP*

Gishamvu sector is also located in Huye district in Southern Province. This mainly rural sector is located some 25km from Huye town. Food crops grown in the area include maize, cassava, bananas, sweet potatoes, beans, some paddy and avocado. Currently, VUP

\(^{12}\) 7,505,596.72 USD as of 31 December 2014 (www.exchange-rates.org/Rate/RWF/USD/12-31-2014).
participants in Gishamvu construct feeder roads and terraces. In fact, the feeder roads connecting Gishamvu with other sectors (especially Huye town) are regularly maintained through public works under the VUP. Electricity lines and clean water sources are only available in a few places in the sector, adding to the burden of women and children.

**Mbazi sector: no programme, ‘control’ sector**
Mbazi is only about 5km away from Huye town, granting most of its residents access to basic services such as water, electricity and roads. However, a large part of the sector’s population still lives in its rural part, which means that not everyone has access to water and electricity. The main economic activities in Mbazi include handicrafts, farming, trading and tailoring. The main crops grown are maize, paddy, avocado, maize, cassava, coffee and bananas. Neither of the studied programmes – ActionAid or the VUP – works here, making it the ‘control’ sector of the study.

### 2.4 Sample characteristics and description

Table 2.1 gives an overview of some individual and household characteristics of the respondents of our quantitative study. The majority of respondents of the survey are between 18 and 39 years of age, although the age structure varies across the sites, where women in Gishamvu are on average six years older than women in Muko (36.4 years vs. 30.4 years). Most women across all sites have primary education, although Mbazi stands out with 11.1 per cent of respondents reporting to have finished secondary or higher education levels. In terms of activities, some differences across sites stand out: whereas women in Gishamvu are largely dependent on WEE programme participation, the majority in Simbi, Mbazi and Muko are engaged in home-based work outside the house, for example agricultural work on a compound/plot/own land. Around one in five women in Mbazi and Muko have no paid work at all. The vast majority of the women in the case study live in nuclear households, with at least one working-age adult male present who could help with income generation and share household activities. Only three quarters of women in our sample live with husbands. Finally, most of the women have children younger than six, as well as older children, a feature that is very prominent and important in the division and sharing arrangement of unpaid care work.

**Table 2.1: Sample characteristics from the quantitative survey in Rwanda**

<table>
<thead>
<tr>
<th>Age group of respondent</th>
<th>Gishamvu</th>
<th>Simbi</th>
<th>Mbazi</th>
<th>Muko</th>
</tr>
</thead>
<tbody>
<tr>
<td>18–29</td>
<td>25.8</td>
<td>27.3</td>
<td>33.3</td>
<td>46.9</td>
</tr>
<tr>
<td>30–39</td>
<td>29.0</td>
<td>49.1</td>
<td>38.9</td>
<td>42.7</td>
</tr>
<tr>
<td>40–49</td>
<td>45.2</td>
<td>23.6</td>
<td>27.8</td>
<td>9.4</td>
</tr>
<tr>
<td>50–59</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>1.0</td>
</tr>
<tr>
<td><strong>Women’s highest level of education</strong></td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>None</td>
<td>38.7</td>
<td>12.7</td>
<td>27.8</td>
<td>15.6</td>
</tr>
<tr>
<td>Pre-primary</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>3.1</td>
</tr>
<tr>
<td>Primary</td>
<td>58.1</td>
<td>76.4</td>
<td>38.9</td>
<td>67.7</td>
</tr>
<tr>
<td>Junior/lower secondary</td>
<td>3.2</td>
<td>9.1</td>
<td>16.7</td>
<td>11.5</td>
</tr>
<tr>
<td>Secondary/higher secondary</td>
<td>0.0</td>
<td>0.0</td>
<td>11.1</td>
<td>2.1</td>
</tr>
<tr>
<td>Tertiary (vocational)</td>
<td>0.0</td>
<td>1.8</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td>Other forms of education</td>
<td>0.0</td>
<td>0.0</td>
<td>5.6</td>
<td>0.0</td>
</tr>
</tbody>
</table>
Table 2.1 (cont’d).

<table>
<thead>
<tr>
<th>Current type of income-generating work</th>
<th>Gishamvu</th>
<th>Simbi</th>
<th>Mbazi</th>
<th>Muko</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home-based work inside house, e.g. handicraft</td>
<td>0.0%</td>
<td>1.8%</td>
<td>0.0%</td>
<td>3.1%</td>
</tr>
<tr>
<td>Home-based work outside house, e.g. agricultural work on compound/plot/own land</td>
<td>6.5%</td>
<td>49.1%</td>
<td>44.4%</td>
<td>36.5%</td>
</tr>
<tr>
<td>Income-generating activities, and self-employment</td>
<td>12.9%</td>
<td>1.8%</td>
<td>27.8%</td>
<td>9.4%</td>
</tr>
<tr>
<td>Agricultural/non-agricultural daily wage labour</td>
<td>0.0%</td>
<td>21.8%</td>
<td>5.6%</td>
<td>9.4%</td>
</tr>
<tr>
<td>WEE programme participation</td>
<td>80.7%</td>
<td>21.8%</td>
<td>0.0%</td>
<td>21.9%</td>
</tr>
<tr>
<td>No paid work</td>
<td>0.0%</td>
<td>3.6%</td>
<td>22.2%</td>
<td>19.8%</td>
</tr>
<tr>
<td>Time spent away from household last year</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Never</td>
<td>100.0%</td>
<td>90.9%</td>
<td>94.4%</td>
<td>94.8%</td>
</tr>
<tr>
<td>Less than one month</td>
<td>0.0%</td>
<td>3.6%</td>
<td>5.6%</td>
<td>5.2%</td>
</tr>
<tr>
<td>1–3 months</td>
<td>0.0%</td>
<td>1.8%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Whole year</td>
<td>0.0%</td>
<td>1.8%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>I don’t know</td>
<td>0.0%</td>
<td>1.8%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Family structure</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Nuclear family*</td>
<td>83.9%</td>
<td>78.2%</td>
<td>100.0%</td>
<td>88.5%</td>
</tr>
<tr>
<td>Extended family</td>
<td>16.1%</td>
<td>21.8%</td>
<td>0.0%</td>
<td>11.5%</td>
</tr>
<tr>
<td>Adult male present in the household</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>No</td>
<td>35.5%</td>
<td>25.5%</td>
<td>11.1%</td>
<td>14.6%</td>
</tr>
<tr>
<td>Yes</td>
<td>64.5%</td>
<td>74.6%</td>
<td>88.9%</td>
<td>85.4%</td>
</tr>
<tr>
<td>Average household size</td>
<td>#</td>
<td>#</td>
<td>#</td>
<td>#</td>
</tr>
<tr>
<td>5.2</td>
<td>4.8</td>
<td>4.9</td>
<td>4.8</td>
<td></td>
</tr>
<tr>
<td>Average number of children &lt;18</td>
<td>#</td>
<td>#</td>
<td>#</td>
<td>#</td>
</tr>
<tr>
<td>3.1</td>
<td>2.7</td>
<td>2.9</td>
<td>2.7</td>
<td></td>
</tr>
<tr>
<td>Average number of children &lt;6</td>
<td>#</td>
<td>#</td>
<td>#</td>
<td>#</td>
</tr>
<tr>
<td>1.2</td>
<td>1.2</td>
<td>1.7</td>
<td>1.3</td>
<td></td>
</tr>
<tr>
<td>Childcare dependency</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Low dependency (1 child &lt;6)</td>
<td>80.7%</td>
<td>78.2%</td>
<td>38.9%</td>
<td>75.0%</td>
</tr>
<tr>
<td>Medium dependency (2 children &lt;6)</td>
<td>16.1%</td>
<td>21.8%</td>
<td>50.0%</td>
<td>25.0%</td>
</tr>
<tr>
<td>High dependency (3 or more children &lt;6)</td>
<td>3.2%</td>
<td>0.0%</td>
<td>11.1%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Observations</td>
<td>31</td>
<td>55</td>
<td>18</td>
<td>96</td>
</tr>
</tbody>
</table>

Notes: * Nuclear family refers to households including female respondent, spouse and children only; extended family refers to households including any other relatives.

13 Looking after the elderly in our sample is very rare. Only five respondents mentioned any elderly people living with them; therefore we focus on care of children in our narratives and when computing the care dependency ratio.
3 Findings

3.1 Analysis of interaction between care work and paid work

3.1.1 Social organisation of care

Across Musanze and Huye, care tasks for women were found to mainly include the care of children (and occasionally the elderly); cooking; cleaning the house and compound; washing clothes; fetching firewood and water; care of animals; and cultivation of food crops for the family. All these tasks can be very time consuming, although washing clothes and cleaning are not necessarily daily activities (Huye Women CB).

Much of the social organisation of care activities was seen to be dependent on the nature of the activities themselves, although this varied across sites – sometimes quite substantially. For example, Table 3.1 shows that household work inside the house, such as washing, ironing, cleaning house and compound, meal preparation, and water and fuel collection are much less often shared with husbands than childcare. At the same time, childcare is mostly carried out solely by the woman respondent in all sites except Muko – the sector where ActionAid’s empowerment programme is being implemented. The extent to which other family members help also depends very much on the activity itself, though most often women are still the primary caregivers. ‘I and my siblings receive the care from our parents but most especially my mother’ (Kajyambere Eugene, son of Ineza Alice (married), Simbi). However, some families do see care of children as a responsibility shared with men (Uwimbabazi Odette, 37, married, three daughters and two sons, farmer, Muko) – also reflected in Table 2.1.

The share of respondents only doing the household work or water and fuel collection also differs across sites, and we observe much higher shares of non-household members taking on the collection of water and fuel than any other task. These differences mainly arise from different characteristics of respondents and households as interviewed across sites, and also from situational differences across sites – to which we return later.
### Table 3.1: Social organisation of care across the field sites

<table>
<thead>
<tr>
<th></th>
<th>Gishamvu VUP</th>
<th>Simbi VUP</th>
<th>Mbazi control</th>
<th>Muko AAR</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Childcare</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A Woman respondent only</td>
<td>41.9</td>
<td>41.8</td>
<td>44.4</td>
<td>21.0</td>
</tr>
<tr>
<td>B Woman and husband</td>
<td>12.9</td>
<td>21.8</td>
<td>27.8</td>
<td>24.2</td>
</tr>
<tr>
<td>C Mixed sharing*</td>
<td>22.6</td>
<td>16.4</td>
<td>-</td>
<td>41.1</td>
</tr>
<tr>
<td>D Women only**</td>
<td>22.6</td>
<td>18.2</td>
<td>27.8</td>
<td>12.6</td>
</tr>
<tr>
<td>E Non-household members</td>
<td>-</td>
<td>1.8</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>F Spouses only</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>G Others only***</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>1.0</td>
</tr>
<tr>
<td><strong>Household work inside the house</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A Woman respondent only</td>
<td>38.7</td>
<td>52.7</td>
<td>66.7</td>
<td>42.1</td>
</tr>
<tr>
<td>B Woman and husband</td>
<td>3.2</td>
<td>7.3</td>
<td>-</td>
<td>9.5</td>
</tr>
<tr>
<td>C Mixed sharing*</td>
<td>25.8</td>
<td>12.7</td>
<td>5.6</td>
<td>26.3</td>
</tr>
<tr>
<td>D Women only**</td>
<td>29.0</td>
<td>23.6</td>
<td>27.8</td>
<td>21.1</td>
</tr>
<tr>
<td>E Non-household members</td>
<td>3.2</td>
<td>1.8</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>F Spouses only</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>1.0</td>
</tr>
<tr>
<td>G Others only***</td>
<td>-</td>
<td>1.8</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Water and fuel collection</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A Woman respondent only</td>
<td>35.5</td>
<td>27.3</td>
<td>55.6</td>
<td>32.3</td>
</tr>
<tr>
<td>B Woman and husband</td>
<td>9.7</td>
<td>18.2</td>
<td>11.1</td>
<td>10.4</td>
</tr>
<tr>
<td>C Mixed sharing*</td>
<td>19.4</td>
<td>30.9</td>
<td>-</td>
<td>33.3</td>
</tr>
<tr>
<td>D Women only**</td>
<td>19.4</td>
<td>3.6</td>
<td>22.2</td>
<td>18.8</td>
</tr>
<tr>
<td>E Non-household members</td>
<td>-</td>
<td>1.8</td>
<td>-</td>
<td>1.0</td>
</tr>
<tr>
<td>F Spouses only</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>G Others only***</td>
<td>16.1</td>
<td>18.2</td>
<td>11.1</td>
<td>4.2</td>
</tr>
<tr>
<td><strong>Observations</strong></td>
<td>31</td>
<td>55</td>
<td>18</td>
<td>96</td>
</tr>
</tbody>
</table>

**Source:** Project survey, 2016–17.

**Notes:** Definitions of social organisation of care based on household or non-household member carrying out a task at least two to three times a week. Household members are the respondent, her spouse, a son aged five and above, a daughter aged five and above, older woman, older man, other woman or other man in the household. Non-household members could be a paid worker, community member, or ‘other’.

