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A Trapeze Act: Balancing Unpaid Care Work and Paid Work by Women in Nepal

Anweshaa Ghosh, Anjam Singh, Shraddha Chigateri, Deepta Chopra and Catherine Müller

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Summary

This working paper seeks to examine the relationship between unpaid care work and paid work that women in low-income households in Nepal perform, and whether, and if so how, they are able to maintain a balance between the two. It also examines the causes and consequences of the double burden on the physical and emotional wellbeing of women and their children. Further, the paper aims to create knowledge about how different stakeholders such as family, community, employers and state can contribute to women's economic empowerment such that their economic empowerment is optimised (women's entry into paid work is enabled without deepening their time poverty or worrying about the quality of care received by their family), shared (across generations, so that other women/girls in the family are not left to bear the burden of care) and sustained (such that the quality of care provided to children improves as a result of their mother's paid work).

By examining women's participation in two economic empowerment programmes – the Enterprise Development Programme (EDP) in Surkhet district and Karnali Employment Programme (KEP) in Jumla district – it also provides policy inputs on how women's economic empowerment (WEE) policy and programming can generate a 'double boon': paid work that empowers women and provides more support for their unpaid care work.

Keywords: unpaid care work; time use; women's economic empowerment; double burden; depletion; 'double boon'; EDP Oxfam; Karnali Employment Programme; childcare; Nepal.

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Abbreviations

CBO	community-based organisation
DFID	Department for International Development
ECD	Early Childhood Development
EDP	Enterprise Development Programme
EDS	Environment Development Society
GDP	gross domestic product
GoN	Government of Nepal
GrOW	Growth and Equal Opportunities for Women
IDRC	International Development Research Centre
ILO	International Labour Organization
INGO	international non-governmental organisation
ISST	Institute of Social Studies Trust
KEP	Karnali Employment Programme
KEPTA	Karnali Employment Programme Technical Assistance
MoFALD	Ministry of Federal Affairs and Local Development
MoLD	Ministry of Local Development
MoLE	Ministry of Labour and Employment
NLSS	National Living Standards Survey
NPHC	National Population and Household Census
OECD	Organisation for Economic Co-operation and Development
PLC	Participatory Learning Centre
PPE	pre-primary education
PWP	public works programme
SDG	Sustainable Development Goal
UNDP	United Nations Development Programme
VDC	Village Development Committee
WEE	women's economic empowerment

Glossary

<i>Asoj</i>	The sixth month in the Nepali Calendar (17 September–17 October)
<i>Dashain</i>	A major Hindu festival in Nepal which falls in September/October
<i>Khas Bhasa</i>	The original language of the modern-day Nepali language still spoken by the people in the Karnali region of Nepal
<i>Parma</i>	Exchange of labour practiced in rural Nepal by the communities during the time of planting and harvesting
<i>thaagal</i>	Fodder
<i>Tihar</i>	A major Hindu festival in Nepal which usually follows <i>Dashain</i> and falls around October/November
<i>yarsagumba</i>	A high-value medicinal herb found in the forests of Karnali region in Nepal

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,¹ carried out in four countries: India, Nepal, Rwanda and Tanzania. It presents the findings pertaining to Nepal, where research was implemented in the Mehelkuna and Maintada Village Development Committee (VDC) in Surkhet district, and Chadannath Municipality and Depalgaon in Jumla district. 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’.

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, revealing the persistence of gendered disadvantage in the economy. While much of the feminist literature on women’s work is premised on an understanding of the double burden of paid 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). Recent literature such as the OECD report on unpaid care work (Ferrant, Pesando and Keiko 2014) and the UN Women’s report for the Secretary-General’s High-Level Panel on Women’s Economic Empowerment (Klugman and Tyson 2016) have highlighted the need for recognition of unpaid care work by policymakers as crucial towards WEE. Goal 5.4 of the Sustainable Development Goals (SDGs) also acknowledges the global importance of recognising, reducing and redistributing women’s unpaid care work for all countries by 2030.² However, there is a stark need for more evidence building on women’s time and participation in care and unpaid work and their hindrances in participation of decent paid work, especially in Nepal’s context – which is what this research aims to provide.

The clarion call for the recognition, reduction and redistribution of unpaid work (Elson 2008) also comes from an understanding of the disproportionate burden that women bear. 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), and this is where this paper situates its analysis.

The work of Shirin Rai, Catherine Hoskyns and Dania Thomas (Rai, Hoskyns and Thomas 2011, 2014) in delineating the concept of ‘depletion of the body, the household and the community’ goes some way towards mapping and analysing the contours of the double burden, though they root their concept of depletion more specifically in the non-recognition of social reproduction. Further, while they call for a *measurement* of depletion, in this paper, we seek to lay bare the contours and depleting consequences of 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 Funded by the International Development Research Centre (IDRC), Department for International Development (DFID) and the Hewlett Foundation.

² <https://unstats.un.org/sdgs/metadata/> (accessed 24 April 2017).

This research is also interested in analysing 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 is that care needs to be redistributed more fairly across the 'care diamond'³ (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 that economic benefits are not eroded because of 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?*

The choice of programmes for study was based on its mode of delivery (one state, and one non-state) and its direct focus on women's economic empowerment (viz., either through the provision of direct inputs – training, provision of an employment guarantee, or through the creation of an enabling environment, for example mobilising on workers' rights and improving conditions of work, provision of vocational and other training). The two WEE programmes selected for this research were: Oxfam's Enterprise Development Programme (EDP) programme in Nepal which was chosen as a non-state-delivered programme focusing on women's economic empowerment through the provision of direct inputs and the creation of an enabling environment, and the Karnali Employment Programme (KEP), which was chosen as a state-delivered employment guarantee programme which prioritises female-headed households as one of its target groups. This targeting has encouraged women from low-income households with no alternative source of earning to gain access to income and contribute to household care expenditures. Initial analysis at the time of state programme selection for the study also showed that there was high female participation in the programme. Two sites were identified for data collection for each of these programmes.

1.1 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 (see Annexe 2 for a summary of the various modules of the

³ The 'care diamond' is a framework for the provision of care that comprises the family/household, markets, the public sector, and the not-for-profit sector (Razavi 2007: 20).

survey). The qualitative tools included semi-structured interviews with women, men and children (see Annexe 3 for details of the tools and Annexe 6 for list of case study interviews) and participatory group exercises (see Annexe 5 and Annexe 8). Key informant interview (KII) guides were also developed and used to interview community leaders, as well as staff involved in the delivery of the chosen WEE programmes (see Annexe 4 for details of the tools and Annexe 7 for list of KIIs).

All tools were developed through an intense methodology development workshop of 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.

The survey was administered as per a sampling framework (Table 1.1), reaching a total of 200 women across four sites. For the EDP participants, researchers met with the social partners for the programme, who were based in Mehelkuna, and identified the VDCs of Mehelkuna and Maintada located in Surkhet district in the Bheri Zone of midwestern Nepal, based on the size of the women EDP membership in these areas. A list of women respondents was drawn up as per the sample criteria for them being in paid work and having at least one child under six years old. The non-programme women respondents were identified with the help of community members, through the participatory group exercises and snowballing from survey respondents.

For the KEP participants, the research team consulted with the KEPTA office in Kathmandu, and based on time, resources and accessibility, selected Chandannath Municipality and Depalgaon VDC in Jumla district in the Karnali Zone of northwestern Nepal for fieldwork. The social mobilisers at VDC level were asked to draw up a list of women respondents (both participant and non-participant) who met the sample criteria, from which women were selected randomly for the survey.

From this larger sample of 200 women, 32 women in each site were purposively chosen for in-depth qualitative case study work: this selection was done such that different types of respondents were covered – including different combinations of paid work, care dependencies, access to services, family types, and care arrangements, etc. These 32 women were then interviewed for in-depth case studies. The team also conducted semi-structured interviews with their husbands/significant male carers, as well as an older woman and the oldest child, in cases where this was feasible. The project had the objective of distinguishing between participants in the chosen WEE programmes, and those that were in similar situations but were non-participants. Hence, the sampling framework in Nepal was constructed as per Table 1.1.

Table 1.1: Sampling framework for Nepal

Name of site	WEE participants		Non-WEE participants		No. of participatory exercises carried out	No. of KIIs carried out
	No. of women surveyed	No. of women interviewed for in-depth case study	No. of women surveyed	No. of women interviewed for in-depth case study		
Mehelkuna	30	5	20	3	With mixed adults, only men, only women, mixed group of children, boys only and girls only	4
Maintada	30	5	20	3		5
Chandannath	30	5	20	3		5
Depalgaon	30	5	20	3		5
Total	120	20	80	12		19

All tools were translated into Nepali, 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, such that data collected in Nepali were meaningful and rigorous. 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 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. Yet, the process has also been fraught with its challenges.

1.2 Ethics and challenges

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.

In Nepal, one of the challenges the research team faced was the remoteness of the sites. Some of the wards within the selected study sites could only be reached on foot. It was especially difficult to access the sites in Jumla district owing to its high altitude and limited access to the Karnali region. Language was also an issue, especially in Jumla, because a different dialect, Khas Bhasa, is spoken in the region. In order to overcome this, the researchers took on the assistance of someone from the local community who was well versed in the language and the socioeconomic and cultural context of the region. As far as possible, the researchers themselves engaged with the respondents, seeking assistance only when the need arose.

Identifying survey participants that fit the three sampling criteria (i.e. women having at least one child below the age of six, being involved in WEE or any form of paid work and belonging to low-income households) was a big challenge, especially in the context of rural areas of Nepal where the household numbers are not very high in a single VDC. In the case of Mehelkuna, initially, EDP women participants identified themselves as members of farmer

groups, credit groups or cooperative groups (such as the Pavitra Jankalyan Agriculture Cooperative, hereafter referred to as the Pavitra Seed Cooperative) but not as participants of Oxfam's Enterprise Development Programme (EDP) – which supports the Pavitra Seed Cooperative and other local farmer groups. Some women were more familiar with the Environment Development Society (EDS, or Batabaran Sudhar Samaj in Nepali), a local community-based organisation (CBO), a social partner of Oxfam's EDP in Nepal, which led to confusion for the participants. We overcame the challenge of not having enough women participants in the EDP by also including some non-EDP women who had attended the Participatory Learning Centres (PLCs) run by Oxfam under the EDP.

The problem of finding enough respondents was echoed in Chandannath, and we therefore expanded our unit of study to include Chandannath Municipality (which consisted of four VDCs) as our field site.

A big learning for the research team was in terms of correcting their assumptions about women. We had assumed that women who could not read and write would be able to draw for the participatory tools. However, this was not the case, and in many instances, the facilitator or co-facilitator (or even another community member) had to be called in to write or draw on the women's behalf. We modified some of our tools to incorporate more drawings/images thereafter.

1.3 Structure of the paper

In Section 2 we provide an overview of the country's socioeconomic characteristics, the four research sites, and 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 we researched, women's experiences of paid work, and the ways in which the two spheres of care and work interacted with one another as seen through the eyes of not only the women themselves, but also of their spouses (if any) and children. We also discuss the extent to which the two WEE programmes 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, is discussed in Section 4. We also look at findings across the case studies to understand the factors that can facilitate a '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: Nepal

Nepal, after a decade-long conflict, chronic political instability and economic stagnation, continues to struggle towards inclusive economic growth and gender equality. It has been listed as one of the poorest countries in the world by the United Nations. It was ranked 145 out of 188 countries in the Human Development Index by the *United Nations Development Programme (UNDP) Human Development Report 2015* (UNDP 2015). Despite slow economic growth, data from the *Nepal Living Standards Survey (NLSS) 2010/11* points towards a fall in the poverty rate, from 30.8 per cent in 2003/04 to 25.2 per cent in 2010/11 (Central Bureau of Statistics 2011b). However, the poverty rate varies across caste/ethnic groups and locations. Hill Brahmins have a low incidence of poverty (10.3 per cent) whereas the poverty rate is highest for Hill *dalits* (43.6 per cent), followed by Tarai *dalits* (38.2 per cent).

The poverty incidence among Hill and Tarai *janajatis* is 28.3 per cent and 25.9 per cent respectively (UNDP 2014). The poverty rate for female-headed households is slightly less (23.2 per cent) than the national average (Central Bureau of Statistics 2011b).