* Both female and male household members carry out a specific task; irrespective of age.

** Irrespective of age, i.e. could be a daughter aged five and above or other (older) woman in the household.

*** (Non-) household members other than the respondent; in all other types the respondent is involved.

As described in Section 2.4, the vast majority of the interviewed households in Musanze and Huye are nuclear families (28 out of 30 families), i.e. are composed of the respondent, her child or children and her husband if married (17 nuclear families are female headed). Within nuclear households, all household members, with the exception of very young children, partake in some care tasks – although the main responsibility usually stays with the mother. This is the result of cultural gender norms, which place the responsibility for household tasks with women. So, even if ‘husbands may help’ (Ingabire Eliza, 28, divorced single mother,
three sons, farmer, Muko), ‘women in [Rwanda’s] culture are the ones who are responsible for doing all housework’ (Kamikazi Rose, 31, married, three daughters, farmer, Muko).

Family members generally do different care tasks separately, but sometimes these tasks are carried out together. In both male- and female-headed households, care responsibilities may be delegated to children when women are working or away, or – if present – to husbands who help with care tasks when women are sick, travelling or working. Indeed, some men explained that even if culture dictates that women should do the care tasks at home, they felt it is important for everyone to get involved with care at home in order to contribute to the family (Tuyishime Jacques, husband of Umutoni Mathilde, Mbaizi). For instance, Barore Kelly (husband of Mukamusoni Anita) from Mbazi said that ‘according to the culture, women have to handle the home activities. However, that is about the culture, but to me I feel well when everyone gets involved in the doing care work at home. This indicates that everyone has something to contribute to the family.’ Other men said they also felt it was important to support their wives with some of the unfinished care tasks when they returned from work to reduce their workload (Gabiro Thomas, husband of Mukagasana Marie, Simbi). Hakizimana Fabrice, husband of Munyana Liliose from Muko, said that ‘when [he] come[s] back from work [he] always help[s] [his wife] to do some of the care works at home. This reduces her workload and prevents her from overworking.’ Care tasks which men get involved with include looking after their children, care of animals, farming, digging and sometimes cooking, despite cultural gender norms suggesting that it is ‘taboo for a man to be found in the kitchen’ (Kagabo Peter, KII, Muko). Often, men help out with ‘activities which require much energy such as fetching water and collecting firewood’ (Kamikazi Rose, 31, married, three daughters, farmer, Muko). However, during participatory exercises some women mentioned that ‘most of the time their husbands do not like helping them’ (Musanze Women WWI). Furthermore, we found that in female-headed households – 18 out of the 30 case studies14 – women assumed responsibility for care even more so than in male-headed households, as they generally had no other adult to share care tasks with. For example, one single mother suggested that her responsibility for care work relates to being a single mother, and suggests that ‘in normal circumstances both men and women should share all housework except for [a] few activities which can be best performed by women or men separately’ (Niyonsenga Jeannette, 31, divorced single mother, two daughters and two sons, farmer, Muko). There was no mention of what happens when women are sick in single-parent households, possibly suggesting there are no alternative care arrangements.

Gender norms around sharing care between men and women
Gender norms often dictate perceptions around who is better ‘suited’ to carry out certain tasks. For example, some men suggested that while they helped out there were certain activities such as cooking or cleaning which they could not do better than women (Sibomana Thomas, husband of Umuhzo Agathe, Muko). This was confirmed in some participatory exercises, where women agreed that men needed assistance with cooking and cleaning (Huye Women WWI). The survey showed that almost an overwhelming majority of female respondents15 thought that women were better at household tasks such as cleaning, ironing and cooking than men. This then led to women carrying out specific tasks because they were ‘better’ at it, confirming and reproducing gender norms through the division of tasks taken up by boys and girls in these sites.

Men’s involvement in care activities also depends on the amount of available time men have to engage. Often, fathers come back late in the evening from work (Ayingeneye Delphine, daughter of Abayisenga Dancile, Mbazi; Hakizimana Fabrice, husband of Munyana Liliose,

14 This high rate of female-headed households is related to divorces (initiated by both women and men) or a result of widowhood.

15 87.8 per cent of those who responded that there are ‘tasks that women are naturally (physically/biologically) better at than men’.
Muko) or are very tired when they get home due to the physically challenging nature of their work (Muhoza Esperance, 34, married, three sons and one daughter, farmer, Muko), which may affect their participation in care tasks. This again reinforces and reproduces prevailing gender norms of who does what better, and who therefore is expected to take on which tasks. Families in Muko spoke about men’s participation in care work twice as much as those in Huye (there were slightly more single mother families interviewed in Huye). This may be due to the ActionAid programme in Musanze raising awareness amongst men about the impact of care work on women and encouraging men to help with care tasks (Muhizi John, KII, Muko), although this was not mentioned by any of the families interviewed. Further studies will be required to ascertain the ways in which the programme has contributed to the awareness of gender equality in the community in Muko sector.

When asked who in a household makes the most significant contribution to the care tasks, around 85 per cent of respondents said that it is women alone who do most of the care work; 6 per cent believed that partners/spouses do the most significant works; and 5.5 per cent thought that care activities are equally shared between wife and husband.

**Children as caregivers**
Older children – both boys and girls – help their parents with a variety of different care tasks, and in male-headed households, their involvement is sometimes greater than that of their father. The gender of the child matters in establishing who helps their mother the most in care work, and our findings indicate that daughters help more than their brothers. Sometimes, the oldest daughter is the one responsible, and her older brother may help her rather than being the one who is primarily responsible (Niyonsenga Jeannette, 31, divorced single mother, two daughters and two sons, farmer, Muko).

Children’s participation in care is crucial when their mother is away from home, especially when involved in paid work. As with the time restrictions of fathers, children’s involvement in care tasks depends on the level to which women are present to do the work themselves. Children of mothers who work do more care than their peers whose mothers stay at home (Musanze Girls CBM). For example, a participant of a girls’ participatory exercise in Musanze mentioned that ‘because when my mother goes to work I will be involved in many care activities at home as opposed to my neighbour whose [mother] is at home’.

The care tasks children typically help with are caring for their younger siblings, fetching water, firewood and fodder, and sometimes cooking and cleaning. Children usually carry out these tasks upon return from school and prior to the return of their mothers who often work long hours, far away from their homes. Our findings indicate that frequently more than one sibling help their mother with care tasks, although their patterns of participation and activities still reflect the influence of gender norms. Girls do more of the indoor care tasks and boys more of the outdoor care tasks when there are siblings of both sexes who are old enough to do care work (Musanze Mixed Children CB). During a participatory exercise in Huye, boys mentioned that they could not do care tasks such as ‘carrying the baby and cleaning because we can be laughed at’ (Huye Mixed Children AM).

Daughters’ higher involvement in care work reflects compliance with prevailing gender norms which assume it is primarily a women’s responsibility. As an adult woman participant explained during a participatory exercise, girls help with care tasks because ‘boys do not like doing care work; they can do it when girls are absent’ (Huye Women CB). This can have severe adverse effects, potentially through generations: one daughter in our case study sample had to drop out of school to do the care tasks in the family as her mother is chronically sick and needs help with them (Kanyana Rose, 42, single mother, two daughters and two sons, VUP participant, Simbi).
Where children and fathers are involved, the arrangement may take different forms. For example, fathers may share or play more of a supporting role to children who provide care in the absence of the woman; as is the case for Kamikazi Rose’s (31, married, three daughters, farmer, Muko) husband who supports one of their daughters. The daughter is the one who carries out most of the care tasks when Kamikazi is not around. On the other hand, Umutoni Mathilde’s (43, married, one daughter and three sons, construction worker, Mbazi) husband shares the care tasks with their daughter. Alternatively, children may support fathers who take on the main responsibility for care roles when the mother is away (Barore Kelly, husband of Mukamusoni Anita, Mbazi). As expected, in female-headed households, the involvement of children in care tasks – particularly older ones – is even more critical. For example, Nishimwe Denise’s (30, divorced single mother, two daughters and two sons, farmer, Muko) son says, ‘I am always responsible for almost everything because I am the oldest especially when mother is not around’. However, also in these cases, mothers still have the main responsibility for care tasks in the family and resume responsibility for them when they return home from their paid work. Women’s care tasks may increase or decrease at certain times in the school calendar due to the availability of their children to share in care work, as mentioned by Tuyisenge Marie Rose (28, single mother, two sons, farmer and construction worker, Mbazi), whose care load increases when it is her son’s examination time. Women suggest that when they are doing paid work their children are happy to help with care tasks as they realise the benefits of their mother’s work in terms of supporting their family, even if they would prefer that their mothers were not so overworked and had more time for them (Umutoni Mathilde, Mbazi; Mukamanzi Grace, Simbi; Munyana Liloise, Muko; Uzayisenga Marceline, Muko; Uwera Claudine, Mbazi; Nishimwe Denise, Muko; Uwizeyimana Grace, Muko; Ingabire Eliza, Muko).

My household members have no problem with regard to sharing unpaid care work. They feel happy to see everyone at home working. Children feel proud of helping me… They know that when I work, I will be able to support the family. However, sometimes, they are not happy when I overwork because I feel tired and fail to provide them enough care.

Niyonsenga Jeannette (31, divorced single mother, two daughters and two sons, farmer, Muko)

Extended family

Extended family members rarely partake in care work, especially childcare. These can be the mothers or sisters of the interviewee, who live in separate households, or the woman’s parents if she is a single mother. There is a little more care by non-nuclear family members in Musanze than in Huye, although it is not immediately clear why this may be; overall, the respondents are slightly younger than those in Gishamvu or Simbi for example, so perhaps young women receive more support from their parents (mothers).

Sometimes, neighbours or other community members provide support. Such examples usually involve single mothers or women without male adults. For example, one single mother and her two sons were hosted by a friend who sometimes also provided them with food when they had none (Mukamanzi Grace, 33, divorced, two sons, VUP participant and daily wage labourer, Simbi). Another single mother lived in a house provided by the community after she left her abusive husband (Nishimwe Denise, 30, divorced single mother, two daughters and two sons, farmer, Muko). One woman from a family without an adult male occasionally hired someone to take care of her livestock and someone to help with farming to free her up to carry out other care activities (Mwiza Aisha, 27, divorced single mother, one daughter and two sons, farmer, Muko). Hiring outside help is one alternative in the absence of any family members and friends who could help; however, it is of course a costly alternative, which in turn requires the woman to ‘find’ the resources for such engagement.
Government provision of water
Men most often help out with activities that are physically exhausting and require much energy, for example fetching water. Where available, government provision of water, therefore, significantly alleviates the care burden of both women and men, and frees available time. The significance of public provisioning of water emerged very clearly during participatory exercises. In Huye, women and men who created a Care Public Service (CPS) map explicitly mentioned that ‘they [women] used to fetch water very far but currently they have it very close to them’. Similarly, a woman in a participatory exercise in Musanze stated that ‘the government, by supplying us with water... helps us to get enough time and makes housework easier’ (Musanze Women CB). However, our interviews revealed that even in areas where water was provided by the state, some families both in Huye and in Musanze had been left out and did not benefit from this. For example, Mugisha Juma (husband of Niwemahoro Helen) in Simbi, stated that ‘the government should help us to get piped water. This is a challenge for us. In fact, it is difficult to send a child at the source in the evening’; while Ubaruta Dative (55, single mother, three daughters and three sons, farmer, Muko) said, ‘The government should provide clean/piped water in our village because when one does not have money to pay it at the tap; then the other source is water in the river’.

3.1.2 Paid work

Activities
The majority of women in our study – between 36 per cent in Simbi and 61.5 per cent in Mbazi (see Figure 3.1) – work primarily in agricultural related work, the main source of livelihood for the majority of the overall population. Often, they can do this job while having their children with them, which is important in a context where women have little access to other forms of childcare (Musanze Women CWM 1). Lack of available childcare can prevent women from participating in some paid work (Niyigena Daniel, KII, Simbi): ‘It is difficult to take care of children if they are still young. If they have to go for paid work, the care for the children is not enough and some [women] might fear to participate.’ Women may do more than one job, and much paid work is temporary, occasional and irregular, as well as seasonal.

A lack of available childcare means that women frequently take their children with them when engaged in agricultural work, Huye. Photographer: Birasa Nyamulinda/University of Rwanda.
Figure 3.1: Current types of work of female survey respondents across the sites

Figure 3.1 shows that other activities women mainly engage in are public works (VUP) where and when they are available – in our study in Gishamvu, Simbi and Muko – and non-agricultural daily wage labour in Mbazi. Other jobs included income-generating activities such as selling surplus agricultural produce – including animal products (sometimes alone, sometimes through a cooperative); household work for others; construction work; tailoring; and selling local beer. A few women shared work with their husbands in small businesses.\(^\text{16}\) Of those interviewed, only six women in Muko were engaged in collaborative work in cooperatives.

Women’s paid work activities differ from men’s in that they were seen to be much more restricted. As Figure 3.2 shows, male household members’ main types of work varied more and were more likely to include home-based work outside the house (e.g. agricultural work on compound/plot/own land), income-generating activities and self-employment, and office work (in Mbazi and Muko).

\(^{16}\) These were counted within income-generating activities.
Men and women each engaged in different types of paid work for various reasons. There was a perception that work involving machinery was too hard for women, and better suited to men – carpentry was mentioned as an example in our study (Kagabo Peter, KII, Muko). Another reason mentioned by study participants was that women’s engagement in unpaid care work leaves them with less time to hear about paid work opportunities. Women in participatory exercises in Musanze mention that ‘you cannot find work when you do not have free time to get information about it’ (Musanze Women CWM 1). Mukhizi John, in a key informant interview in Muko, elaborated further:

*Women do not have access to different job opportunities as compared to men. One has access to an opportunity because he/she has access to information. These women do not have access to information because they spend much of their time in unpaid care work. But when men come from the gardens, they go to drinking places where they discuss about current issues, meet other men from there but also get an opportunity to listen to radios from these bars. It is such opportunities that grant men higher chances of accessing jobs.*

The all-importance of access to such information networks becomes particularly poignant when new arrivals in the area ‘are not familiar to many people in this community so [they] cannot easily get paid job in this village’ (Mukamusoni Anita, 35, married, one son and two daughters, farmer, Mbazi).

Whereas women without land or livestock are reliant on finding paid work for food security, women who own land usually spend much of their time working on their own farms and gardens, both for sale of produce and their own consumption. This gives them some level of food security; however, being a time-intensive activity, it also reduces the amount of available time to search for or engage in other forms of paid work.
In Musanze more than in Huye, many women reported spending much time in different types of community work, ranging from participating in evening parents’ meetings; collective farming; caring for the sick and poor; and planting trees (Uwimbabazi Odette, Muko; Nishimwe Denise, Muko). Whereas women reported spending on average between 0.3 and 0.5 hours per day on community and religious activities in Gishamvu, Simbi and Mbazi, respondents in Muko reported spending an average of 1.4 hours per day on such activities.

Gender norms around paid work

Men often considered themselves to be the ones responsible for paid work as they were the ‘heads of the family’ in male-headed households. For example, Murekezi Athanase (husband to Muhoza Esperance, Muko) stated that ‘men in the family should do paid work because they are the heads of the family. They must do paid [work] to support their families; they are also the most energetic people who can afford most paid work tasks.’ However, women often indicated that they feel it is the responsibility of both parents to provide for the children: ‘My husband and I are ones who are supposed to do paid work since we are mature people and the ones who hold the responsibilities for the family. This requires us to be the ones to perform the paid work’ said Munyana Liliose (42, married, two daughters and a son, farmer, Muko); and generally, paid work was shared between husband and wife. In Musanze, husbands and wives also occasionally substituted for each other in the WEE programme (Umuhova Agathe, 31, married, two daughters and one son, Muko; Tumukunde Pacifique, husband of Uwase Jacqueline, Muko).

The vast majority of women reported that their earnings made a difference to the overall household income – with respect to their first main paid activity, 71.5 per cent of women thought the income was a ‘very important’ and 17.2 per cent thought it was an ‘important’ contribution. Married women’s income contributed substantially to household expenditures (e.g. food, school materials). Women’s income was particularly crucial for providing for the family in cases where their husbands had health problems that affected their ability to engage in paid work (Abayisenga Dancile, 46, married, one daughter and four sons, tailor and farmer, Mbazi). Indeed, one woman we spoke to mentioned that ‘it’s me alone at home who does the paid work because I got married to my husband when he was very old... so he is unable to do any work’ (Inez Alice, 42, married, two daughters and three sons, VUP participant and daily wage labourer, Simbi).

Women from female-headed households spoke about being more regularly engaged in paid work than married women who lived with their husbands. However, this might not necessarily reflect a ‘choice’ as women without adult males in the family felt that they had to work to provide for their families as they were the only ones financially responsible for their children (Kaneza Josiane, 34, single mother, one daughter and one son, farmer, Mbazi; Nishimwe Denise, 30, divorced single mother, two daughters and two sons, farmer, Muko). Kaneza Josiane (34, one daughter and one son, farmer), a single mother from Mbazi, said: ‘There is no other choice, I have to work for my children because I am alone’. It is not clear to what extent they engaged in paid work prior to their divorce, separation, or upon becoming a widow. Divorced or separated husbands were not mentioned as providing any financial contribution for their children. However, women also said that not having a husband to share in childcare activities makes going for paid work difficult. For example, Kirabo Agnes (divorced single mother, two daughters, one son, VUP participant and daily wage labourer, Simbi) stated: ‘Working for the home and children when you are alone without a husband to help you, it is really challenging’.

There is a strong sense that paid work is a parent’s responsibility and that children are too young or not allowed to do paid work. The only instance we encountered of children working reflects a situation of high vulnerability of the mother, who is frequently sick, and whose oldest daughter substitutes her in the VUP work accordingly (Kanyana Rose, 42, single mother, two daughters and two sons, VUP participant, Simbi).
**Women’s experiences of paid work**

The regularity, frequency and types of jobs and payment were the main factors seen to be affecting women’s experience of paid work and whether or not to engage with it. For example, agricultural paid work is seasonal – in the rainy season women could find paid work but in summer when it is dry there was no work (Huye Women CC), putting some women in a position where they ‘go beg for food from neighbours because [during the] drought you cannot find where to work for money’ (Mukamanzi Grace, 33, divorced, two sons, VUP participant and daily wage labourer, Simbi). Also, public works are not a regular source of paid work. For example, during a key informant interview it was mentioned that ‘the problem is the work does not last long. For example if there are roads for repair, it can take a week and they are all repaired and there are no more roads to repair’ (Niyigena Daniel, KII, Simbi).

The wages earned by women working under the VUP are fixed, but payments were frequently late (Kirabo Agnes, divorced single mother, two daughters, one son, VUP participant and daily wage labourer, Simbi; Mukamwezi Josepha, 45, single mother, three daughters and three sons, VUP participant and daily wage labourer, Simbi). Wages for agricultural work were sometimes negotiated, especially in periods when there was little work (i.e. dry seasons). This meant that women’s earning was vulnerable to their negotiation power, with Ineza Alice (42, married, two daughters and three sons, VUP participant and daily wage labourer, Simbi) mentioning that ‘[the amount for] digging for someone in a rainy season is… known but like now since it’s drought I have to bargain and I can work for any amount of money or food so as to earn a living for myself and my family’. In Huye, wages could be paid in food rather than cash.

Overall, men in Rwanda are more likely to be engaged in wage employment, and males generally earn better wages (with the exception of farm wage earnings amongst youth, which are very similar) (AfDB 2014). Our findings corroborate this and show, in addition, that payment for small jobs in the village are immediate and therefore sometimes preferable to VUP work (Mukamwezi Josepha, 45, single mother, three daughters and three sons, VUP participant and daily wage labourer, Simbi). Women who sold their agricultural products through the cooperative did not individually set the prices as these were set collectively by the cooperative. Women who were not members of the cooperative selling agricultural surplus bargained with their customers; however, this might not always be favourable. Most of the women interviewed considered that being part of the cooperative was advantageous.

Table 3.2 shows some characteristics of paid work for the three most frequent job activities that the women in our Rwanda case study engage in – agricultural daily wage labour, WEE programme participation and non-agricultural daily wage labour. Non-agricultural daily wage labour includes for example temporary work on roads and houses, on-and-off farming on other peoples’ land, and small, varying jobs around the village, such as tailoring, etc.17 Agricultural day labour or casual labour is very common among the able-bodied extreme poor in Rwanda (it is even granted a separate category in the widely used community-based wealth categorisation scheme ‘Ubudehe’), and we would therefore expect this to present as the main form of paid work for women in WEE programmes and thus in this research.