Despite the fundamental right to equality being enshrined in the Constitution, Nepal still lags behind in terms of social, economic and political empowerment of women. *The Global Gender Gap Report 2016* ranked Nepal 110 out of a total of 144 countries (World Economic Forum 2016), with the country faring particularly poorly in relation to educational achievements and economic opportunities for women.⁴ However, there have been improvements in the developmental outcomes for girls and women. Between 1990 and 2014, the ratio of girls to boys in primary and secondary education increased from 0.56 and 0.43 respectively to 1.03 for both levels. The ratios of women to men in tertiary education and literacy status also improved from 0.32 to 1.05 and 0.48 to 0.89 respectively in the same period, whereas the maternal mortality ratio has decreased to 170 in 2015 (OCHA/UNWOMEN 2015) from 281 in 2006 (National Planning Commission 2015).

Moreover, there has been increased effort to address gender inequality in the legal and policy frameworks of the country in recent years. The Constitution of Nepal 2015 has guaranteed fundamental rights to women in the form of an equal right of a spouse in familial property. It has also carried over the fundamental rights such as reproductive rights for women, right to protection against violence and an equal right to inheritance that were already guaranteed in the Interim Constitution 2007. Furthermore, the Constitution provisions for proportional representation of women in all state organs and positive discrimination in education, employment and social security have also been made. In addition, progressive laws such as the Gender Equality Act 2006, the Domestic Violence (Crime and Punishment) Act 2008 and the Sexual Harassment at Workplace Prevention Act 2015 have come into force to ensure women's protection against various forms of violence and harassment.

In addition, Nepal's Thirteenth Plan (Three Year Plan 2013–16) has included gender equality and women's empowerment as one of its targets (National Planning Commission 2015). With regard to women's economic empowerment, the Plan aims to increase women's access to finance, ensuring safety in women's employment and introducing social insurance for informal workers. Similarly, the National Planning Commission's 2015 report on the SDGs highlights Nepal's commitment to the SDG 5 of gender equality and women's empowerment. However, the issue of recognition of unpaid and domestic care does not feature as a priority in Nepal's SDG targets despite it being one of the components of the international SDG 5.

Nepal's economy is primarily governed by subsistence-based agriculture which forms 33.7 per cent of the total gross domestic product (GDP) (ILO 2014). The overall labour force participation rate for men is 80.9 per cent whereas it is 79.4 per cent for women, which is the highest rate in South Asia (ILO 2014). Women are predominantly involved in self-employment activities (76.7 per cent). A higher percentage (67.7 per cent) of women are self-employed in agriculture compared to 53.6 per cent of men. The total percentage of women involved in wage work is 8.5 per cent, whereas it is 23.7 per cent for men (*ibid.*). Out of the total women wage workers, the share of women involved in non-agriculture wage work has increased from 19.9 per cent in 2009 to 44.8 per cent in 2011.⁵ The higher overall labour force participation rate of women in Nepal is, on the one hand, indicative of the higher concentration of women in agriculture and on the other, it points to the definition of economic

⁴ Ranking based on sub index: economic opportunities – 115, educational achievements – 123, health and survival – 92, political empowerment – 68.

⁵ Nepal Gender Profile, 5 May 2015.

activity that was taken into account during the measurement. In the *Nepal Living Standards Survey (NLSS) 2010/11* (Central Bureau of Statistics 2011a), the collection of goods for own consumption, such as fetching fodder/firewood and water, is included under 'extended economic activity', which is counted in calculating the overall labour force participation rate unlike other countries in South Asia (ILO 2014). The high labour force participation rates also reflect women's increased interaction with the market, breaking out of traditional labour roles, because of factors such as Maoist conflict and male out-migration (Shtrii Shakti 2010). Despite high rates of labour force participation, there are distinct gender gaps in wages in the informal sector. The average daily wage rate for women and men is Rs 189 and Rs 286 respectively (Central Bureau of Statistics 2011a). Moreover, the majority of women involved in wage employment are confined to low-skilled and low-paid work in the informal sector (Lokshin and Glinskaya 2009).

The second contributor to Nepal's GDP is remittance, representing 28.8 per cent (ILO 2014). Male out-migration for labour is a huge trend across all rural areas of Nepal. During the fiscal years 1993/94–2014/15, the Government of Nepal issued more than 3.8 million permits to work abroad (excluding India), which represents almost 14 per cent of the current population. Women's participation in foreign employment has also increased in the past decade, with about 6.2 per cent of all labour migrant permits issued in 2012/13 going to women (MoLE 2016). Thieme explains the gender selective migration pattern:

The reasons for gender selectivity in migration patterns lie in the patriarchal culture. Women bear the main responsibility for housekeeping and child-rearing and are involved in agricultural work. The man is the main cash-income earner and migrates for work.
(2006: 29–30)

As we will also show in our findings, the high rate of male out-migration has ramifications for women's workload and their ability to balance care and paid work.

2.2 Contextualising WEE programmes

2.2.1 State programme: Karnali Employment Programme (KEP)

KEP was launched by the Government of Nepal in 2006 under the then Ministry of Local Development (MoLD; now known as the Ministry of Federal Affairs and Local Development, MoFALD), with the slogan of '*ek ghar ek rojgar*' (one household, one job) (Vaidya 2010). The aim was to provide at least 100 days of guaranteed wage employment per fiscal year specifically to households living in extreme poverty without any other source of income in five districts of Karnali Zone. A further objective was to also create local public assets that would contribute to enhancing local livelihoods in the longer term.⁶ KEP envisioned the inclusion of women in the programme through the targeting of female-headed households and by making provision for equal wages for women.

In 2012, the programme was evaluated by the National Planning Commission, which found that KEP was being poorly implemented (National Planning Commission 2012). Following recommendations from the Commission, the Karnali Employment Programme Technical Assistance (KEPTA) programme was initiated in 2013 with the financial support of the UK's Department for International Development (DFID) through the KEPTA consortium (Beazley 2014).

⁶ The employment projects mostly include public works programmes (PWPs) such as roads, drinking water projects, irrigation canals, micro-hydropower projects among others.

From 2013 to 2016, KEP was implemented with different levels of support from KEPTA.⁷ The consortium provided overall assistance in reforming the implementation mechanism of KEP through the targeting and registration of workers, distribution of job cards and first aid provisions. During this time, the total working days increased to 35 days in KEP-led areas, whereas in KEPTA-led areas, employment generated was up to 60 days.

Since 2016, KEPTA's direct support has been discontinued and the government is expected to roll out the reformed implementation procedure. Based on its direct and partial support experience, KEPTA has highlighted gender-responsive recommendations which include addressing the issues of balance between women's KEP work and unpaid care work, impact of the arduous nature of work on women as well as on overall productivity, women's choice to participate in KEP and overall benefit of KEP income on women (KEPTA 2015).

2.2.2 Non-state programme: Oxfam's Enterprise Development Programme (EDP)

The EDP in Nepal was launched in 2011. As a livelihoods programme, it aims to develop capabilities and markets for small rural enterprises, with a specific focus on women. The programme targets those agricultural sub-sectors that create opportunities for women at various levels, including at the production level, access to market and leadership and management. The EDP currently runs in three districts of Nepal.

In our research sites, Mehelkuna and Maintada, which fall under Surkhet district, the EDP aims its activities of strengthening women seed producers both economically and socially through the selection of an 'enterprise'; in Mehelkuna and Maintada, the selected enterprise is the Pavitra Seed Cooperative. The selected enterprise supports seed producer members (the majority of whom are women) to sell their harvest back to them in return for technical input, trainings, loans and other extensions (Oxfam 2016). The programme also runs Participatory Learning Centres (PLCs) with a local partner, the Environment Development Society (EDS), in the two sites. These centres, open to all, act as a platform for women in the communities to discuss various social issues such as domestic violence, alcoholism, women's access to community resources, their double burden of care and paid work, etc. and helps in networking and advocacy of common issues.

2.3 Site-specific information

2.3.1 Site 1: Mehelkuna, Surkhet district (Midwestern Development Region – Bheri Zone)

In 2014, Mehelkuna VDC was merged with two other VDCs, Dahachaur and Gumi, to be included in Shubhaghat Gangamala Municipality. Mehelkuna has a predominantly *dalit* population, which comprise 57 per cent of the total population of 9,815. Other caste and ethnic groups in the region include Brahmins, *thakuris*, *gurungs* and *tamangs*. There is a high male outbound migration from this area owing to lack of irrigation facilities. Most *dalit* men migrate to India as there are not sufficient (or any) landholdings for them, coupled with there being no other employment opportunities available in the area (NC2, Mehelkuna, January 2016). Women have few options for paid work besides agriculture and vegetable and seed production. Those who do not own land work as agricultural labourers and are involved in goat and chicken rearing, selling milk, running small shops, brewing and selling local alcohol (see Annexe 1).

⁷ In Jumla district (where two of our research sites are located), out of 30 VDCs (now 26 VDCs and one municipality), a demand-driven pilot project was implemented in one VDC with funding and implementation led by KEPTA, and demonstration projects were implemented in three VDCs with 50 per cent funding each from KEPTA and the GoN and implementation led by KEPTA. Similarly, projects with a revised implementation mechanism were carried out in six VDCs with funding and implementation led by the GoN with partial assistance from KEPTA, whereas projects in the remaining 20 VDCs operated in the conventional KEP modality with only district-level support by KEPTA (MoFALD 2014).

2.3.2 Site 2: Maintada, Surkhet district

Maintada is the neighbouring VDC to Mehelkuna and has a similar caste/ethnicity composition (see Section 2.3.1). The total population is 11,187. Here too, most *dalit* men migrate to India for work. Women are mostly self-employed – they either work on their own farms or do other small paid work such as goat and chicken rearing, or running small shops, etc. Landless women mostly work as agricultural day labourers (see Annexe 1).

2.3.3 Site 3: Chandannath Municipality, Jumla district (Midwestern Development Region – Karnali Zone)

Chandannath is the first and only municipality in Jumla district. The municipality was established in May 2014 by merging the existing VDCs of Talium, Mahat Gaon, Kartik Swami and Chandannath. The total population of the entire municipality is 19,047. The main caste/ethnic groups residing in the region are Brahmins, *chhetris/thakuris*, *janajatis*, *dalits*, and *sanyasis*. The main source of livelihood for the people of Chandannath is agriculture, followed by apple farming and collecting *yarsagumba* for income-generation.⁸ Poor and *dalit* households with no or less land are engaged in wage work, especially masonry- and construction-related work. Women from poor households are also engaged in multiple low-income work such as agricultural labouring, breaking stones and vegetable farming (see Annexe 1).

2.3.4 Site 4: Depalgaon, Jumla district

Depalgaon is located 4km from the Chandannath Bazaar, the district headquarters, and has a total population of 2,774. The main caste/ethnic groups residing in the VDC are *chhetris* (43.26 per cent), Brahmins (29.62 per cent), *dalits* (26.92 per cent) and *janajatis* (0.17 per cent). The main source of livelihood is subsistence agriculture. People are also involved in multiple livelihood options such as daily wage work, agricultural labouring, apple and vegetable farming, collecting *yarsagumba* and selling firewood (see Annexe 1).



A village in Mehelkuna, Surkhet district.
Photographer: Anweshaa Ghosh/ISST.



A village in Chandannath, Jumla district..
Photographer: Deepta Chopra/IDS.

⁸ A high-value medicinal herb found in the forests of Karnali region of Nepal.

2.4 Sample characteristics and description

A sample of 50 women in paid work with a child under the age of six was surveyed in each site. The characteristics of the sample are provided in Table 2.1. The majority of women in each site were between 18 and 29 years of age. The women had mainly junior or secondary education in Mehelkuna and Maintada, and more than half of respondents in Chandannath and Depalgaon had had no education. Most women were active in income-generating, self-employed work – with the exception of Chandannath, where women were mostly engaged in daily wage labour. Most of the respondents across sites were *dalit*, who comprised the majority of low-income households with no or very small landholdings. On average, we found that each household had five to six members, with two to three children (below 18). Amongst our respondents, women mostly had low dependency (one child under six years old) while we found few women with high care dependency only in Chandannath and Depalgaon.