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17 It is quite unusual in terms of regional employment statistics for there to be more women engaged in ‘non-agricultural daily wage labour’ than in own-account work (self-employment) or contributing family member work. One possible explanation is that the category was misunderstood in the fieldwork and that income-generating activities were included as non-agricultural day labour.
Table 3.2: Characteristics of the three main types of income-generating activities

<table>
<thead>
<tr>
<th></th>
<th>Agricultural daily wage labour</th>
<th>Non-agricultural daily wage labour</th>
<th>WEE programme participation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Average number of hours spent on this type of work</strong></td>
<td>#</td>
<td>#</td>
<td>#</td>
</tr>
<tr>
<td></td>
<td>6.2</td>
<td>8.2</td>
<td>1.7</td>
</tr>
<tr>
<td><strong>Location</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inside the house</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td>At home, outside the house</td>
<td>1.4</td>
<td>0.0</td>
<td>1.4</td>
</tr>
<tr>
<td>Own land/plot (away from the house)</td>
<td>9.6</td>
<td>7.1</td>
<td>12.5</td>
</tr>
<tr>
<td>Someone else’s land/plot/home</td>
<td>83.6</td>
<td>78.6</td>
<td>58.3</td>
</tr>
<tr>
<td>Plantation</td>
<td>2.7</td>
<td>0.0</td>
<td>9.7</td>
</tr>
<tr>
<td>Market</td>
<td>1.4</td>
<td>0.0</td>
<td>1.4</td>
</tr>
<tr>
<td>Construction site/worksite</td>
<td>0.0</td>
<td>14.3</td>
<td>0.0</td>
</tr>
<tr>
<td>Factory</td>
<td>1.4</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td>Other</td>
<td>0.0</td>
<td>0.0</td>
<td>16.7</td>
</tr>
<tr>
<td><strong>Time to work</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0–15 minutes</td>
<td>20.8</td>
<td>7.1</td>
<td>14.1</td>
</tr>
<tr>
<td>15–30 minutes</td>
<td>34.7</td>
<td>64.3</td>
<td>35.2</td>
</tr>
<tr>
<td>30–60 minutes</td>
<td>30.6</td>
<td>21.4</td>
<td>32.4</td>
</tr>
<tr>
<td>1–2 hours</td>
<td>12.5</td>
<td>0.0</td>
<td>15.5</td>
</tr>
<tr>
<td>More than 2 hours</td>
<td>1.4</td>
<td>7.1</td>
<td>2.8</td>
</tr>
<tr>
<td><strong>Safety conditions at work</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Very safe</td>
<td>83.6</td>
<td>100.0</td>
<td>76.4</td>
</tr>
<tr>
<td>Fairly safe</td>
<td>13.7</td>
<td>0.0</td>
<td>23.6</td>
</tr>
<tr>
<td>Neutral</td>
<td>2.7</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>Health conditions at work</strong></td>
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<td></td>
</tr>
<tr>
<td>Very healthy</td>
<td>63.0</td>
<td>92.9</td>
<td>56.9</td>
</tr>
<tr>
<td>Fairly healthy</td>
<td>9.6</td>
<td>0.0</td>
<td>20.8</td>
</tr>
<tr>
<td>Neutral</td>
<td>19.2</td>
<td>7.1</td>
<td>20.8</td>
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<tr>
<td>Not healthy</td>
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<tr>
<td>Very unhealthy</td>
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<td><strong>Childcare facilities</strong></td>
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<td></td>
</tr>
<tr>
<td>No</td>
<td>90.2</td>
<td>100.0</td>
<td>60.0</td>
</tr>
<tr>
<td>Yes</td>
<td>9.8</td>
<td>0.0</td>
<td>40.0</td>
</tr>
<tr>
<td><strong>Observations</strong></td>
<td>73</td>
<td>14</td>
<td>72</td>
</tr>
</tbody>
</table>


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18 This includes digging on other people’s land, or carrying out household tasks for others.

19 ‘Other’ was not further specified in the survey. However, much of the VUP work is on the road or roadside and variable; it is likely that WEE respondents therefore chose ‘other’.
Many jobs seem to be far from home as families reported that women leave early or return home late, and have less time available for their children and for care tasks. This can mean that women spend most of their time on paid work (Hirwa Yvette, 40, widow, three sons, VUP participant, Simbi). Some women reported that their employers dealt unfairly with their working time: Hirwa Yvette (40, widow, three sons, VUP participant, Simbi) mentions that ‘the nature of [VUP] work is tricky because when she gets late at work that day is not counted and that means she will not get paid’. Byukusenge Jennine (46, widow, four sons and one daughter, VUP participant and daily agricultural labourer, Simbi) also reported that when she exceeds the time agreed, her employers do not add money as compensation for extra hours worked.

Time spent travelling to the working place was expressed as an important factor affecting the balance between paid and unpaid work. This varied between areas of study and programmes (see Figure 3.3). On average, most women spent either 15–30 minutes (38 per cent) or 30–60 minutes (32 per cent) to reach their working place. Sixteen per cent only needed up to 15 minutes, while 14 per cent of women travelled, mostly by foot, an hour or more to reach their working places.

**Figure 3.3: Estimated time taken by respondents to travel to the working place (share of respondents reporting)**

![Figure 3.3: Estimated time taken by respondents to travel to the working place (share of respondents reporting)](image)

*Source: Project survey, 2016–17.*

The time that respondents took to reach their working places was noted as being particularly challenging for women in Gishamvu, Muko and Simbi, where between 10.7 per cent and 21 per cent of the respondents travel for more than one hour. This could be related to the nature of the programme as well as the location of the site with respect to employment or work opportunities. Women in Gishamvu and Simbi, where VUP operates, are required to travel or walk a long way; however, not all women interviewed in those locations carry out WEE work as their main activity (25.8 per cent in Gishamvu and 52 per cent in Simbi – see Figure 3.1). Work in and around Muko, where 41.3 per cent of women work in ActionAid’s WEE programme, seems closer; and Mbazi, which does not have any ongoing WEE activities, offered very few opportunities that required travelling relatively long distances.
Many women find the time spent travelling to their working place an additional challenge Huye.

Photographer: Birasa Nyamulinda/University of Rwanda.

Indeed, many women expressed as a challenge the distance to the working place – especially for those employed in the VUP. However, one advantage that the VUP offers is the opportunity for those with physical problems and who live far away to get a replacement and still get paid. For example, Ineza Alice (42, married, two daughters and three sons, VUP participant and daily wage labourer, Simbi) works in the VUP as a replacement for her husband (who is the one registered) who cannot manage physical activities because he is too old. During the times when she replaces him for the VUP work, her elder daughter and brothers do the care tasks, sometimes with help from her husband.

While key informants described the support for care offered by their programmes – such as the ten minutes women with babies are given for breastfeeding in the VUP (Mutabazi James, KII, Huye) or the Early Childhood Development Centres and water harvesting tanks in ActionAid areas (Muhizi John, KII, Musanze) – only 35.8 per cent of women in the survey who were engaged in WEE programmes reported childcare facilities to be available at their place of work. None of the interviewed women mentioned that the work they engaged in provided such services. Women with small children shared that they could either not work, take their child with them, or rely on family members to care for their child, in the absence of childcare facilities. For example, one of the interviewed women, Mukamusoni Anita (35, married, one son and two daughters, farmer, Mbazi) said, ‘I cannot get paid work because of the twins [aged under three] that I have to care for. I can get it once in month when there is no other one to do it.’ Another woman mentions how she has to take her baby with her to her VUP workplace and that ‘I get problem mainly when my baby cries while am working in VUP, carrying… her on my back and then she cries for breastfeeding which affect usual works’ (Umuto Liliose, 21, single mother, one daughter, VUP participant, Simbi). Paid work options open up to women as their infants become older (Mukagasana Marie, 37, married, three daughters and one son, VUP participant, Simbi).
**Value of work**

As shown in Figure 3.4, most women considered that their contribution to the overall income of the household through their paid work was very valuable. In qualitative enquiries, women accounted that ‘paid work is tough but provides money’ (Huye Women CBM). In fact, earning money is often seen as a priority over care work as ‘you cannot live without money’ (Huye Women CC). Occasionally the money is used to pay for help with care work (Huye Boys CBM) – as shown in Section 3.1.1. The money earned by women is used to pay for a range of family needs, mainly food, education and health-related expenses: ‘When I do the paid work, I am able to support my family in one way or another. I can buy food and solve some simple home problems that require money’ (Uwera Claudine, 40, divorced single mother, one daughter and one son, farmer, Mbazi).

**Figure 3.4: Share of respondents expressing importance levels of income through the three main types of jobs**

![Importance of income](#)

<table>
<thead>
<tr>
<th>Importance of income</th>
<th>Very important</th>
<th>Important</th>
<th>Not so important</th>
<th>Not important at all</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agricultural daily wage labour</td>
<td>69.9</td>
<td>15.1</td>
<td>15.1</td>
<td>6.9</td>
</tr>
<tr>
<td>Non-agricultural daily wage labour</td>
<td>65.3</td>
<td>23.6</td>
<td></td>
<td>4.2</td>
</tr>
</tbody>
</table>

*Source: Project survey, 2016–17.*

Being able to pay for these different things and support the family is a very common reason for women choosing to do paid work; and many women in Musanze put some of their earnings into savings groups. However, women do not always earn enough money to pay for all their needs, including food and rent. Mukamwezi Josepha (45, single mother, three daughters and three sons, VUP participant and daily wage labourer, Simbi) mentions that ‘sometimes I fail to get money to pay for monthly rent and when this happens we are in trouble’ and that ‘I do not get paid regularly and… when there is no job then it is difficult to find food for my children’. The money earned by women is also appreciated by their families, especially in relation to getting food and school support. Several respondents reported that women’s income is positively valued by their husbands – particularly in Musanze. For example, Muhizi John (KII, Muko) said that women’s contributions mean they ‘have been able to gain respect in their households by their husbands because they also now bring something at home’. Habimana Juma (husband of Kamikazi Rose, Muko) said that the daily wage earned by his wife helps support their family on a day-to-day basis, which he could not do otherwise as he receives his entire salary at the end of the month. Uwase Jacqueline (33, married, four boys, farmer, Muko) mentions that ‘the family gets worried when I have no paid work because they know we will not manage all household needs’.
3.1.3 The drudgery of care work, paid work and its effects on women

Women describe care work as ‘very tough’ (Mukamusoni Anita, 35, married, one son and two daughters, farmer, Mbazi). Care of babies and small children in particular was seen to take a lot of time, especially when other family members were not available to help. ‘Tiredness or stress often happens when children are ill or when there is no food to give them’ (Musanze Women CWM 1). Cooking was also considered to be ‘very tough’ due to the physical effects of smoke, especially in the rainy season when it becomes necessary to collect and use wet or not completely dry firewood, and the smoke it produces during cooking can lead to ‘headaches and feeling dizzy’, as well as other ‘illnesses especially when one do not have complete dry wood’ (Huye Women CWM; Musanze Women CWM 1).

Some types of food – particularly dry beans, which are widely consumed in Rwanda – are much more time consuming to cook than other beans which makes cooking with (semi-) wet wood particularly challenging: ‘Beans take too much time while rice cooks shortly’ (Huye Women CWM). Also, women mentioned fetching water and cultivating their gardens as being difficult and ‘taking too much time’ (Hirwa Yvette, 40, widow, three sons, VUP participant, Simbi; Huye Mixed Adults AM). One woman who works for VUP finds that ‘paid work is better and easier to carry out in comparison to care work. Care work is very tough’ (Umutoni Liliose, 21, single mother, one daughter, VUP participant, Simbi).

The considerable amount and intensity of care work often meant that women were busy and unable to rest. This was reflected when looking at the scant time they had at their disposal for leisure and personal use, as shown in Table 3.3. The average number of hours spent on leisure and personal use are very low – in fact, the lowest across all countries in this research project. Even the inclusion of eating and training into leisure time did not make much of a difference to this small amount of time; with the exception of Muko, where a little more than one hour was added when counting eating and training times.

Table 3.3: Average number of hours spent on personal care, hygiene, eating, attendance of training programmes and leisure

<table>
<thead>
<tr>
<th></th>
<th>Gishamvu VUP</th>
<th>Simbi VUP</th>
<th>Mbazi control (no WEE)</th>
<th>Muko AAR</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Average hours spent on personal care and hygiene, eating, training programme and/or leisure</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-WEE</td>
<td>-</td>
<td>1.1</td>
<td>1.3</td>
<td>1.9</td>
</tr>
<tr>
<td>WEE</td>
<td>1.3</td>
<td>1.3</td>
<td>n/a</td>
<td>1.8</td>
</tr>
<tr>
<td><strong>Average hours spent on personal care and hygiene, and leisure only</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-WEE</td>
<td>-</td>
<td>0.7</td>
<td>0.9</td>
<td>0.8</td>
</tr>
<tr>
<td>WEE</td>
<td>0.8</td>
<td>0.5</td>
<td>n/a</td>
<td>0.6</td>
</tr>
<tr>
<td><strong>Observations</strong></td>
<td>31</td>
<td>55</td>
<td>18</td>
<td>96</td>
</tr>
</tbody>
</table>


Note: Only three respondents are non-WEE participants in Gishamvu; therefore averages are not displayed here.

Women were found to be often busiest when their children were at school and therefore could not help them with the care tasks. Feelings of being overburdened were particularly strong during the agricultural season when women had to combine their usual care work with agricultural activities on their land, especially because farming and cultivation are so labour intensive. For example, Kamikazi Rose (31, married, three daughters, farmer, Muko) mentioned that ‘sometimes I overwork while doing unpaid work especially in the season when I have to do home activities and participate in agricultural activities at the same time’.
Women also expressed that it was harder to feed families in summer when they struggled to find agricultural work (Huye Women CC), thus just shifting the ‘worry’. Due to the irregular nature of much of the work that women engage in, ‘It’s hard to get time to rest and… it’s hard because it’s not a guarantee to get work to do’ (Ineza Alice, 42, married, two daughters and three sons, VUP participant and daily wage labourer, Simbi). Not being able to find paid work was particularly stressful for women who were solely responsible for their families.

Paid work helps women to support their families and meet some of their family’s care needs and this input was appreciated by everyone. Women in the study shared that their children were fed, housed and able to go to school as a result of their paid work. Some women mentioned that paid work was better than care work as ‘it empowers the family’ (Mukamusoni Anita, 35, married, one son and two daughters, farmer, Mbazi). However, the amount of paid work women were able to do was often not enough to meet their family’s needs; and children expressed unhappiness when their mothers were unable to buy for them all the things they need. For example, Hitimana Cassien (son of Hirwa Yvette, widow, Simbi) mentioned that ‘his mother cannot be able to provide all that they need and it hurts him, sometimes she fails to get school requirements like school uniform’. In addition to this, the long distances that most women had to travel to and from the location of their paid work (see Table 3.2) meant less time for care responsibilities. The commuting time, women shared, reduced the time to do their care work, and as a result some women had to work late in the evening on care tasks – leaving them little or no time to rest.

Overwhelmingly, women found it tiring to combine paid work and unpaid care work. Often there were many competing demands on women’s time. Figure 3.5 gives an idea about how women divide their time between different tasks. A closer look reveals that multitasking – or ‘time stretching’ – was a very frequent strategy. Across the different sites, women multitask for between 5.3 hours per day and eight hours per day in Gishamvu and Mbazi, respectively.

**Figure 3.5: Average number of hours during which time was spent on different activities**

![Graph showing average number of hours spent on different activities](image)


Notes: *Includes sleeping, napping, personal care and hygiene, eating, training programme and/or leisure time.
Interviewees said that sometimes care tasks were not done in their absence (Tuyishime Jacques, husband of Umutoni Mathilde, Mbazi); and many women reported returning from work already tired and then having to do those care tasks in and outside the home.

I get home tired and now I start doing the unpaid care and there is also a client who wants me to help repair his clothes and my baby wants to breastfeed, so it becomes too much for me and I end up failing to get time to rest.

Abayisenga Dancile (46, married, one daughter and four sons, tailor and farmer, Mbazi)

In Muko, Munyana Liliosoe’s husband said: ‘[M]y wife sometimes gets so tired due to combining both paid and unpaid work. As a result, she misses out some care work at home. We take supper very late and little time is given to children.’ Others said they went to work tired as a result of the large amount of time they had to spend on care work before going to do their paid work (Mukagasana Marie, 37, married, three daughters and one son, VUP participant, Simbi). During our fieldwork, we frequently observed women almost falling asleep with tiredness during meetings.

Being overworked – feeling unable to get all their work done on time and feeling stressed, tired, and lacking the time to rest – can have significantly negative impacts on women’s health. Indeed, one woman mentions that ‘I suffer constant sickness due to overworking’ (Niyonsenga Jeannette, 31, divorced single mother, two daughters and two sons, farmer, Muko). Husbands acknowledged that it was tiring for their wives to combine paid and care work. Some husbands also felt that they were unable to spend enough time with their wives due to all the work their wives do. For example, Tuyishime Jacques (husband of Umutoni Mathilde) from Mbazi, said that a challenge of his wife combining paid and care work was that ‘me and the children, we do not have enough time to be with her’. Some husbands mentioned that they recognised the time- and energy-consuming nature of care work, and tried to help their wives when they had the time. Gabiro Thomas (husband of Mukagasana Marie) from Simbi, observed that ‘I notice that unpaid work takes most of my wife’s time. In addition, it requires a lot of energy; the reason why, I have decided to help her whenever I have time or find it necessary.’ This support in turn gave women an opportunity to rest (Musanze Women CB). One woman explicitly mentioned this support and its positive effect: ‘Combining both paid and unpaid work is difficult but I do it with the support from my husband’. However, despite his help she still had ‘to wake up early in the morning or sleep late night in order to perform all activities as planned’ (Umuhozo Agathe, 31, married, two daughters and one son, Muko). Furthermore, husbands who helped with undone care tasks upon returning after a long day of work get tired themselves, as it reduces their time for resting. Moreover, when men take time off from paid work to care for their sick wives and do housework, ‘this results in a lack of income in the family’ (Musanze Men WWI).

Sole female earners felt that being the only income earners made balancing paid work and unpaid care work especially challenging for them, and the amount of time that women spent on paid work vis-à-vis care work depended on the type of paid work they did (Ineza Alice, 42, married, two daughters and three sons, VUP participant and daily wage labourer, Simbi). However, their children pointed out that ‘there is no choice, however much hard it is, she has to do it for us to survive’ (Kajyambere Eugene, son of Ineza Alice, whose husband’s advanced age prevents him working). Single working mothers also felt the pressure of balancing both paid work and feeding and caring for their children and infants (Kirabo Agnes, divorced single mother, two daughters and one son, VUP participant and daily wage labourer, Simbi). The only way for some women to get everything done, was to get up very early to prepare food before they set off for work and take their infants with them. The longer the distance they had to travel for paid work, the harder it became to balance all their tasks.
Most women, especially in Huye, reported that they did not have enough time to engage consistently with community work, although they acknowledged that this has a negative effect on the community (Nishimwe Denise, 30, divorced single mother, two daughters and two sons, farmer, Muko), as ‘it would be better for me to join them to perform some activities’ (Uwera Claudine, 40, divorced single mother, one daughter and one son living with her, farmer, Mbazi). Women were well aware of the benefits of being in cooperatives, both in terms of material benefits and as a source of new ideas (Uwimbabazi Odette, 37, married, three daughters and two sons, farmer, Muko). Having a leadership role in the community can be especially hard to balance with paid and care work (Munyana Liliose, 42, married, two daughters and a son, farmer, Muko). Uwase Jacqueline (33, married, four boys, farmer) is the leader of a cooperative in Muko and says that ‘when the time for the cooperative coincides with paid work, [she] prefer to do paid work’ as it pays more than organising and attending meetings which she said was very time consuming.

**The impact of the pressure and care distribution on women and children**

Women’s multiple responsibilities were found to affect both their physical and mental wellbeing, as well as impacting on their family.

Even where women had support with care tasks from their families, the nature of their paid work together with the care tasks left for them to do often made them tired out and overworked (Uwera Claudine, 40, divorced single mother, one daughter and one son living with her, farmer, Mbazi). As a result, one women mentions that ‘I sometimes ignore paid work like one day a week where I take rest and care for my home and children’ (Uwera Claudine, 40, divorced single mother, one daughter and one son living with her, farmer, Mbazi).

Due to the physically challenging and time-consuming nature of the paid work, such as that on the VUP, and the drudgery of unpaid care tasks, women also experienced health problems including headaches and back, chest, arm and leg pain (Huye Men CBM; Musanze Women CWM 1; Musanze Women CWM 2; Huye Women CBM). In a participatory exercise in Huye, men noted that ‘mainly women complain about physical pains like headache, back pain’ (Huye Men CBM). Cooking, for example, especially with wet or semi-dry wood could cause breathing problems and eye irritations (Musanze Women CWM 1). Women in Huye mentioned that as a result of ‘VUP activities in the road, they feel back and arm pains and get headaches’ (Huye Women CBM). A woman in a participatory exercise in Musanze complained that ‘while cultivating, she can feel back pain and pain in her arms’ (Musanze Women CWM 2).

Agricultural work is tough on women’s bodies, Musanze and Huye.

*Photographer: Birasa Nyamulinda/University of Rwanda.*
Apart from the immediate impact on the women themselves, women’s work also limited the time they could devote to their children, with one child mentioning that ‘sometimes [my mother] works very far away from home and we may spend the whole day without seeing her’ (Kayiranga Samson, son of Kirabo Agnes, Simbi). Children reported ending up hungry and eating late when their mother returned home late from their working place and was not there to cook. Hakizimana Fabrice (husband of Munyana Liliose) from Muko, mentions that ‘combining both paid and unpaid work also affects the children so much since sometimes they go to bed before eating; especially when the food is prepared late and they cannot wait until the food is ready’. To prevent such negative effects, some women, such as Uwase Jacqueline (33, married, four sons, farmer, Muko), prioritised preparing food for their children over other care tasks. Some boys mentioned that ‘when my mother has paid work, we get affected because she has no time to take care of us; as a result, we often get sick’ (Huye Boys CBM). Children both appreciated the care their mothers gave them and were unhappy when their mothers were not around to care for them. Some mentioned the care they got from their fathers, but this was rare as mothers were seen as the primary caregivers. Children generally understood that their mothers had to go for paid work to provide for the family even if it meant they do not receive all the care they would wish for. Yet, they shared the feeling that they ‘work too much and feel lonely when [their mother] has gone to work for paid job’ (Huye Girls CBM). Many children wished that their mothers worked less, and nearer to home. They also expressed concerns for their mothers’ health, especially as they saw them getting home late after having commuted long distances to and from their paid work.

_I would prefer my mother to work fewer hours than she does and work not far from home since sometimes she works far from home. If she worked nearer, she would help us in doing some work at home and would not get tired._

(Rugamba Jackson, son of Uwizeyimana Grace, Muko)

Women were also aware of the impact their time poverty has on their children and worried about the little time they could spend with them. For example, Ingabire Eliza (28, divorced single mother, three sons, farmer, Muko) noted that ‘the effect of combined work on my children is that I do not find enough time to guide them when they are doing homework which affects their performance at school’. Muhoza Espserance (34, married, three sons and one daughter, farmer, Muko) mentions that her children ‘do not get me when they are in need. The reason is that I am always busy with paid and unpaid work.’

In addition to children wishing they could spend more time with their mothers and worrying about her, children – as shown previously – often supported their mothers or families in general with care tasks. Parents, and children themselves, appreciated this involvement and its positive impact for the family. However, similarly to adults, children felt overloaded with care tasks (Huye Boys CBM; Huye Girls CBM). Some also mentioned ‘I feel unhappy but I am overloaded with care work because there is no other alternative [when my parents are at work]’ (Uwiragiyegashy Hugard, son of Uwimbabazi Odette, Muko). Care tasks that children found particularly difficult or did not like included collecting firewood, water and grass, which were often amongst their main tasks. Collecting fodder and firewood was found to be tiresome as the children had to travel far into the hills (Habiyambere Donat, son of Ubaruta Dative, Muko; Kayiranga Samson, son of Kirabo Agnes, Simbi). Other children found looking after their younger siblings very difficult. For example, Uwamwezi Claudine (son of Mwiza Aisha) from Muko, mentioned that ‘when my mother is not around, I stay with children and find it really difficult moment for me’. Participants in the Huye Boys CBM said that ‘when I fetch water, I put a jerry can on the back which makes it painful’, while participants in the Huye Girls CBM mentioned ‘carrying firewood is tough work; it causes a headache’ and ‘our back hurts after cleaning for too long’, while ‘collecting grasses and washing make arms tired and causes pain on fingers’.