Table 2.1: Demographic characteristics of sample

	Mehelkuna	Maintada	Chandannath	Depalgaon
Age group respondent	%	%	%	%
6–17	-	-	-	2.0
18–29	88.0	62.8	65.3	74.0
30–39	12.0	35.3	24.5	20.0
40–49	-	2.0	10.2	4.0
Women’s highest level of education	%	%	%	%
None	10.0	7.8	57.1	64.0
Primary	2.0	3.9	4.1	6.0
Junior/lower secondary	40.0	37.3	18.4	8.0
Secondary/higher secondary	38.0	43.1	12.2	12.0
Tertiary (vocational)	2.0	2.0	-	-
University/college	6.0	-	-	-
Literacy classes	2.0	5.9	4.1	4.0
Other forms of education	-	-	4.1	6.0
Current type of work	%	%	%	%
Self-employment	66.0	60.8	6.1	54.0
Agricultural/non-agricultural daily wage labour	4.0	7.8	59.2	40.0
Office work for employer	6.0	2.0	-	-
WEE programme participation	22.0	27.5	34.7	6.0
Time spent away from household last year	%	%	%	%
Never	60.0	49.0	61.2	52.0
Less than one month	22.0	41.2	38.8	48.0
1–3 months	6.0	5.9	-	-
4–6 months	2.0	2.0	-	-
6–12 months	4.0	2.0	-	-
Whole year	6.0	-	-	-
Caste	%	%	%	%
<i>chhetri/thakuri</i>	30.0	27.5	18.4	2.0
<i>bahun</i>	10.0	13.7	-	32.0
<i>janajati</i>	20.0	-	-	-
<i>dalit</i>	38.0	58.8	46.9	58.0
Other	2.0	-	34.7	8.0

(Cont’d.)

Table 2.1 (cont'd.)

	Mehelkuna	Maintada	Chandannath	Depalgaon
Average household size	#	#	#	#
	5.6	5.5	5.4	5.3
Average number of children <18	#	#	#	#
	2.2	2.5	2.6	2.7
Average number of children <6	#	#	#	#
	1.3	1.8	1.4	1.5
Care dependency				
Low dependency (1 child <6)	72.0	82.4	63.3	58.0
Medium dependency (2 children <6)	28.0	17.7	32.7	36.0
High dependency (3 or more children <6)	-	-	4.1	6.0
Observations	50	50	50	50

Source: Authors' own, based on the project's quantitative data.

Given this context of programmes and sites, in the following sections we discuss the findings from our research on the social organisation of care, the conditions and characteristics of the paid work that women engage in, and the effects of the dual burdens that women bear on their physical and emotional wellbeing. We also analyse the experiences of women participating in the two WEE programmes, particularly in terms of whether, and if so how, they account for women's unpaid care work.

3 Interaction between women's unpaid care work and paid work

3.1 Social organisation of care

3.1.1 Mapping the social organisation of care: Who does what?

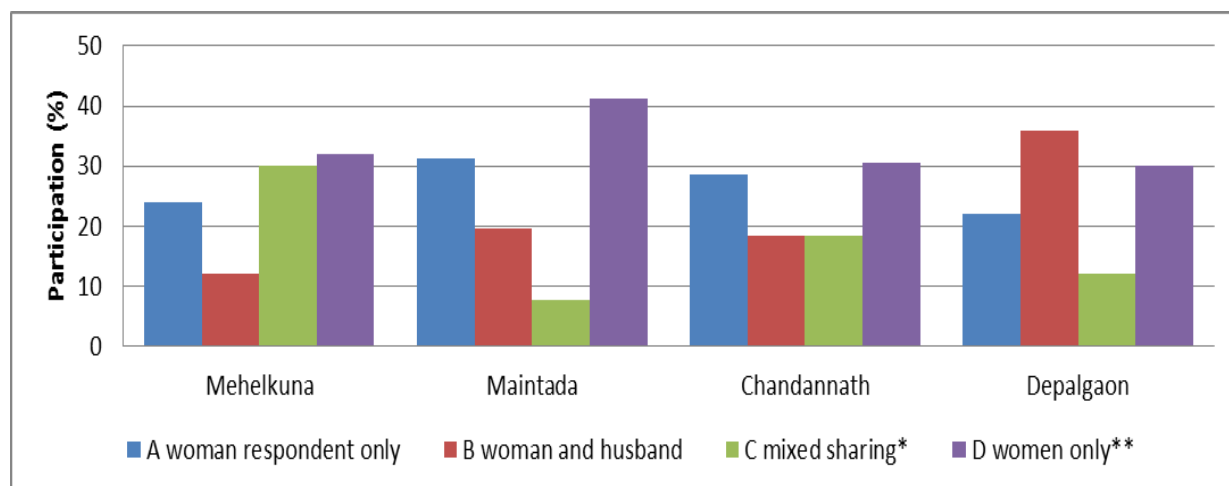
Across the four sites of our research, we found that **women were primarily responsible for all unpaid care work in the family**, which corresponds with the literature on the social organisation of care in Nepal (Acharya and Bennett 1983; Budlender and Moussie 2013). They were responsible for household tasks such as cooking, cleaning, washing clothes, caring for children and dependants, caring for animals, as well as fetching firewood and water, cutting grass, going to the flour mills and the market, etc. (Activity Mapping, mixed adults, Mehelkuna and Maintada, January 2016; Chandannath and Depalgaon, March 2016).

Figures 3.1 and 3.2 show that in six out of ten households, women carried out household work both inside and outside the house either by themselves or with other women in the household.⁹ In Figure 3.1, we see that women (the respondent herself and/or other women in the household) were primarily responsible for household work inside the house such as cooking, cleaning, washing utensils and clothes, etc. While men were also involved in housework inside the house across sites, this was usually performed along with women, with no instance in our surveys of men taking on sole responsibility in any of the sites. Depalgaon provides something of an anomaly to this picture with 36 per cent of men supporting their

⁹ The figures and tables in this section have been developed from women's responses to Module 6: Sharing Unpaid Care of the survey questionnaire, see Annexe 2.

wives in household work inside the house. Depalgaon also had the highest number of respondents from nuclear households in the survey (66 per cent). In terms of men's participation in household tasks therefore, there is a correlation between the structure of the household and men's participation, viz., **in cases of nuclear households, particularly where the children were young, the participation of men in household tasks increased**. However, here too, we did not find any man taking sole responsibility for household tasks.

Figure 3.1: Household work inside the house¹⁰



Source: Authors' own, based on the project's quantitative data.

Culturally, **fetching firewood is considered a female responsibility** and across all sites, this was reflected in the high participation of women in this activity. As seen in Figure 3.2, in 32–40 per cent of households, women collected firewood and water themselves, and in a further 25–30 per cent households, they were assisted by other women (whether girls or adult women), making the fetching of firewood and water a predominantly female activity. **Men usually helped in collecting water**, especially if there were taps close by (as found in some wards of Mehelkuna and Chandannath).

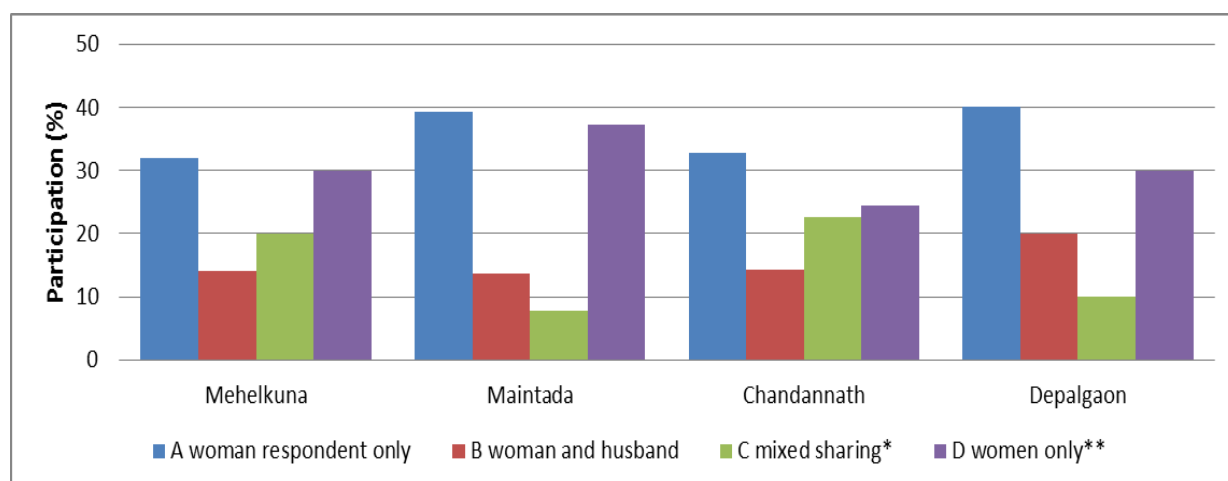
¹⁰ The following explains the information in the social organisation of care graphs – Figures 3.1, 3.2, 3.3 and 3.4. Definitions of social organisation of care based on household or non-household member carrying out a task at least two to three times a week.

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.

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

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

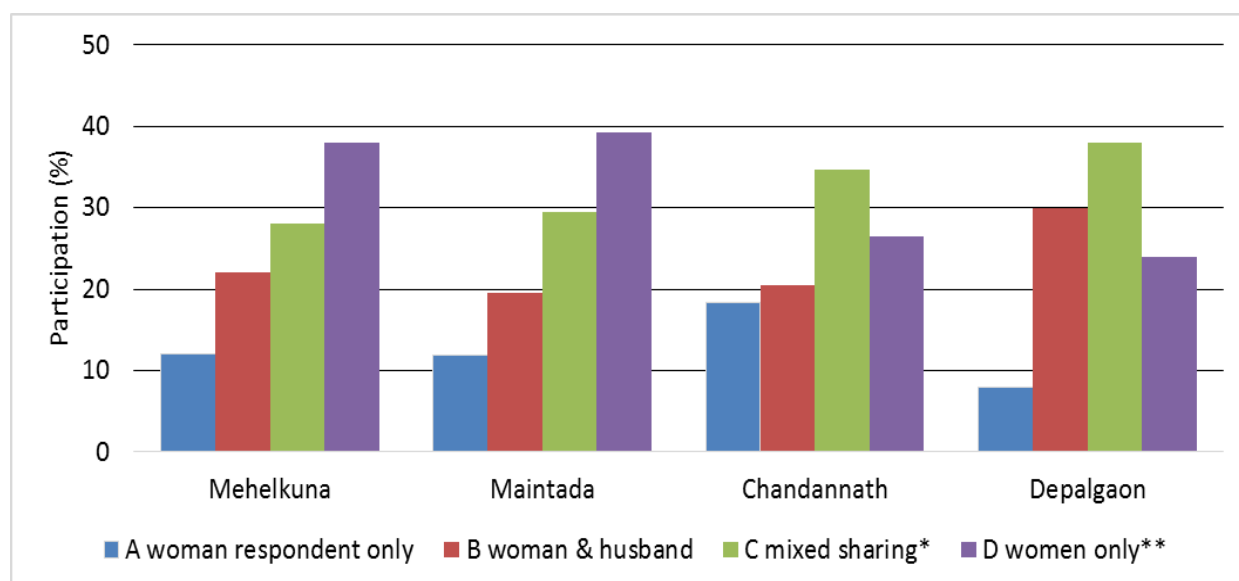
Figure 3.2: Household work outside the house – water and fuel collection



Source: Authors' own, based on the project's quantitative data.

Distinct from other household chores, **childcare was more of a shared responsibility in the family with higher numbers of husbands, and other men and women of the household participating in childcare** (viz., higher levels of mixed sharing – see Figure 3.3). Even so, in Mehelkuna and Maintada, in over 50 per cent of households, women performed childcare usually with the support of other female members of the household. However, in Chandannath, in over 55 per cent of households, women and men (including husbands) were involved in caring for children. In Depalgaon, we found a high participation of men in childcare (along with their wives), which could again be due to the high numbers of nuclear households. However, the quality of men's participation was more sporadic, with men participating in childcare only when the woman was away or unwell, though they were engaged in a range of childcare tasks: 'When my wife goes for meeting or training, I do everything, cooking meals... looking after the child, teaching my son, sending him off to school, bathing him, brushing, etc.... When I am away [on migration], my mother helps her with all this work' (Nirmal Oli, Mehelkuna, February 2016). In no instance, however, did we find men caring for children on their own.