38
Many of the children interviewed (18 of the 41 children) for the in-depth case studies shared that they got tired as a result of the care work they do. However, a small majority (23 of the 41 children) of them did still have time to rest, study, or play with their friends and/or siblings. Almost half of the children found it hard to combine their schoolwork with the care work they did upon their return from school, reporting that they got tired and did not have time to play with their friends. Nishimwe Denise (30, divorced, two daughters and two sons, farmer, Muko), a single mother, mentions that sometimes the care duties she assigns to her son ‘affects his performance at school’. Girls tended to have less time than boys to rest, study or play with friends – because of how care is distributed between boys and girls and their parent(s). One mother, for example, recounted:

My daughter and son get tired too, since they combine school and unpaid work at home. It is so tiring and for instance my daughter does a lot of care activities to the extent that she does not get enough time to play with friends due to some duties assigned to her.

(Uwizeyimana Grace, 35, divorced single mother, four daughters and one son, farmer and daily wage labourer, Muko)

4 Discussion – Factors influencing women’s experiences of ‘double boon’ as compared to double burden

This section presents the analysis of the range of respondents we interviewed, identifying the main factors which seem to make a prominent contribution to whether the women are moving towards achieving a ‘double boon’ or are trapped in a depleting cycle of imbalance between paid work and unpaid care work. Factors such as family size, support in the social organisation of care, family composition and whether a women lives with her husband or is divorced or widowed, as well as the characteristics of the paid work undertaken by the woman, are examined below.

Two case study examples illustrate the impact of the social organisation of care on whether women can achieve a ‘double boon’ or feel overburdened. For instance, Mukamanzi Grace is a divorced mother of two sons and lives in Simbi. She is a beneficiary of the VUP, the main activities of which include rehabilitation/construction of feeder roads and terraces. The VUP sites are located far from Mukamanzi’s house and she carries her youngest child with her to the worksite because there is no one else at home to take care of him. Besides her engagement in the VUP, she does paid work digging for others, especially when she is not working for VUP. This additional/substitute work helps her to get extra money because she is paid immediately after completing the work whereas the VUP pays on a monthly basis. Having no one else in the family to look after their small children can restrict women’s work opportunities or it means they need to take their small children with them to work or leave them on their own at home. A number of women who are struggling to strike a balance between their paid work and care work are in a similar position of having no help from their family.

In contrast, Kamikazi Rose lives with her husband and three daughters in Muko where she is a member of an ActionAid-supported cooperative and sells local beer in her village as a source of income. Her husband, Habimana Juma, works as a security guard, which means that he is not always at home. Kamikaze does most of the care activities at home – concurrently with her paid work. However, she gets assistance from her husband when he is
at home, especially during the day, when he takes care of the children and does some cooking when she is not at home. Habimana Juma says,

*When I come back from work, I always help her to sell beer so as to reduce the activities she does. So she gets enough time to do care work at home. This reduces her workload and she gets time for leisure and rest.*

Her sister also helps with care tasks and her elder daughter, Rachel Nyirahabimana, takes care of the young siblings and helps their mother with cooking, and fetching water and firewood. However, Rachel can only do care activities in the evening when she is back from school. The fact that Kamikazi Rose has some people at home who can help means that she is able to undertake income-generating activities such as selling beer in her bar even during the evening.

### 4.1 Striking the balance – the ‘double boon’

The majority of women (17 out of 30) interviewed for the case studies can be categorised as struggling, and very likely losing the battle, to achieve a good balance of unpaid care work and paid work. But a small number of women (7 out of 30) appeared to be *en route* to achieving a more positive balance, even though their objective circumstances are far from ideal. A variety of factors influence whether women experience a successful balance between care and paid work, including their family composition and support with care work, the availability and conditions of paid work, and the environment they live in. The factors that make a difference to how women in similar positions, family and workwise, manage to create a more successful balance between paid and care work are not easy to disentangle, but some characteristics or combinations stand out:

**Women who are the sole adult earners and carers for their families make up the vast majority of the case study families who are struggling the most** (16 out of the 17 in this category). These mainly include women who have been widowed or are divorced, and in one case where the husband is unable to work as he is too old *(e.g. Ineza Alice, 42, married, two daughters and three sons, VUP participant and daily wage labourer, Simbi).* *The responsibility for providing for the family falls upon them so they are forced to find work where they can, while at the same time, as women, they are also still expected to be primarily responsible for the care work in the family.* This means that while their older children may help extensively with care tasks, they still often have a lot of care tasks to do when they return late from their workplace or when their children have school commitments. Furthermore, not all of these women have children who are old enough to provide much assistance. In all cases, their children are negatively affected by their absence, feeling tired as a result of helping with care tasks, and generally missing their mother’s input in their nutrition, education, and wellbeing. As care tends to be focused within the nuclear family, these single-parent families receive little adult assistance from elsewhere, including from their extended family, which increases the burden of responsibility on single mothers. Some receive a little assistance from the community or neighbours in terms of housing and food *(Nishimwe Denise, 30, divorced single mother, two daughters and two sons, farmer, Muko; Mukamanzi Grace, 33, divorced, two sons, VUP participant and daily wage labourer, Simbi)*, but it is not enough to make an appreciable difference to their situation.

**Women who are relatively better off live in families which have other adults also contributing to providing income and care,** so the burden of responsibility on women is lessened. Generally, these are nuclear families with a working husband and wife; but sometimes also include the very few single mothers who live with their extended family, who

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20 The other family is newly arrived in the area and struggling to find work, especially as they do not have childcare for their young twins and are not involved in a WEE programme *(Mukamusoni Anita, 35, married, one son and two daughters, farmer, Mbazzi).*
provide them with additional support. The combined incomes of adult family members provide families with greater security and support, easing the responsibility on women for providing for their families through paid work. However, even in these families, women’s paid work is necessary for meeting household needs (Uwase Jacquiline, 33, married, four boys, farmer, Muko). Husbands and other adult family members, as well as children, are also active in helping with care tasks, distributing and easing the responsibility for care slightly away from the woman. Some of the women who are relatively better off have husbands who mention that they recognise that their wives have a lot to do and thus they help her when they can (Gabiro Thomas, husband of Mukagasana Marie, Simbi; Uwimana Denis, Muko). Due to the time-consuming nature of paid and care work, even in these relatively better-off families, women sometimes do not have enough time for either their children or themselves; and children and husbands feel tired from the care tasks they do.

Secure housing and land ownership may also be a factor in influencing whether women experience moving towards a successful balance between care and paid work. A few of the women who are doing worse off do not own their own homes or land, and thus have the added responsibility of needing to earn money for rent each month on top of living expenses for food, school, etc. (Byukusenge Jennine, 46, widow, four sons and one daughter, VUP participant and daily agricultural labourer, Simbi; Kirabo Agnes, divorced single mother, two daughters, one son, VUP participant and daily wage labourer, Simbi; Mukamwezi Josepha, 45, single mother, three daughters and three sons, VUP participant and daily wage labourer, Simbi). Lacking land also makes them reliant on finding work from others as they do not even have the opportunity to sell surplus farming produce or feed themselves with their own produce.

Serious health problems or domestic problems can lead to insecure situations and coping mechanisms, which leave women and their families worse off. For example in Simbi, Kanyana Rose’s daughter has to replace her in paid and care work when her health problems get worse, and she has had to drop out of school. Mukamanzi Grace’s ex-husband (33, two sons, VUP participant and daily wage labourer, Simbi) has taken away the son she relied on to help her with care work, leaving her alone to juggle unpaid and paid work responsibilities.

The nature of paid work seems to be a major contributing factor to the challenges faced by women and their families in balancing paid and care work. Many of the women who are struggling to achieve a positive balance work long hours, far from home on the VUP or in agriculture. This means they lose time for paid work and care in travelling to and from their workplace, and that they are tired from the journey. These findings corroborate some of the problems identified in Kayonza district (Eastern Province) and Gisagara district (Southern Province) in a report by FAO (2016), which found that although the creation of public works has empowered women, it has also generated challenges related to care activities.

The beneficiaries of the VUP are required to walk from their homes to the worksite daily from Monday to Friday to start work at 7.30am and finish around 2pm. Not working sufficient days to meet VUP targets; significant payment delays; unattractive pay rates; limited skills development, and long distances to worksites contribute to women being overburdened by commuting, paid work and unpaid care tasks. Many women do not have a source of reliable income, especially in the dry season when it is harder to find agricultural work, which makes life stressful for them. The income that they earn is not always enough to provide for their family’s shelter, nutrition, education and other needs. With limited help at home, they find combining paid work and care work tiring and feel overworked. Even women who are doing relatively better find paid work tiring, but they are supported in their paid and care work responsibilities by other adults in the family.
Social networks matter in relation to creating favourable conditions for balancing paid work and care tasks. One of the women who is worse off does have a husband, but as they are both new in town they are struggling to find work. She has two very young children which is an additional restriction on her work opportunities.

The hilly terrain in these communities means tasks such as collecting water and firewood become more time consuming than they might have been otherwise, having a negative impact on the balance between care and paid work. Nearby access to clean water was highlighted as a problem for most families, whether or not they were doing worse or better off. Problems with accessing water were referred to more often in Musanze than in Huye. The Huye Mixed Adults CPS mentioned that piped water has been installed so they no longer have to go very far for water. Despite Huye having lower levels of poverty than Musanze, more of the worst-off families interviewed lived in Huye (11 out of 17). Perhaps this is because, of these, ten are female-headed or de facto female-headed households. Another factor could be due to the nature of work in this area that these women engage in, the VUP, which is irregular and can be very far away.

5 Conclusions
5.1 Aspirations and solutions proposed

5.1.1 Decent work

Solutions proposed by women and their families who were interviewed include that the government should provide more jobs or expand the VUP to provide more work (Mukamusoni Anita, Mbazi). Many of those participating in the VUP would like their payments to be made at least within three days of the work being carried out as they rely on the money for their immediate needs (Mukamanzi Grace, Simbi; Kirabo Agnes, divorced single mother, two daughters, one son, VUP participant and daily wage labourer, Simbi). For example, Ineza Alice (42, married, two daughters and three sons, VUP participant and daily wage labourer, Simbi) explained:

_They [VUP] should try and pay us every day after work or at least after three days because some of us depend on money earned from VUP for a living. Most times we borrow food from our neighbours promising to pay them when we get paid as well._

In general, women from both districts feel that they should be paid more for the work that they do. For example, Umutoni Mathilde (43, married, one daughter and three sons, construction worker, Mbazi) requested ‘them to increase on the payment we are given since it too little compared to the type of work we are supposed to do’.

Women also suggested that the VUP should provide them with private and safe spaces where they can breastfeed their children and leave them for naps, as well as providing flexibility with start times to accommodate those with childcare responsibilities (Kirabo Agnes, Simbi). Byukusenge Jennine (46, widow, four sons and one daughter, VUP participant and daily agricultural labourer, Simbi) for instance, suggested that VUP ‘put some flexibility in starting time since most people come from far and others have babies to take care of first’.

Furthermore, the analysis uncovered that the distance to work is a crucial factor that influences women’s ability to strike a favourable balance between unpaid care work and paid work. Providing opportunities closer to communities – or in the absence of such possibility to
provide transport facilities would greatly reduce time and physical effort spent on commuting, and thus free time and energy for paid work or unpaid care work.

Provision of enabling environment
Women feel that the government and NGOs should provide them with credits to start or expand businesses. For example, Ubaruta Dative (55, single mother, three daughters and three sons, farmer, Muko) requested ‘microcredit so that we can engage more in income-generating activities’. In addition, they would like them to provide training and capacity building in relation to both improved farming skills and new businesses. Nishimwe Denise (30, divorced single mother, two daughters and two sons, farmer, Muko) for instance, requested ‘regular workshops and training on farming techniques so that we can increase productivity’. The women also think that the materials needed to start up these small businesses or to develop their agricultural work should be provided by the government and NGOs, including seeds and fertilisers (Kamikazi Rose, Muko). There were also requests that the government provide them with domestic animals (Mukamanzi Grace, Simbi). In addition, the government should provide villages with feeder roads so they can get their produce to markets (Tuyizere Gad, Muko). There were requests for buildings to serve as the offices of cooperatives or to host businesses (Sibomana Thomas, Muko). The government was also asked to support farming by providing veterinary officers in villages and sustainable measures to control soil erosion (Uwimbabazi Odette, Muko). In addition, one woman requested that the current peace conditions prevail so that they can develop their family and continue doing business (Umuhzo Agathe, 31, married, two daughters and one son, Muko).

Recognition and valuation of care
There was little mention among the women interviewed of recognition and valuation of care as a solution, although women engaged in a participatory exercise in Musanze mentioned that ‘there is a need for advocating from the household level about sharing care activities’ so that husbands are aware of the need to help their spouses (Musanze Women CB). Key informant interviews made more mention of the importance of programmes to raise awareness amongst men of the difference their involvement in care could make. For example, Kabeera Geoffrey (KII, Muko) highlights the role that the Rwanda Men’s Resource Center (RWAMLEC) programme has had in helping ‘make [men] understand the importance of helping their wives in all care activities’.

Redistribution
Many women feel that the care could be distributed more in their families. For example, Tuyisenge Marie Rose (28, single mother, two sons, farmer and construction worker, Mbazi) said ‘my family should take some time to perform some of the activities so that I can balance my paid an unpaid work well’. In addition, others also feel that men could support women with cultivation and cooperative work so that they can sell the harvest together (Musanze Mixed Adults AM). In addition, some women would like the community to be more involved in the care of their children when they are not around. For example, Muhoza Esperance (34, married, three sons and one daughter, farmer, Muko) wishes ‘the community would be able to [help] me with taking care of my children especially when I and my husband have gone for paid work’. Some women mentioned that if they were paid enough they would be able to afford to pay someone to help them with their care tasks (Musanze Women CWM 2).

Women suggested that NGOs could set up childcare centres where they could leave their children if they had to go for paid work (Umutooni Mathilde, Mbazi; Muhoza Esperance, Muko). Women also suggest that their employers should provide them with health insurance (Musanze Women CBM).

A number of women said that the government should provide families living in poverty with health insurance and assistance with housing and children’s education. For example, Mukamwezi Josepha (45, single mother, three daughters and three sons, VUP participant
and daily wage labourer, Simbi) wished the government would ‘provide accommodation to poor people like me’. In addition, they feel that the government should provide their villages with access to clean water and a source of energy for cooking, which would save them time in collecting water and firewood, as well as electricity (Musanze Women CC). Considering the negative impact of neglecting their education and the inherent potential for the intergenerational transmission of poverty, government employment programmes should consider sick leave in order to avoid substitution by children.

Reduction of drudgery
Children especially feel that there is a need to reduce the drudgery of their mother’s work so that they do not work so far away or for such long hours. For example, Zigama Placide (son of Uzayisenga Marceline) from Muko would prefer his mother to ‘work few hours and work near home because when she works far from home she comes back tired’. Key informant interviewees suggest that the provision of improved stoves, use of biogas, and provision of piped water and water tanks could ease the care burden on women (Muhizi John, Muko).

Representation and organisation
There was no suggestion that representation and organisation could be a solution to problems balancing paid and care work.

Policy-level solutions
The women and their families did not focus on policy-level solutions beyond the request that the government provides assistance to the poorest and brings services such as water, electricity and transport infrastructure to their villages.

5.2 Conclusion
Balancing paid work and unpaid care work is a daunting task for the majority of women in Rwanda, as discussed above. The prevalence of cultural norms and traditional beliefs still influence the socio-organisation of care in some families today. However, policies enacted by the government and support from development partners have heralded some changes in the traditional and cultural beliefs about the role of women in the community. Hence, things have started to change in most rural areas in Rwanda where men have increasingly begun to accept that they should be involved in activities traditionally set for women.

Women have also started taking part in different income-generating activities and off-farm programmes owing to economic necessities of supporting their families. However, despite this increased engagement in paid work, care activities were found to be still regarded as the responsibilities of women rather than men. The share of care tasks was seen to differ between households, mainly depending on household composition, size, marital status and type of work. Large families with children above ten years tended to share care activities at home thus reducing the burden women would incur. Most respondents mentioned that caring for children was the most difficult task to handle in combination with paid work. Women and children were seen to be negatively affected if the combination of paid work and caring of children was not well balanced – the case unfortunately for the majority of our respondents.

Household composition, in particular age of children and the presence of other household members who could participate in care tasks; the ownership of housing and land; the nature of the paid work – in particular the distance between home and work location; and infrastructure are decisive elements of the extent of burden imposed by the imbalance of paid work and unpaid care work.

With respect to paid work, more work opportunities with frequent and regular pay, flexible starting times and the provision of private and safe spaces is one element that could enable
women to move towards a ‘double boon’. Where work opportunities are located far from communities, transport facilities would significantly reduce the time and physical effort women expend in getting to the worksite and thus also contribute to a better balance between paid work and unpaid care work.

Help in acquiring skills and resources that would enable women to successfully start and maintain private small businesses, and the provision of better infrastructure that would facilitate access to markets are further opportunities to make a difference in women’s lives.

In terms of unpaid care work, childcare centres at the workplace, government support with housing, education and health insurance, and local provisions of water, electricity and transport infrastructure would take much pressure off women to engage in multiple ways of raising income in addition to carrying out unpaid work, particularly for those that live alone with young children, and significantly reduce the drudgery and opportunity costs of unpaid care work.
Annexes – Research tools: a summary

Annexe 1: Quantitative survey

Quantitative data were collected using a purposively designed questionnaire that was administered with women respondents. The questionnaire included modules on collecting basic characteristics from all household members, women’s time use, the sharing of unpaid care, characteristics of women’s paid work and unpaid care work, and also on decision-making and social norms. In each country the questionnaire was administered to 200 women across four sites, with the minimum criteria that each woman was in paid work, from a low-income household, and with at least one child under six years old. Out of 50 women per site, 30 were to be participants in selected women’s economic empowerment (WEE) programmes, and 20 non-participants.

A1.1 Synthesis of the questions contained in each module

1. Household roster. Respondents listed each household member, defining their relationship to them, their gender, age, level of (and/or if they are attending) education, and the type of paid work they are currently engaged in, if any.

2. Women’s time allocation. Respondents were asked to describe the activities they undertake on a typical day based on a closed list of activities. For each hour-long time interval (e.g. from 4am to 5am), they listed their main activity and one simultaneous activity (if any), and stated whether they were also responsible for a child and/or for a dependent adult. Additional questions verified the representativeness of the day they described by checking whether they included/omitted activities that they usually/rarely undertake.

3. Values, norms and perceptions. This module began with questions revolving around respondents’ perceptions of who, within their household, made the most significant contribution to care tasks/household work/financial needs. Subsequently, questions addressed the gendering of different types of work (i.e. whether women were naturally better than men at X, and vice versa), the perception of different activities as ‘work’, their value to them, and the owner/s of responsibility for undertaking them. The module concluded with a set of statements that respondents had to dis/agree with, revolving around how care should be organised within their household along gender and generational lines, and what role, if any, the state should have in the provision of essential services which affect the quantity and quality of care (e.g. health care, childcare).

4. Women’s decision-making. Questions addressed the decision-making processes within the household in relation to: the cash generated by the respondents’ and/or other household members’ paid work; children’s schooling, sickness and behaviour; and the respondents’ capacity to participate in community meetings and activities.

5. Paid work. This module focused on the first and second most important type of paid work undertaken by the respondent in the last 12 months, as well as on their WEE programme-

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21 The research project was undertaken in India, Nepal, Rwanda and Tanzania.
22 ‘Household members’ are defined as ‘all those who normally sleep in your home and share meals with other members of your home and who have been living with the household’.
23 Any daughter or son younger than 18 years old was defined a child.
24 A dependent adult could be a ‘sick, disabled or elderly’ person.
supported paid work. It began with a description of what it was/is, the type and amount of remuneration they received for their labour and its contribution to the household income. Subsequently, respondents were asked to describe its location (and time and means of transportation used to reach it, if relevant), health and safety conditions, and availability and quality of childcare facilities.

6. **Sharing unpaid care.** Questions addressed the distribution of care work activities within the household between the respondent, the spouse/partner, the oldest daughter and son, and any other adult potentially involved in care work (e.g. kin, paid worker, neighbour, etc.). Respondents were asked to state how frequently each household member did a number of unpaid care and paid work activities, in a range of ‘never’ to ‘always’. They were then asked if this organisation varied when the respondent was pregnant with her youngest child (e.g. who took on what responsibility) and in the three months after his/her birth, and if so, who took over the largest amount of care work and other work/tasks in their household.

7. **Interaction between unpaid care and paid work.** This module addressed potential gaps in the respondents’ capacity to provide face-to-face care to the various household members (i.e. dependent adult, child under six, other injured dependent) and asked what other activity that they were doing was responsible for this gap in the capacity to provide care. It also asked if any catastrophic/big event had occurred in the previous month requiring more of the respondent’s time than usual, and if there was, what the impact had been on their unpaid care work and/or paid work. Finally, it asked respondents to state whether in the last seven days they happened not to have enough time, and if so, how frequently, for a range of activities (e.g. household work tasks/chores, personal care and hygiene, rest and sleep, and paid work), and what other activity they were doing was responsible for this gap. It concluded with a list of questions on the unpaid care work activities which most affect their capacity to undertake paid work, to whom they would delegate them if they could, and on what they would spend their time doing if they had some more at their disposal.

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Only for women classified as WEE programme participants.

In particular, in the third trimester of the pregnancy.
Annexe 2: Summary of in-depth interview guides for the household members

A2.1 In-depth interview guide for women, spouse and other adults living in their household

Objective: To understand how women living in low-income households organise their double engagement in unpaid care work and paid work.

Table A2.1 Summary of the modules included per type of respondent

<table>
<thead>
<tr>
<th></th>
<th>Woman</th>
<th>Spouse</th>
<th>Other significant carer (OSC)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Module 1: Socio-demographic characteristics</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Module 2: Sharing care</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Module 3: Experiences and perceptions</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Module 4: Experiences about women’s paid work and WEE programme and policies</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Module 5: Interactions between paid work and unpaid care work</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Module 6: Solutions</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

A2.1.1 Synthesis of the questions contained in each module

Module 1: Socio-demographic characteristics. Questions concerned the household composition (i.e. number of members, relationship), the number of adults involved in paid work, children’s school attendance, and the respondent’s engagement in social, economic and/or political activities beyond the household.

Spouse and OSC variant: Questions on the respondent’s engagement in social, economic and/or political activities beyond the household were not asked.

Module 2: Sharing care. Questions revolved around the gender and generational distribution of unpaid care work within and beyond the household, and the identification of tasks that women experienced as particularly time-consuming.

Spouse and OSC variant: In addition to questions on the gender and generational distribution of unpaid care work within and beyond the household, respondents were asked to describe how unpaid care work was organised in the case of sickness, absence, or pregnancy of the primary adult female in the household.

Module 3: Experiences and perceptions. This module explored women’s perceptions of the value of her paid and unpaid care work in the eyes of the other household members (husband, children), the community, and her own. It also looked at contradictions between the norms they hold, and their effects on women and their household members’ physical and emotional wellbeing. Finally, it asked what impact women’s paid work engagement had on the household’s decision-making processes and the allocation of unpaid care work tasks in her absence.

Spouse and OSC variant: Questions explored respondents’ perceptions of the value of the primary adult female’s engagement in unpaid care work and paid work, as well
as the existence and forcefulness of gender norms constraining women’s choice of
different types and/or spaces of paid work.