Figure 3.3: Care for children

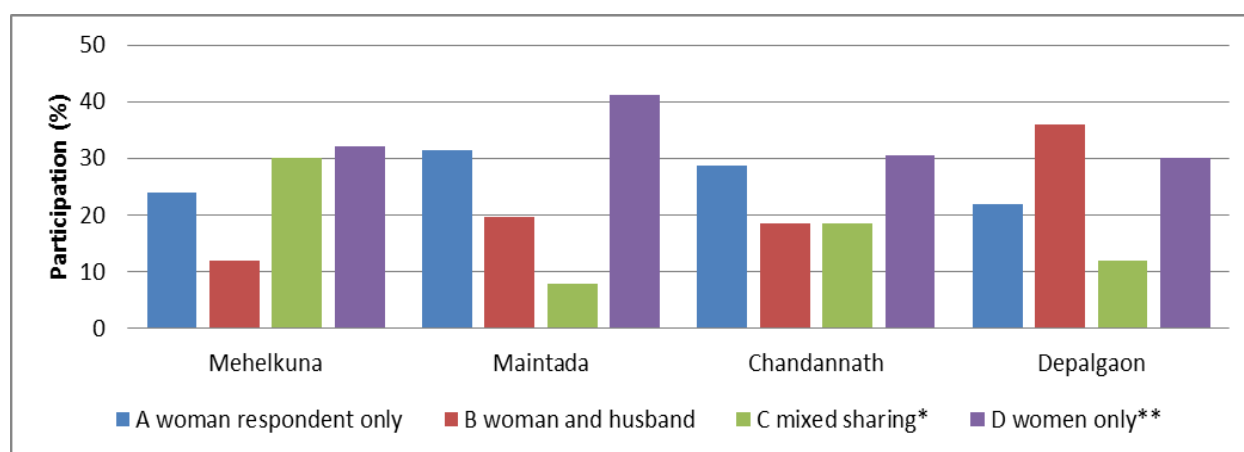


Source: Authors' own, based on the project's quantitative data.

Community members also helped with childcare when there was no one else besides the woman to take care of a child. This was found to be more the case in Mehelkuna and Maintada where male migration was high, leaving many women heavily burdened with unpaid care work.

Being rural sites, rearing and caring for animals is an important activity in the household and as Figure 3.4 shows, although the patterns varied, **animal care was primarily performed by female members of the household.** In Depalgaon, which reflects a different pattern, again owing to the large numbers of nuclear households, we found more husbands participating, along with their wives, in animal care. Children too helped women in animal care across the sites. Another example of community engagement in the distribution of care that is prevalent in Jumla district which helped save women’s time and energy is given by Sumitra Khatri of Depalgaon: owing to grazing fields being few and high up in the mountains, ‘We have a schedule [among neighbours] to take the cows for grazing so we go once a week’ (May 2016).

Figure 3.4: Care for animals



Source: Authors’ own, based on the project’s quantitative data.

3.1.2 Participation of men and children in care work

As we have seen above, **men did participate in childcare and household work; however, overall their contribution to these tasks was usually intermittent and limited,** with men helping only sparingly with unpaid care work (mostly cooking), and usually when women were ill, away or menstruating¹¹ (Activity Mapping, men only, Maintada, January 2016; Depalgaon, March 2016). Jayalal BK from Chandannath explains: ‘I look after the children when my wife goes to collect firewood or grass; I also cook when my wife is menstruating as she’s is not allowed to enter the kitchen’ (May 2016). One of the constraints in sharing care work that men pointed to was that **they themselves were preoccupied with paid work as primary earners, because of which they could not spend much time at home** (Care Body Map, men only, Mehelkuna, January 2016). Apart from norms on the gendered allocation of roles and responsibilities, high levels of male migration also provided structural constraints on the participation of men in care work, as we shall see below.

¹¹ One common feature across all the sites was the participation of men particularly in cooking when women were menstruating because of cultural menstrual taboos connected to ritual purity and pollution in Hinduism which do not allow women to enter the kitchen and touch the hearth (considered a pure place) (Care Body Map, men only, Maintada, January 2016; Activity Mapping, mixed adults, Depalgaon, March 2016; also see Amgain (2012).

In terms of children's participation in care work, their roles too were gendered. Girl children were more involved with care work as 'girls are expected to take on the same roles when they are married' (Activity Mapping, mixed children, Chandannath, March 2016). The research found that the order and age of the children also dictated the nature and amount of work being done by them (Care Body Map, girls only, Depalgaon, March 2016). Girl children aged 10–11 years old, such as Deepa Oli and Deepti Karki, performed small household chores like fetching water and cooking, eventually also helping their mother in more difficult tasks such as cutting grass for fodder, especially on weekly days off and after school hours (Activity Mapping, mixed children, Depalgaon, March 2016). In Mehelkuna and Maintada, girls shared that they began going to the flour mills from the age of ten years on their weekly days off (Sarita Kunwar, Maintada, February 2016; Care Body Map, girls only, Mehelkuna, January 2016).

Boys too performed care work tasks such as fetching water. **Boys were more involved in household work if there were no older daughters and/or when their mothers were unwell.** For example, Kamla Giri whose daughter is married, is often unwell and shares that 'both my sons help me. I carry the manure [to throw on the land to fertilise it] and they do it too. They go to school in the afternoon. After returning from school one of the sons helps to carry and the other makes food' (Chandannath, May 2016).

Children also helped their mothers in farm work, particularly during the peak agricultural months of June and July, as everyone in the family was involved in farm work. Older boys assisted with ploughing, cutting and carrying barley and paddy.

3.1.3 Structure of the family and care dependency ratio

Across the four sites, the social organisation of care and the intensity of unpaid care work that women performed were also dependent on the structure of the family and the care dependency ratio. High levels of male migration (particularly in Mehelkuna and Maintada, especially among *dalit* men) affected the composition and structure of the household, leading to large numbers of 'female-headed' households (Care Body Map, girls only, Mehelkuna, January 2016; Acharya and Bennett 1981; Budlender and Moussie 2013). However, in both Mehelkuna and Maintada, the households were also 'quasi-extended' – while women lived mostly in 'nuclear families', in most cases the in-laws would live in a separate household with a separate kitchen either next door or close by, thereby helping each other on a daily basis. This is partly a customary arrangement, where the older parents either stay apart or with their youngest son and his family. According to the women, one of the practical reasons for this arrangement was that separate kitchens helped to better manage one's own finances (often remittances resulting from male migration outside the country), thereby reducing stress on both families (Care Wallet, mixed adults, Mehelkuna, January 2016).

In these **quasi-extended and extended families, older women helped with care tasks, particularly with childcare,** as seen in the case of Asha Khatri who has two small children and whose husband migrated to India: 'It is difficult to do my work like fetching firewood with my children around. I leave them with my in-laws before I go to the forest or to the mill' (Mehelkuna, February 2016).

Older women also helped in female-headed households in Depalgaon and Chandannath, because women were overburdened by both paid work and unpaid care work. For example, Kabita BK, who lives with her mother-in-law and three children and is the only breadwinner of her family, shares that 'there aren't many people at home so I have to do the work even if I get tired, though my mother-in-law helps with some of the work' (Chandannath, May 2016).

Those **women who lived in nuclear families were particularly burdened by care work responsibilities because either the men had migrated or the men present helped sporadically**. In such households, some of the burden of care tasks such as cooking, cleaning, washing utensils, sibling care and fetching water was passed on to older children – especially girl children, as we have seen above.

The care dependency ratio,¹² particularly in a context of acute poverty, also had an impact on the intensity of the care work performed by women. For women such as Kusum BK from Chandannath and Bhuma BK of Maintada who belonged to nuclear families (their husbands were migrant workers), their **high care dependency ratio (having three or more children below the age of six) exacerbated their burden and physical depletion** as they had to do most of the care and household work on their own. Women from such households were found fetching firewood and working on their farms or breaking stones up until childbirth and a few days post-partum due to the lack of support from within the family and/or due to the necessity to earn owing to acute poverty.



A woman washing clothes and caring for her child at the same time, Depalgaon, Jumla district. *Photographer: Soraj Shahi.*

3.1.4 Characteristics of care tasks and links with public resources and services

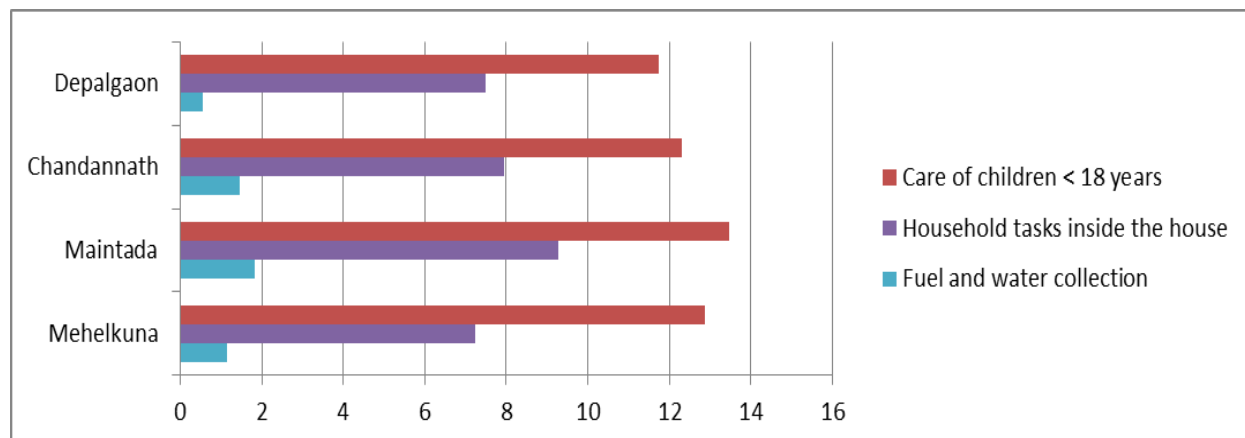
Research has found that women typically spend more hours in a day than men on unpaid care work (Ferrant *et al.* 2014). An earlier ActionAid report on unpaid care work conducted in six countries found that women worked a total of 397 minutes per day on unpaid care work compared to only 127 minutes for men, with Nepali women working on average ‘1.4 hours for every one hour worked by Nepalese men’ (Budlender and Moussie 2013: 18). Our research also tracked women’s time use, and we captured the simultaneity of tasks performed by women by counting two tasks that women simultaneously performed, including a specific question on whether women were also caring for a child and/or an elderly/disabled

¹² The care dependency ratio in this study refers to the number of small children that a woman has:

- high care dependency ratio: having three or more children under six years of age;
- medium care dependency ratio: having two children under six years of age;
- low care dependency ratio: having one child under six years of age.

person at the time. We found that across the four sites, allowing for a simultaneity of tasks, *women performed unpaid care work over an average of 16.6 hours a day, with childcare being performed over an average of 12.4 hours every day* (see Figure 3.5).¹³ In terms of their lived experiences too, *women, particularly those with small children, found childcare to be time consuming: 'I have spent my whole life for children. I believe that I have spent too much time washing these children's clothes'* (Kusum BK, Chandannath, May 2016; also see Budlender and Moussie 2013).

Figure 3.5: Number of hours over which women were responsible for care activities



Source: Authors' own, based on the project's quantitative data.

The access and proximity to public resources and services such as water taps, electricity, roads, mills, etc. was another key factor that affected how unpaid care work was organised in the household, as well as the long hours spent on household tasks, and the experiences of the intensity and drudgery of care tasks performed. For instance, in Mehelkuna and Maintada, we found that the lack of public resources and services (such as flour mills, electricity, water taps) resulted in an increased transfer of care work burden on to girl children and/or older women (Care Body Map, girls only, Mehelkuna, January 2016; Acharya and Bennett 1981; Budlender and Moussie 2013). Moreover, *women found tasks such as fetching firewood and water and cutting grass the most burdensome owing to the arduous nature of the work and the time involved: 'It takes the whole day to fetch firewood and we are very tired when we come back'* (Care Work Matrix, women only, Mehelkuna, January 2016; Chandannath, March 2016).

Furthermore, *the lack of one service at times negated the benefits of other services/ resources available in the region*; for example, those who used gas cylinders found it difficult to access them owing to low supply during the blockade (Pokhrel 2015).¹⁴ In general, it was also time-consuming to 'refill the cylinders because public transport is scarce and so it is difficult to reach the market' (Care Body Map, girls only, Mehelkuna, January 2016). In Chandannath and Depalgaon, women complained that in spite of functional flour mills in the

¹³ Figure 3.5 shows data from Module 2: Women's time allocation of the survey questionnaire, see Annexe 2.

¹⁴ The 2015 Nepal blockade, which lasted for five months, was a humanitarian crisis which has severely affected Nepal and its economy. In September 2015, Nepal passed its long-stalled Constitution with approval from the representatives in Nepal's Constituent Assembly (CA). However, members from the ethnic minority Madhesi and the Tharu community in the Terai region (having cultural and linguistic ties with border Indian states of Bihar and Uttar Pradesh) accused the government in Kathmandu of the historical non-cognisance of their demands and imposed an economic blockade at the Indian border. The blockade resulted in massive scarcity of fuel and essential commodities across the country. The Nepal government blamed the Indian government for orchestrating an 'unofficial blockade' by backing the Madhesi protesters which the Indian government denies to date.

vicinity, due to the lack of electricity they had to wait for many hours to get their work done (Care Public Service map, Depalgaon, March 2016).

We also found variation in access to public resources and services across and within the four sites; for example in Depalgaon, in one of the villages *dalit* households had taps at home that had been installed by an international non-governmental organisation (INGO), while the women in other communities had to walk to the river to fetch water (Care Public Service map, mixed adults, Depalgaon, March 2016). In many such cases, care tasks like fetching water were often passed on to older children in the families owing to women's time poverty (Antonopoulos and Hirway 2010).

3.1.5 Gendered norms on care

One of our key findings that corroborates with other research (Ferrant *et al.* 2014) is the influence of gendered cultural norms on the social organisation of care. *Certain unpaid care tasks such as fetching firewood (all four sites) and carrying woven baskets for carting fodder, manure, water, etc. (specific to Chandannath and Depalgaon) and unpaid work such as planting paddy and tilling the land were tasks that only married women could do.* These further aggravated women's care work burdens as it dissuaded others in the family from helping her (Gyanu Giri, Chandannath, May 2016; Nirmal Oli, Mehelkuna, February 2016; Activity Mapping, mixed children, Chandannath, March 2016). Community sanctions and prevailing social norms regarding gender roles also hindered men's participation in unpaid care work. Gyanu Giri, who is 25 years old and works on her family farm in order to financially support her husband's undergraduate education, shares:

If my husband helps me with my work by washing the dishes even my mother-in-law teases him for doing so. Also, the other people look down upon me for the same... The people who want to help hesitate to do so due to the fear of being ridiculed by the village.
(Gyanu Giri, Chandannath, May 2016)

Table 3.1 gives a general overview of perceived gender norms on whether men or women perform certain tasks better across the four sites. According to the table, most of the women respondents (92–95 per cent across the sites) perceived women to be better at household tasks and still too many of them (86.5 per cent on average across the sites) perceived men to be better at paid work outside the house. While not as many women respondents thought that women were better at taking care of a sick child – across the sites, 67.25 per cent thought women were better – our results still indicate the gendered nature of this task. Overall, the table reflects the prevailing gender norms of women being considered as primary caregivers while men are considered as primary breadwinners.

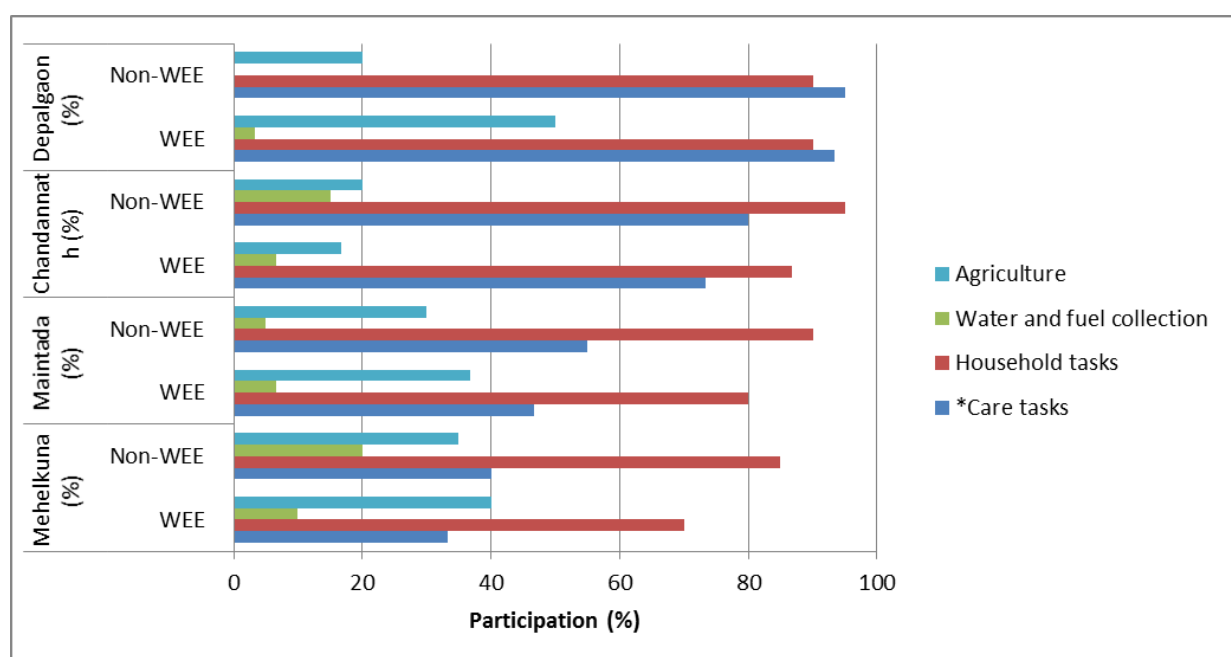
Table 3.1: Perceived gender differences for certain tasks

Activity	Women are better (%)				Men are better (%)			
	Mehelkuna	Maintada	Chandannath	Depalgaon	Mehelkuna	Maintada	Chandannath	Depalgaon
Care of a sick child	44.0	55.0	76.0	94.0	8.1	0.0	0.0	2.2
Household repairs and construction	0.0	0.0	2.0	0.0	51.0	19.0	9.8	38.0
Household tasks	95.0	93.0	92.0	94.0	0.0	0.0	0.0	6.7
Animal care	2.4	17.0	12.0	12.0	0.0	0.0	0.0	0.0
Agriculture	46.0	39.0	16.0	38.0	19.0	23.0	12.0	16.0
Paid work outside the house	2.4	2.2	8.2	6.1	78.0	84.0	95.0	89.0
Household decisions	27.0	11.0	2.0	2.0	30.0	23.0	22.0	16.0
Social relations	27.0	24.0	6.1	6.1	0.0	2.3	0.0	0.0
<i>Observation</i>	<i>41</i>	<i>46</i>	<i>49</i>	<i>49</i>	<i>37</i>	<i>43</i>	<i>41</i>	<i>45</i>

Source: Authors' own, based on the project's quantitative data; based on respondents who said that there are gender differences which make men or women better suited for certain activities (Module 3 of survey; see Annexe 2).

When we disaggregated the data on perceived norms between programme (30 in each site) and non-programme participants (20 in each site), we found similar patterns across the two groups with regard to various components of work, as seen in Figure 3.6. In the case of agriculture, interestingly 50 per cent of programme participants in Depalgaon perceived women to be better at agriculture as compared to only 40 per cent programme participants in Mehelkuna (and lesser in Maintada). As such, despite increased feminisation of agriculture in Nepal, with high economic gains achieved as women seed producers under the EDP including a high percentage of female members (64 per cent) in the Pavitra Seed Cooperative, *gender norms around land and paid work mean that agriculture continues to be considered a 'male job'*. This could also be indicative of the fact that despite feminisation of agriculture, land is often in the name of the male head of the family which hinders women's recognition as producers, thereby curtailing their ability to upscale their enterprises and their own perception as producers.

Figure 3.6: Perceptions of women being naturally better at tasks than men: WEE and non-WEE



Note: *Caring for children and dependent adults.

Source: Authors' own, based on the project's quantitative data.

Interestingly, from our qualitative data, we found that while gender norms were more rigid in Chandannath and Depalgaon, some gender practices around ploughing (which is considered a male job) were weakening in Mehelkuna and Maintada with *women and girls also ploughing their own fields because they were unable to find 'hired male labour' in the area owing to the high rates of male migration*. However, it is important to note that this shift in gender practice further burdens women because the ploughing is in addition to their own farming activities (Care Work Matrix, women only, Mehelkuna, March 2016).

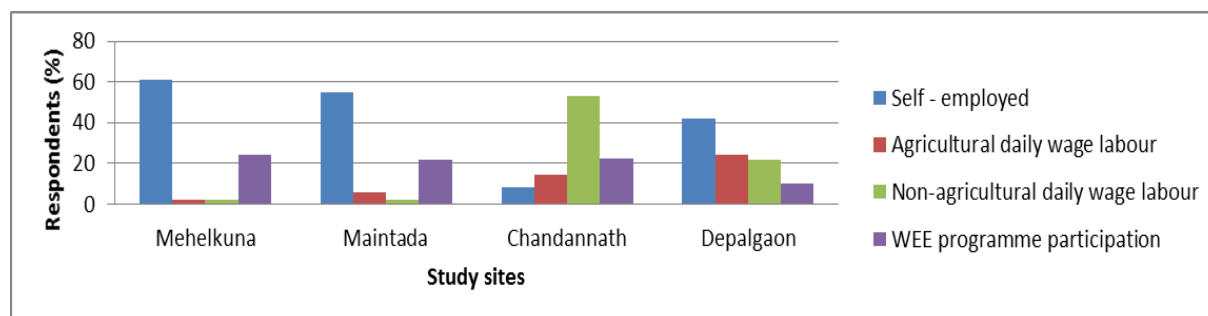
3.2 Paid work experiences and conditions

3.2.1 Availability of paid work

Women's employment in rural areas of Nepal is largely concentrated on subsistence-based economic activities such as agriculture and livestock rearing. In our four research sites, as seen in Figure 3.7, *a majority of the women in Mehelkuna (61.2 per cent), Maintada (54.9 per cent) and Depalgaon (54.9 per cent) were self-employed at the time of the survey,*

whereas a majority of women in Chandannath (53.1 per cent) were involved in non-agricultural activities which largely consisted of construction work such as breaking stones. Self-employment activities, which included paid work such agricultural activities on their own land, livestock and/or chicken rearing, running a shop, brewing alcohol, collecting and selling firewood and herbs, etc. were mostly self-initiated and sometimes supported by national or local NGOs (NGOs were more active in Mehelkuna and Maintada than in Chandannath and Depalgaon).

Figure 3.7: Type of paid work for women



Source: Authors' own, based on the project's quantitative data.

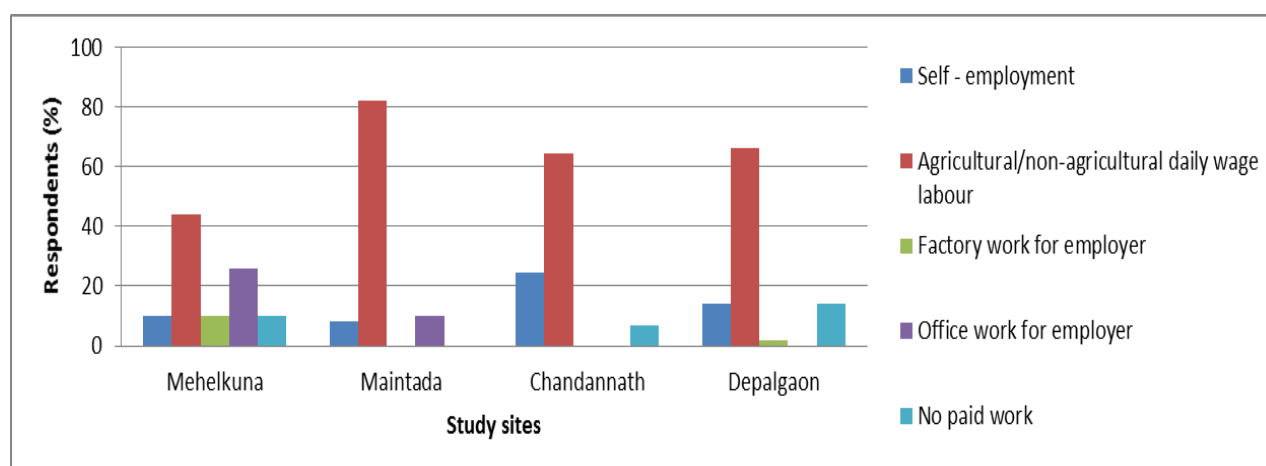
In Mehelkuna and Maintada, women from landowning households (including *dalit* homes with small landholdings) were involved in fresh vegetable and seed production either on their own or through the support of the Pavitra Seed Cooperative (as part of the EDP). Women were also involved in multiple small-scale activities such as agricultural labouring/ sharecropping, livestock rearing, retail shops, tailoring and alcohol making. *In spite of gaining education, women in these sites did not have any paid work opportunities other than the ones described above.* As Nirmal Oli puts it, 'There are women who have completed intermediate level but they do have jobs, they stay at home collecting firewood, etc. [as] there are no jobs for them' (Mehelkuna, February 2016).