**Module 4: Experiences about women’s paid work and WEE programme and policies.** Questions concentrated on women’s decision to engage in paid work (e.g. the driver), the range of the work options potentially available to them, and their concrete experience of it with reference to challenges, bargaining power, and provision of support for care work. When women were classified as WEE programme participants, questions also explored the programme’s interlinkages, if any, with community and state support services. Finally, it asked women to report on how their household members and community perceived their engagement in paid work.

**Module 5: Interactions between paid work and unpaid care work.** This module addressed women’s participation in community and/or NGO activities, the effects of their participation on their own and their household members’ wellbeing, as well as on women’s capacity to sustain their engagement in paid work. It also looked at how women’s engagement in paid work affected the quantity and quality of care received by the household members, the challenges they faced in balancing their paid and unpaid care work, and the effects of the transfer of part of her unpaid care work responsibilities on the substitute carer’s wellbeing (and/or education, in the case of children).

*Spouse and OSC variant*: Questions addressed the organisation of unpaid care work and its effects on household members (themselves included) when substituting the primary female adult when she is engaged in paid work.

**Module 6: Solutions.** Questions revolved around the opportunities for moving towards a ‘double boon’. In particular, they focused on women’s perceptions of whether and how unpaid care work could/should be reduced and redistributed across other parts of the care diamond (i.e. the state, the market and the community), and improvements of their paid work conditions.

*Spouse and OSC variant*: Similar questions were asked, and compounded by questions revolving around respondents’ perception of their personal responsibility in improving the gender and generational redistribution of unpaid care work within their household.
A2.2 In-depth guide for interviews with children

Objective: To gain insights into the tensions and trade-offs between women’s paid work and children’s experiences as care recipients and providers. Before the interviews with children took place, both the child concerned and his/her parents gave their consent.

Icebreaking. The interview began with a ‘Family Tree’ exercise, during which the child mapped the household members and their relationships. Subsequently, the child was asked to undertake an ‘Activity Clock’ exercise, where s/he described all the activities they had done on the previous day, and how long it had taken them. The information provided during these exercises was then used interactively to verify answers to Modules 1 and 2, described below.

Module 1: Background information. Questions concerned the child’s activities on the previous day, household composition, parents’ activities, and his/her and siblings’ participation in care/paid/unpaid work.

Module 2: Sharing care. The focus of this module was the child’s experiences as a care receiver and care provider. At first, the focus was on person care, asking who looked after him/her and siblings, elderly and sick people, and household work. Subsequently, questions explored his/her involvement in different unpaid care work tasks, and estimated the time s/he spent in accomplishing them.

Module 3: Values, norms and perceptions. This module explored the child’s feelings towards each of his/her parents’ engagement in work, whether they wished they had more time to spend with them, and if so, why.

Module 4: Fall-outs. Questions explored potential negative repercussions on the child’s wellbeing and/or educational outcomes due to his/her parents’ engagement in paid work. Particular attention was given to what happened to the child when her/his mother was away: who cared for him/her, what did s/he do, and if s/he ever happened to be in need of help which he could not receive, and if so, why. Questions also addressed whether, when and why the child faced difficulties in pursuing his/her education, looking after him/herself, and spending leisure time.

Module 5: Solutions. In conclusion, the child was asked what would s/he change in each of his/her parents’ and his/her own ‘work/routine’ if s/he had the opportunity to do so.
Annexe 3: Summary of qualitative key informant interview guides

A3.1 Interviews with WEE programme staff

Objective: To assess whether and how the selected WEE programmes supported women’s capacity to balance their involvement in paid work with their own and their household’s care needs and responsibilities.

Module 1: Vision and intent. In this module, respondents described the WEE programme in terms of its objectives and participants, and the quality of its appraisal process, and specifically whether it incorporated the views of women and men living in the targeted communities. Subsequently, they described their role in the programme from the moment they started working in it.

Module 2: Programme provisions, implementation and monitoring. Respondents described the types of paid work provided by the programme, and whether and how support for women’s unpaid care work responsibilities had been included in its design. In the case of a positive answer, further questions explored the budget allocated for implementing its care components, challenges encountered, and the existence of monitoring mechanisms.

Module 3: Perception of paid work and care arrangements. This module explored respondents’ perceptions of the existence of gender norms, defining what (paid and unpaid) work is socially acceptable for women and for men. It also gathered respondents’ opinions on the benefits of women’s participation in paid work for both her household and herself, what barriers hamper it, and what makes the WEE programme valuable in women’s eyes.

Module 4: Solutions. Questions revolved around the capacity of WEE programmes to contribute in providing an enabling environment for women to work towards a ‘double boon’. They specifically asked how WEE policies and programmes could best accommodate participants’ care responsibilities, as well as what role state policies and communities could have in supporting women to find an optimal and sustainable balance between paid and unpaid care work. The interview closed with a request for the respondent to define what women’s empowerment meant for the WEE programme s/he worked in, and how it can be realised.
A3.2 Interviews with community leaders

Objective: To assess the role of the community in perpetuating the gendered distribution of unpaid care work, and/or in supporting women’s capacity to balance paid and unpaid care work.

Module 1: Background of the community leader. Questions concerned the respondent’s basic socio-demographic information, including his/her household composition.

Module 2: Care arrangements. Respondents were asked to describe the social arrangements prevailing in the community they were socially acknowledged to be leaders of, both along gender and generational lines (e.g. what do women/girls/men/boys do) and any other salient difference (e.g. class, caste, religion, or others).

Module 3: Values and norms. This module explored respondents’ perceptions of the existence of gender norms defining what tasks women and men are better at, and who within the household should have the biggest responsibility for providing care, undertaking household work and earning cash.

Module 4: Interactions between paid work and unpaid care work. Respondents were asked to state their views as to why women engaged in paid work, what effect their paid work had on their own and household members’ wellbeing, and who did and/or should take the responsibility for unpaid care work in the woman’s absence.

Module 6: Solutions. Questions revolved around respondents’ awareness of the existence of WEE programmes in his/her community, and if they knew about them, what they do, and whether they offered women the means to balance their dual engagement in paid and unpaid care work. In conclusion, the focus was turned on the actual and potential role of the community in supporting women to move towards a ‘double boon’, along with the state. The interview closed with a request for the respondent to define what women’s empowerment meant to his/her community and how it can be achieved.
Annexe 4: Participatory toolkit

Table A4.1 Summary of the participatory research method used per group of respondents

<table>
<thead>
<tr>
<th>Tool</th>
<th>Adult women</th>
<th>Mixed adults</th>
<th>Mixed children</th>
<th>Girls</th>
<th>Boys</th>
<th>Adult men</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 ‘What Would happen If…’</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>2 The Care Basket</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The Care Calendar</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 The Care Work Matrix</td>
<td>X</td>
<td>X (optional)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The Care Body Map</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 The Care Marbles for those employed privately</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Activity Mapping – ‘what did you do yesterday?’</td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 The Care Wallet</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>9 Care Public Service map</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>10 Role Play – care with and without the main carer</td>
<td></td>
<td>X</td>
<td>X</td>
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</tr>
</tbody>
</table>

A4.1 Short description of the tools

(1) ‘What Would happen If…’ (WWI)

Objective/s:
1. To introduce and value the centrality of care in the economy and how without care, any economy would collapse.
2. To explore what happens when the main caregiver leaves home for paid work.

Description: This tool focuses on what happens to families and communities when care is not provided. Participants act out scenarios where care is not available; for instance, when the main caregiver falls sick and families need to rearrange care patterns. The scenarios start with unpaid care work only and move towards connecting unpaid care work with the more visible parts of the economy, paid work, and from micro (family) to macro (state) situations.

Groups of respondents it was used for: Adult women; Adult men.

(2) The Care Basket (CB)

Objective/s:
1. To explore how too much care work affects the capacity to do paid work.
2. To explore norms and values around sharing care; and how care work can be shared at home and beyond.
Description: Like a day only has 24 hours, a basket can contain only so many things. This tool uses the image of a basket that can only contain a certain number of objects representing unpaid care work and paid work. Participants discuss the need for a balanced care load at home (rather than care overload) to be able to do paid work.

Groups of respondents it was used for: Adult women; Mixed children.

(3) The Care Calendar (CC)

Objective/s:
1. To explore when in the year one has a heavier workload, including unpaid care work and paid work.
2. To know when and what type of programmes to use to reduce and redistribute unpaid care work.

Description: Participants explore how the variations in the overall workload changes throughout the year through a calendar matrix.

Groups of respondents it was used for: Adult women.

(4) The Care Work Matrix (CWM)

Objective/s:
1. To explore the constraints that unpaid care work may have on (the choice and location of) paid work.
2. To explore which of the different impacts on women are the most important.

Description: Participants reflect on the impact of providing too much care on caregivers, in terms of physical or emotional strain, and how this impacts their livelihoods, wellbeing and paid job choices.

Groups of respondents it was used for: Adult women; Mixed children (optional).

(5) The Care Body Map (CBM)

Objective/s:
1. Identify the impact, both positive and negative, of the sum of unpaid care work and paid work on women’s bodies and wellbeing.

Description: Women make a drawing of their bodies and discuss how they feel, both physically and emotionally, as a result of their responsibility for unpaid care work and paid work together. The outline of a woman’s body is used to help participants visualise and discuss this.

Groups of respondents it was used for: Adult women; Girls; Boys; Adult men.
(6) The Care Marbles (CM) for those employed privately

Objective/s:
1. To explore what care services are provided at a (paid) workplace/WEE programme and how that affects women’s care work within the household.
2. To discuss the need for decent paid work and social security benefits in order to fully perform (and enjoy) quality caring of families and friends.
3. To raise participants’ awareness of their rights as workers and how the violation of workers’ rights leads to a care transfer from the employer to the poorest families.

Description: The tool uses the imagery of a marble that moves between a few columns – the employer/programme/cooperative/state; and then the family as a cross-cutting row at the bottom. If the employer (or other) is the main provider of a care service, such as childcare, the marble rolls over to the employer/programme/cooperative/state’s column side; and if the care service is provided by the worker or her/his family, the marble rolls down to the worker’s side.

Groups of respondents it was used for: Adult women.

(7) Activity Mapping (AM) – ‘What did you do yesterday?’

Objective/s:
1. To explore how unpaid care work and paid work time (labour) is distributed at home between men and women.
2. To explore the underlying norms and assumptions behind role distribution between men and women.

Description: This session looks at the activities that women and men do each day and how these contribute to the local economy. The tool asks participants to think about all the activities they do in a normal day, which are then mapped out on cards for participants to categorise. Activities include cooking breakfast, collecting water, resting, working in the fields, selling goods at the market and participating in a community meeting.

Groups of respondents it was used for: Mixed adults; Mixed children.

(8) The Care Wallet (CW)

Objective/s:
1. To explore how care resources are accessed, controlled and distributed at home between men and women.

Groups of respondents it was used for: Mixed adults.

Description: This tool focuses on how households earn and spend their income on products related to care and what access and control women have over the household budget. While the Activity Mapping tool assesses how families can redistribute their time on care, this tool analyses how households can distribute their income on care.
(9) The Care Public Service map (CPS)

Objective/s:
1. To explore what and how care-related public services are provided by the state and how they affect women’s workloads back in the household.
2. To analyse and prioritise the most needed public service related to care in the participants’ area.

Description: Participants use a map to analyse and prioritise the most needed care public service in their area.

Groups of respondents it was used for: Mixed adults.

(10) Role Play (RP) – care with and without the main carer

Objective/s:
1. To introduce the concept of care and care arrangements to children.

Description: This tool focuses on what happens to families and communities when care is not provided. Participants act out scenarios where care is not available; for instance, when the main caregiver falls sick and a family needs to rearrange care patterns.

Groups of respondents it was used for: Girls; Boys.
References


AfDB (2014) *Analysis of Gender and Youth Employment in Rwanda*, Tunis: African Development Bank