We found far fewer paid work opportunities for women in Chandannath and Depalgaon. Almost 60 per cent of the survey respondents were non-literate (see Table 2.1). A majority of the women (mostly from *dalit* households) were involved in non-agricultural labour such as breaking stones on the highway, carrying sand on the riverbed or selling firewood, followed by agricultural labour on someone else's land. In times of acute poverty, women in these sites also resorted to collecting and selling firewood and the collection of herbs. Those who owned land or orchards (mostly non-*dalit* women) were involved in vegetable and apple farming and the collection of herbs. Besides that, women also took up wage work under KEP whenever it was available. *The most common type of paid work in these sites was construction work (breaking stones, carrying sand, etc.) whether in KEP, self-employment or contract-based work.*

As seen in Figure 3.8, men across the four sites were also involved in a range of low-paying work in the area, or they worked as labour migrants (mainly as non-agricultural daily wage workers in the host countries). In Mehelkuna and Maintada, a majority of the men had migrated to Gulf countries, Malaysia or India for work. Those who stayed behind were involved in agriculture or informal sectors such as transportation or as electricians, carpenters, etc. A majority of the men in Chandannath and Depalgaon were involved in masonry and carpentry work. Few men in Chandannath also migrated to other parts of the country or India to work as daily wage labourers whereas some were involved in rearing cattle in the higher regions and running small shops in the vicinity. In the case of Depalgaon, some of the households were also involved in collecting the medicinal herb *yarsagumba* during the off-farm season. There were also instances of unemployed men (10 per cent in Mehelkuna and 14 per cent in Depalgaon) where the onus of doing more paid work fell on

the woman, which exacerbated women’s experiences of the imbalance between her paid work and unpaid care work and the resulting experience of depletion (on which more below).

Figure 3.8: Type of paid work for men



Source: Authors’ own, based on the project’s quantitative data.

Child labour

Interestingly, none of the children under 18 were reported to be involved in any paid work in the survey. However, during the qualitative, participatory exercises with children, some *children shared that they assisted or helped their mothers in paid work, especially if their mothers were sick*. For example, in Mehelkuna and Maintada, boys helped mind shops in the market and girls helped in carrying apples to the market in Depalgaon (Activity Mapping, mixed children, Mehelkuna and Maintada, January 2016; Depalgaon, March 2016). In Chandannath, Kamla Giri – who was unwell most of the time and whose family lived in acute poverty – shared that her sons broke a trolley of stones during their school holidays to augment the family’s income (May 2016). Otherwise, we did not find children actively involved in any form of paid work. During the peak agricultural period, however, when the schools are closed, the entire family works on their land.

Factors influencing women’s ‘choices’ of work

Women’s ‘choices’ of, and participation in paid work was influenced by a complex mix of the nature of employment opportunities available in the area, gender norms on mobility and sexuality, their care work burden and the support available for unpaid care work (NC7, Chandannath, March 2016). *One of the primary reasons for women’s engagement in mainly agricultural and non-agricultural self-employment activities was the subsistence nature of the rural economy, as well as the lack of formal employment opportunities for women with limited education skills*. While men were able to migrate within and outside the country in search of work, women’s primary responsibility of care and restrictions in mobility and sexuality made them take up paid work options available near their homes that were often small scale and low paying.

Mobility-related gender norms were, to some extent, responsible for determining women’s paid work opportunities. In the cases of Mehelkuna and Maintada, while the mobility restrictions were not visibly present as women went to the market regularly to sell vegetables and seeds, *the idea of women regularly working away from home or migrating for work like men was inconceivable, even for women: ‘We cannot work hard like them, earn like them and compete outside the house, we are just limited to our houses’* (Durga BK, Maintada, February 2016). Further, we observed that *with male out-migration, restrictions on women’s mobility and participation in paid work seemed to have become stricter in a few cases because of the norms associated with women’s chastity and sexuality*. Jamuna BK, whose

husband works in India, shares: 'He [husband] tells me I need not work as he is there to earn' (February 2016). This trend is explained by the following quote from one of our respondents:

Men migrate for work to other places/countries with the trust in their wives and their wives want to support in earning a living. But the men tend to suspect their wives and fear that they are involved in wrong doings in their absence. This mentality affects women's ability to work and explore.

(Gita BK, Mehelkuna, February 2016)

In Mehelkuna and Maintada, the community practice of *Parma*¹⁵ during the peak agricultural season was also evident. Across sites, women were primarily responsible for most of the agricultural work while the men mainly helped with ploughing and harvesting:

The women have more workload of farming as well. What we do is just the few 'big' works like cutting the barley, paddy and plough. The men have to go for watering as the women cannot do it. And, the rest is on the women.

(Jeevan Rokaya, Chandannath, May 2016)

Regarding Chandannath and Depalgaon, while it was expected that women work in and around the village, the family members and women themselves had no option but to work even if the paid work was located a long distance away, as in the case of KEP. Therefore, *gender norms on women's mobility restrictions became flexible in the context of dire economic need.*

It is actually not good, to go to the bazaar [and not return home] till night. One may break their leg, break their hand. And someone may say something bad to them, which is not good. It is good to stay at one's house. It would be better to do some work that pays you a monthly salary. Since our earning is not enough, we have to go to the bazaar and stay late. We have [many] problems – that's why we have to work till late.

(Mahesh Dhital, Depalgaon, May 2016)

At the same time, there were caste-based differences in the acceptability of certain kinds of paid work for women. For instance in Mehelkuna and Maintada, women from Brahmin/*chhetri* households did not engage in wage work or activities such as brewing alcohol as it was not considered 'honourable' work (Activity Mapping, Maintada, January 2016). The norm related to respectability of work was not as rigid in Chandannath and Depalgaon owing to extreme poverty. While the majority of women involved in wage work belonged to *dalit* households, women from non-*dalit* households also did wage work in order to sustain the economic needs of the family.

Other factors, such as the availability of familial and employer support for unpaid care work, also influenced women's paid work 'choices', along with the characteristics and conditions of work as we shall see below.

3.2.2 Characteristics and conditions of women's paid work

Seasonality, multiple jobs and number of hours spent on paid work

Seasonality is a strong element of women's paid work, which means that *women do multiple jobs throughout the year*. Women are busy with subsistence agriculture, commercial vegetable/seed production or agricultural labour/sharecropping during the agricultural season (April–July and September–November) and they take up other kinds of paid work

¹⁵ Exchange of labour among community members during planting and harvesting times in agriculture.

such as keeping livestock (in Mehelkuna and Maintada) and collecting herbs and non-agricultural wage work including KEP during the lean agricultural period (in Chandannath and Depalgaon). *The low-paying nature of work also propels women into doing multiple jobs.* We found many women doing two or three types of paid work simultaneously to earn enough for the daily sustenance of the household (Malati BK, Maintada, February 2016; Radhika BK, Depalgaon, May 2016). However, the employment opportunities for both women and men were intermittent in nature. As Harka BK says, ‘We cannot find jobs regularly here. We work for one month and loiter around for two to three months. If we work for ten days, we are free for the next 20 days’ (Depalgaon, May 2016).

Figure 3.9 highlights the average number of months the women respondents were employed in the last 12 months. Regarding Mehelkuna and Maintada, women engaged in the EDP worked for an average of 8.4 months, whereas women involved in other paid work activities worked for an average of nine months. However, in Chandannath and Depalgaon, women engaged in KEP worked for an average of 3.9 months. This is because although the total duration of KEP work is 35 days, this sometimes gets distributed over a number of months if it happens around the peak agricultural period. Women engaged in other kinds of paid work – mostly breaking stones or vegetable farming – worked for an average of eight months.

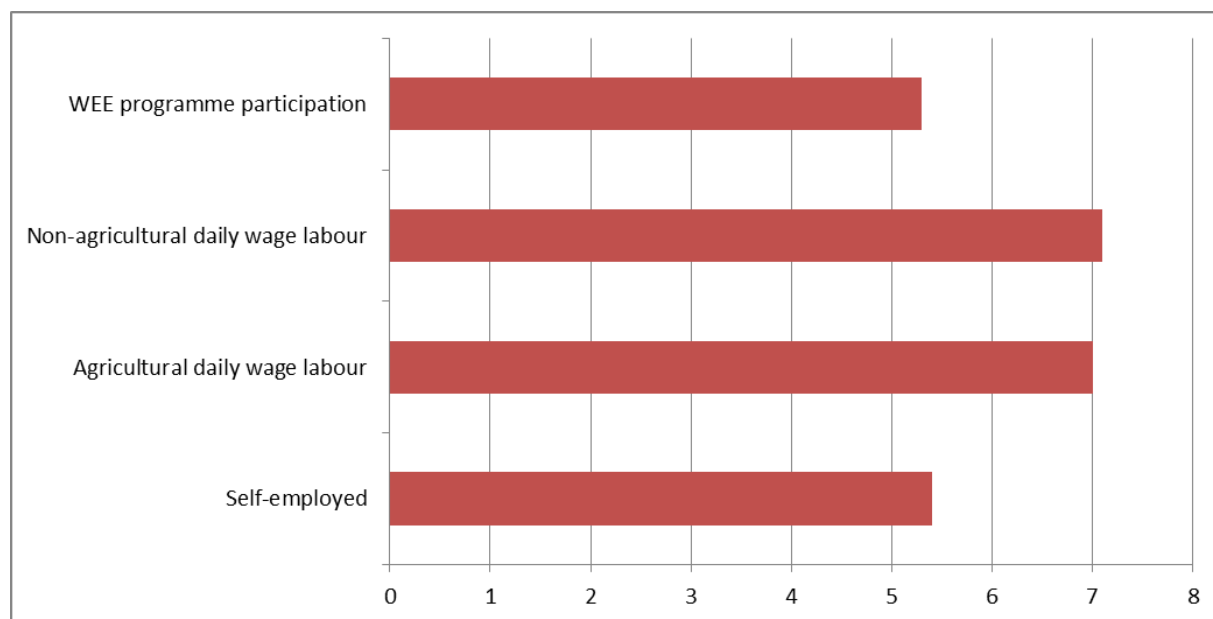
Figure 3.9: Average number of months spent on paid work in the last 12 months across the sites, by WEE and other types of work



Source: Authors' own, based on the project's quantitative data.

We also found that women who were the primary earners in their families were in jobs requiring hard labour and worked long hours (Bhuma BK, Maintada, February 2016; Malati BK, Maintada, February 2016; Sumitra KC, Depalgaon, May 2016). Moreover, as seen in Figure 3.10, along with the drudgery and the arduous nature of the physical labour, women who were engaged in agricultural and non-agricultural wage work also spent more time in paid work than women who were involved in their own agricultural work and other self-employment activities, leading to more acute physical depletion and double burden (discussed in more detail below). Furthermore, the women participants of KEP who were interviewed for this study were found to be doing hard labour in public works construction projects for a fixed time of eight hours. Time spent by EDP participants was based on seasonality; but the women claimed that irrigating fields (owing to lack of irrigation canals) and sorting seeds took a lot of their time, which hampered their time and physical capacities to do other household tasks (Care Calendar and Care Body Map, women only, Mehelkuna and Maintada, January 2016).

Figure 3.10: Average number of hours spent on paid work by women



Source: Authors' own, based on the project's quantitative data.

Women's experiences of paid work depended on several factors such as working conditions, income and women's ability to bargain, which were in turn dependent on their participation in WEE programmes, particularly the EDP. In Mehelkuna and Maintada, women who were EDP member farmers had better market linkages than women who produced and sold vegetables on their own as the Pavitra Seed Cooperative enabled forward linkages by negotiating and agreeing the amount and rates for the seeds with traders beforehand, thereby ensuring a market and guaranteed income for the farmers. In addition, the Cooperative also enabled backward linkages through the provision of short-term loans to the women farmers to facilitate the seed production process. Further, the provision of seed-sorting and harvesting machines by the Cooperative have made the work of women farmers more time- and cost-effective, especially in Maintada: 'With the seed-sorting machines, we can complete a month's work in two days time', say EDP women farmers (Care Body Map and Care Work Matrix, women only, Maintada, January 2016).

However, in Mehelkuna and Maintada, those women who were involved in large-scale vegetable and seed production were able to earn better income than those who did not have access to productive assets like land and who were involved in wage work. Sharmila Oli, a vegetable seed producer, shares: 'I earn enough money to buy my children's clothes and pay their school fee' (Mehelkuna, February 2016).

Moreover, the market linkages and prior agreements with traders facilitated by the Pavitra Seed Cooperative provided women farmers with an ensured market and decent prices, whereas women farmers who were non-EDP members sold their produce locally where the price and saleability of the produce were contingent upon the vagaries of the market.

In Chandannath and Depalgaon, women involved in wage work suffered from a lack of regular income and low payment in the absence of decent livelihood incentives or programmes in the area that could support women. Kamla Giri, a KEP worker from Chandannath says, 'If there is no work available then I carry a basket of firewood [to sell it] and buy salt' (Chandannath, May 2016). In this context, the guarantee of income from KEP was valued by most women from low-income households; however, the short span of

employment period (of 35 days or less) was not enough to make any sustainable economic changes in the lives of women and their families.

Health and safety conditions at work

In terms of other conditions of work, Figure 3.11 shows that women who were self-employed considered themselves to be 'very safe' compared to those involved in agricultural and non-agricultural labour who characterised their work as 'fairly safe'. With regard to health conditions at the workplace, 87 per cent women doing agricultural work, 69 per cent of women doing non-agricultural work and almost half the women in WEE work considered it to be poor. We found women, particularly in Chandannath and Depalgaon, doing extremely arduous agricultural and non-agricultural wage work, such as breaking stones or carrying manure and sand, owing to acute poverty and food insecurity. Breaking stones with no safety equipment (see photo) posed the risk of injury to their hands and eyes, whereas *carrying heavy loads led to chronic health issues like back pain and uterine prolapse*. Women who were involved in KEP also experienced similar drudgery as they were often required to carry stones or sacks of mud/cement. Kamla Giri, a KEP worker from Chandannath, shares: 'When I go to carry the stones, I fear being injured by it. I'm scared that the stones would crush me. While carrying the sand, my back gets wet with the water seeping out of the basket' (May 2016).

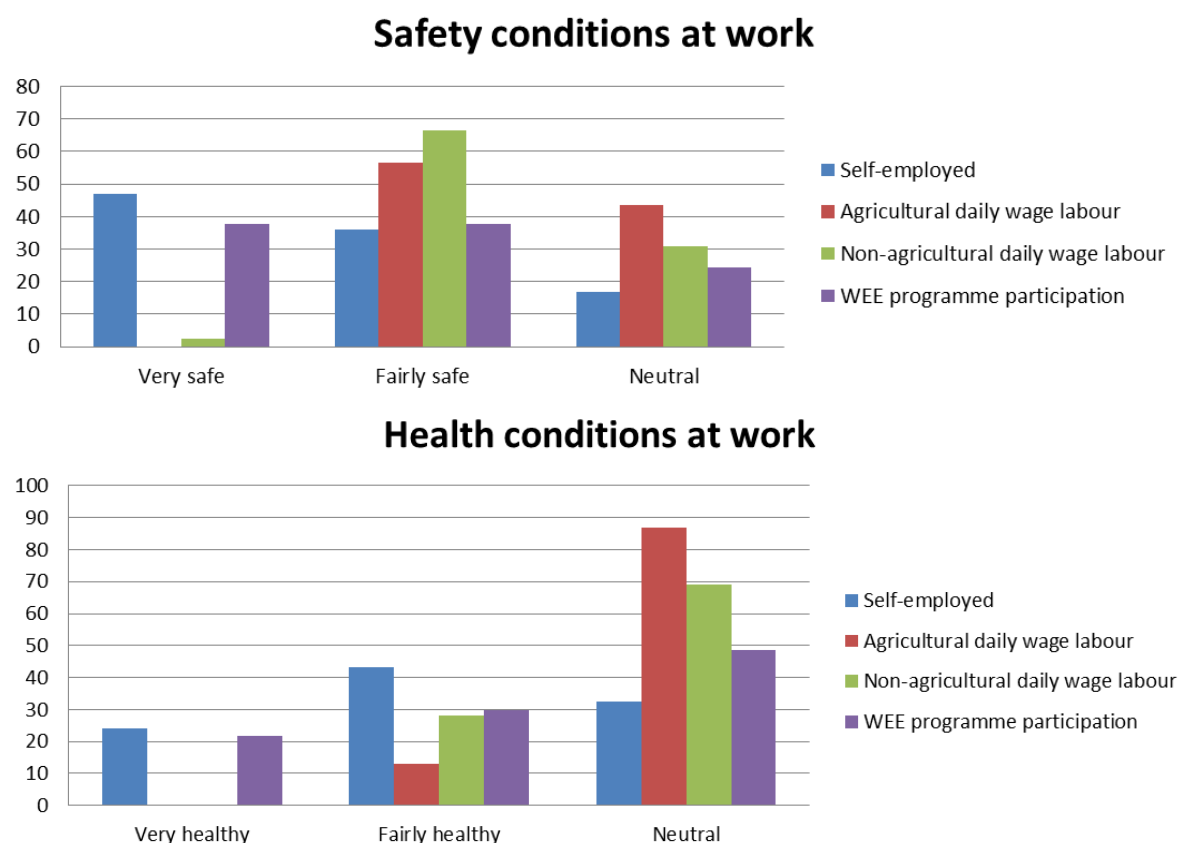
In response to the arduousness of the tasks under KEP, the KEP focal person shared that the nature of drudgery of KEP work also depended on the kind of infrastructural project; for instance, a woman involved in road construction may face a lesser workload than the one who is involved in building micro-hydro projects.¹⁶ However, amongst women who considered KEP their first form of paid work, 50 per cent of them found worksites unsafe and 75 per cent found the health conditions at worksites to be unsatisfactory. Furthermore, while KEP had provided safety gear, such as shoes and helmets, for its workers in Chandannath and Depalgaon in 2015, this was discontinued in 2016 and in the majority of KEP working areas both women and men worked without any safety equipment.



A woman breaking stones in Chandannath, Jumla district. *Photographer: Soraj Shahi.*

¹⁶ This feedback was provided during the district dissemination uptake workshop organised by Oxfam in Nepal in Chandannath on 4 June 2017.

Figure 3.11: Health and safety conditions in paid work with high women’s participation – Nepal



Note: *Working on one’s own land, livestock rearing for selling as paid work, owning one’s own shop, etc.

Source: Authors’ own, based on the project’s quantitative data.

In Chandannath, some women whose families owned land were provided with plastic green houses and drums by local non-state programmes to grow vegetables, which the women sold directly at the local markets. Women preferred doing this work rather than physically draining work such as stone breaking, carrying sand, etc. ‘I like doing vegetable farming as it is less hazardous and drudgerous than breaking stones on the road’ (Gyanu Giri, Chandannath, May 2016).

Childcare facilities at worksites

We did not find a single instance of paid work where a respondent reported that childcare facilities were available at the worksite or in the community. As such, women reported carrying their children with them to the worksites or making their own arrangements at home, sometimes to the extent of leaving them alone in the house. Kusum BK, whose husband is a migrant and who does not have any other carer in the family, shared that ‘there is no one to look after my children. So, I go nearby to break stones. I keep my daughters inside the house, bring the stones and break them at a place close to my house’ (Chandannath, May 2016). Although KEP’s implementation guidelines mention the provision of crèches as and when required (MoFALD 2014), none of the KEP worksites had them. (There were crèche facilities in the four VDCs where pilot and demonstration projects were implemented with the direct support from KEPTA only in 2015.) *The absence of crèches at KEP worksites is a major hindrance to women’s continued participation in the programme.* Januka BK, a former KEP worker, had to quit working in KEP after five days as she had two children under six years old and her youngest child fell sick in spite of leaving him with his mother-in-law at home (Chandannath, May 2016).

Apart from the availability (or lack thereof) of childcare facilities, the research found that in Chandannath and Depalgaon, *pregnant and lactating women were actively discouraged to participate in programmes like KEP owing to the nature of work* (NP5, Depalgaon, March 2016). However, in spite of the discouragement, women like Menuka Dhital shared that they continued to participate in KEP and carried their toddlers on their backs, affecting both their productivity levels and putting their child's lives at risk (Depalgaon, May 2016).

Collectivisation and bargaining

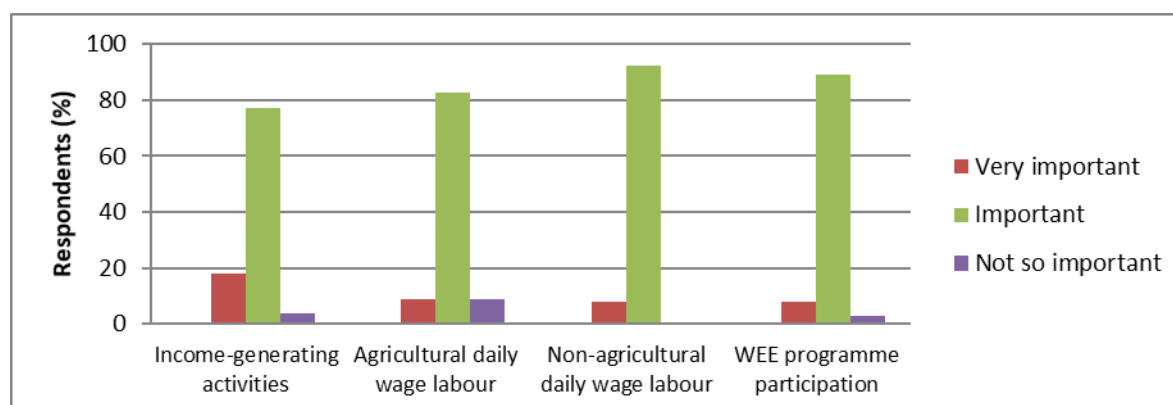
The only positive example of women's capacity to bargain and collectivise was found amongst *women EDP members in Mehelkuna and Maintada who were able, to some extent, to negotiate their work conditions*. 'We tell them [the Cooperative] to bring bigger [harvesting] machine but due to monetary limitation they bring smaller machines' (Sharmila Oli, Mehelkuna, February 2016). In Chandannath and Depalgaon, lack of regular employment opportunities and the poor economic conditions of the households put women in a weak bargaining position with regard to their employers. However, *women continued working despite low wages and unfavourable working conditions out of the fear that any protest would cost them their livelihoods*. Gauri BK shares her anguish: 'What to do! Either we should not take the work. Otherwise, we have to do it whether it is heavy or difficult work. The employers would think that they have paid money so that we should work anyhow' (Depalgaon, May 2016). There was also no instance of any collectivising efforts among KEP women participants and they seemed unaware of any possibility to bargain with KEP officials for better work conditions.

We found that women seed producers, particularly attached to the EDP in Mehelkuna and Maintada, had an increased say in decision-making regarding the production and sale of their produce. However, women across all the sites had limited control over their income and in most cases, it was either the husband or an elderly head in the family who took major financial decisions (Sunita Dangi, Maintada, February 2016; Pushpa Khatri, Depalgaon, May 2016).

3.2.3 The value of paid work

Women considered their paid work to be valuable, especially those who lived in very poor households with few assets. Figure 3.12 shows that between 91.3 per cent and 100 per cent of women – depending on the type of work they carry out – considered their income contribution to be either 'important' or 'very important'. However, their perception of the importance and necessity of their work varied based on the nature of the household and their role and position within the household. Women living in male-headed households usually considered their incomes to be important but secondary, especially in Mehelkuna and Maintada, where the men send remittances from abroad. Manju BK, whose husband has been working in India for the past ten years, told us: 'It is easier on the husbands when the wives help them out by covering the expense of grains, they can save that money but the larger income is of the men. The women help them to balance it' (Maintada, February 2016).

Figure 3.12: Importance of income based on type of paid work – Nepal



Source: Authors' own, based on the project's quantitative data.

In most low-income households, both women and men valued the paid work contributions of women as it was difficult to run the household with the income of a single person and this was especially true of low-income households in Chandannath and Depalgaon. Women and other family members all felt that women did paid work out of necessity and if things were better, they would not work, which further reiterates the gender norm on work that encourages women's paid work only in the context of necessity and acute poverty. Radhika BK is the only earning member of her household and shares:

If I do not work, then there would not be enough at home, like rice, oil, etc. I go work, earn some, and use the money to feed ourselves. If everything was enough at home, why would I go and work for others? Since it is not enough, I have to go work for others. We work for others and eat.
(Depalgaon, May 2016)

Children too valued their mother's paid work for the contribution they made to the overall household income and their educational experiences. This was in spite of the difficulties of increased care burden and disturbances in their studies owing to disproportionate transfer of care work with their mother's paid work. Sheetal BK, the eldest daughter of Radhika BK, values her mother's paid work as she says, 'I have to cook. My mother has to go for work as my father cannot do any work. We would not have enough to eat unless my mother went for work and brought some rice at night' (Depalgaon, May 2016).

Women usually spent their incomes on care-related items such as food, clothes and stationery for children's education across the sites (Care Wallet, Mehelkuna, January 2016; Care Wallet, Chandannath, March 2016). Women's paid work in Chandannath and Depalgaon was a necessity to fulfil families' basic survival needs and *while they and their families recognise their paid work contribution, they did not necessarily see it as empowering* because of the low payment and high degree of drudgery associated with the work. Regarding Mehelkuna and Maintada, women's group meetings and trainings played an important role in creating aspirations for paid work, especially for women who were with the EDP. Similarly, those women who were producing seeds on a large scale made significant contributions to the household income and recognised its value:

I manage money to educate my children, and to feed them whenever we have shortage of money at home. I have to hire people to plough and dig the farm, during that time I have to do all the work. So, I think I am doing everything.
(Sharmila Oli, Mehelkuna, February 2016)

Having discussed the paid work conditions and experiences of family members and especially the women in the household, we now turn to how the two spheres of unpaid care work and paid work interact in women's lives, and the kind of difficulties that women and their families endure owing to the imbalance in women's lives that may be created as a result of overwork.

3.3 Balancing paid work and unpaid care work: interactions and depletion

3.3.1 The relationship between unpaid care work and paid work

As discussed in the previous section, women across the four sites were found to be engaged in low-paying, small-scale, often multiple and seasonal forms of self-employment activities owing to lack of regular employment opportunities, lack of skills and the lack of ownership of assets, together with their care work responsibilities. *Care work responsibilities, particularly the care of small children, coupled with a lack of support for childcare, affected women's ability to participate in paid work.*

For a start, care work responsibilities limited women's options to engage in paid work. Mankumari Oli, a seed producer with the Pavitra Seed Cooperative in Mehelkuna, says, 'I cannot make more because my child is small. If she was grown up, I would have raised more buffaloes, I would get more fertiliser to use it in the farm to grow more vegetables and seeds' (February 2016). The study also found that women with a *high care dependency ratio heightened the lack of options for them and this was more so in female-headed nuclear families*. Kusum BK from Chandannath has three children under six years and shares:

How can I do [any more] paid work; I have no one to look after my daughters. Therefore, I can't buy salt, oil or rice. I just look after my daughters and do the household work as there is no one to help. And, for the personal work or any paid work I might get, I leave my children inside the house and go to work.
(May 2016)

In most cases, *women either withdrew from paid work after childbirth or took up work that was closer to home and not time-consuming in the absence of childcare provision and because of the intensive nature of their paid work*. Jamuna BK from Mehelkuna says, 'I left it [agricultural labour] since my son was born. I [now] sell chicken and sometimes brew alcohol' (February 2016). For women seed producers in Mehelkuna and Maintada, childcare responsibilities (coupled with the lack of basic provisions such as irrigation and lack of ownership of land) meant that women struggled to continue farming or to upscale their work (Bhuma BK, Maintada, February 2016). Further, we found that for women with a medium care dependency ratio, *their choice of employment was also determined by the flexibility that their work gave in terms of number of hours spent at work*. As such, we saw an inverse relationship between women's care dependency ratio (coupled with the availability of familial support) and women's ability to take up paid work located further away from her home.

Male migration for work, and the lack of familial support that women experienced as a result, had a bearing on the imbalance that women experienced between their paid work and unpaid care work responsibilities. Some women had to reduce their scale of paid work or miss out on paid work opportunities as their care work responsibilities increased in the absence of men. For example, Durga BK, from a nuclear family and whose husband has migrated for work, told us: 'It is [physically difficult to balance], recently they had told me to come for [construction] work but I had some household chores, and there was no one to help and we had to cut the *thaagal* [fodder] so I couldn't go' (Maintada, February 2016). The effects of male migration on women's double burdens were only half-heartedly acknowledged by some men: 'It is definitely difficult for her when I am not around, to manage the chores, children and seed production', says Nirmal Oli, 'but my mother is there, she

helps out' (Mehelkuna, February 2016). For women with limited familial support, however, the experience of imbalance was acute:

I am alone and I have to do everything from consoling the crying baby, to feeding him and the ox, I have to throw the waste, wash the dishes, and cook food. I wish my mother-in-law was here; I don't get any time to rest.

(Jamuna BK, Mehelkuna, February 2016)

The nature of the unpaid care work that women performed also affected their ability to perform paid work. Some women from Chandannath and Depalgaon, especially those involved in breaking stones and construction work, also shared that *because of their exhaustion from unpaid activities such as collecting firewood and working on the farm, they were always tired and not in a good state to carry out arduous, labour-intensive paid work*. Pramila Rokaya shares: 'I do get tired. I get equally tired there and I am slow at [paid] work. I can't be efficient at work' (Chandannath, May 2016).

The intensity of the double burden and the attendant imbalance that women experienced was also intrinsically linked to the availability, quality and access/proximity to public resources and services such as roads, water taps, fuel, etc. (Ferrant *et al.* 2014). *Some of the unpaid care tasks such as fetching firewood and water and cutting grass took up a lot of women's time and energy which in turn reduced their capacity to do more paid work.*



Women multitasking care work – collecting water and washing clothes and dishes, Depalgaon, Jumla district. *Photographer:* Deepta Chopra/IDS.

While women's care work had an impact on women's paid work, both in terms of their ability to engage in paid work as well as the nature of paid work they engaged in, *women's participation in paid work also had an impact on how care work was managed, and which care tasks were prioritised and postponed*. It also affected the social organisation of care, which resulted in a disproportionate care burden on older women and children in the absence of care provision by the state and the market.

My daughters sometimes make food and I go to work during the day after cooking in the morning and sending the children to school. After returning in the evening I fetch water and my daughters make food. The older ones who can cook, they do but the younger ones cannot. They also feed the cattle in the afternoon on holidays.
(Pramila Rokaya, Chandannath, May 2016)

We found several instances of *older women taking care of children when women went to paid work* (Sabitri BK, Chandannath, May 2016; Urmila Dhakal, Mehelkuna, February 2016). Sushila Dangi, mother-in-law shares how she helps her daughter-in-law, a young mother who goes to paid work:

Sometimes, I make food; bring water so that it is easier for my daughter-in-law. Her son is still young and needs to be fed by his mother so I do her work outside the house too. It's difficult with the baby so I'm helping out so that it's easier for her, I consider her to be like my daughter.
(Maintada, February 2016)



An older woman taking care of a child in Chandannath, Jumla district.
Photographer: Saroj Shahi.

While women and children stepped in to support women in their double burden, mostly we found that *women coped with their dual burdens by 'stretching' their day by waking up earlier in the morning and going to rest later at night, what we refer to as 'time stretching'* in this research. In a typical instance, Kabita BK says:

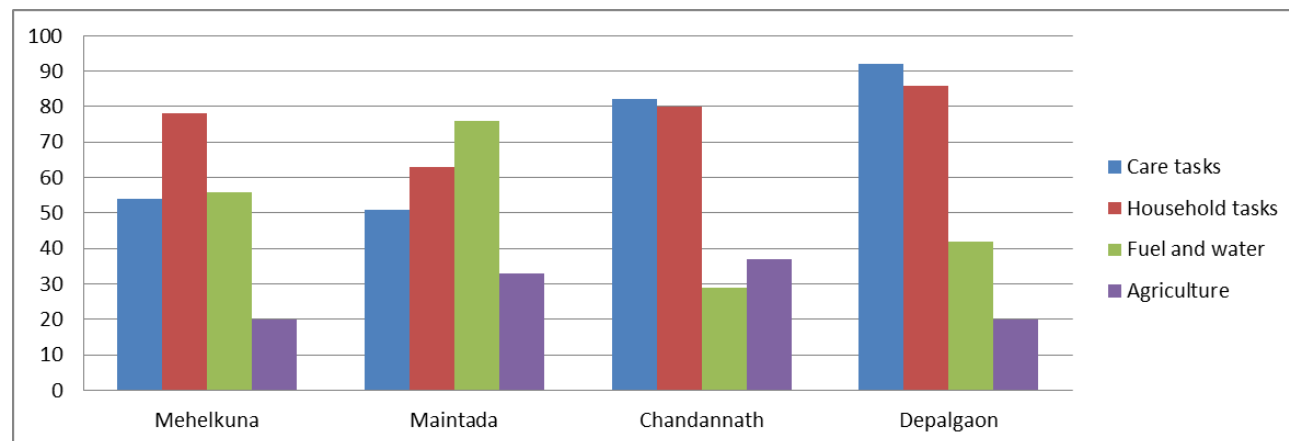
I wake up at 3am to cook food, feed it to children when it's hot. I leave for the forest at 4am; it takes two hours to collect the firewood. Then I have to be back by 8am to get the children ready for school.
(Chandannath, May 2016)

Similarly, the practice of *Parma* also burdened women with extra cooking for everyone working on the farm, which they managed by waking up at 3am (Care Calendar, women only, Mehelkuna, January 2016).

However, stretching their time to manage their double burdens was no easy task and our data points to the difficulties that women faced in juggling multiple responsibilities. Most women reported that they were unable to clean the house, animal sheds and collect

firewood or fodder when they were busy with paid work (see Figure 3.13).¹⁷ Seventy-seven per cent of our survey respondents said that they found it difficult to combine household tasks with paid work, 70 per cent found it difficult to combine care tasks with paid work and 51 per cent said that they found it difficult to combine the collection of fuel and water with paid work, pointing to the time-consuming and arduous nature of both unpaid care work and paid work.

Figure 3.13: Tasks women found difficult to combine with paid work



Source: Authors' own, based on the project's quantitative data.

We also found that across the four sites, in female-headed households, particularly those that were nuclear, women had to manage their time based on the degree of care and paid work responsibilities, which often led to some work remaining undone. Moreover, the imbalance that women experienced in their paid and care work duties were more acutely felt based on the seasons of work, peaking during peak agricultural months: 'I miss out doing many things [during peak agricultural months], sometimes I can't feed the cow, sometimes there is no water and I can't even look after my child', says Jamuna BK (Mehelkuna, February 2016).

Apart from their care and paid work responsibilities, *women also spent a substantial amount of time on community work such as savings group meetings, cultural and religious events and community development-related work.* On the one hand, women saw these groups as platforms for financial support, social interaction and learning; on the other, the presence of multiple groups in a single village and their requirement of mandatory participation added to women's time poverty, and levels of guilt for not being at multiple places at once:

I had gone to Kathmandu [for training] earlier, my daughter was three years old, I had gone in the month of Asoj, it was a time to cut the paddy. My husband and sister-in-law were already working on the field and I told them I wouldn't go. However, Madam¹⁸ called and told me that I have to be present at the training at any cost. I refused as I did not want to leave my daughter behind. Then my family told me not to miss that opportunity, and encouraged me to go... It was difficult for me, I left my daughter behind, and it was more difficult for me than the people who had to do the household chores.

(Sarita Kunwar, Maintada, February 2016)

¹⁷ Women were asked in the survey to choose any three tasks/reasons (from multiple codes) that they found difficult to combine with paid work (see Module 7; see Annexe 2 – Summary of survey questionnaire).

¹⁸ Madam here refers to the Pavitra Seed Cooperative staff.

As we have seen in this section, women's dual responsibilities of paid work and unpaid care work interact in ways that affects each in detrimental ways leading to an imbalance (of too much work). Next we examine the consequences of the imbalance on women's mental and physical wellbeing.

3.3.2 Effects of imbalance on women: depletion of women's mental and physical wellbeing

Across the four sites in Nepal, *women spoke of the depleting effects of their dual burden on their physical and mental wellbeing* although there were variations based on the nature of paid work and unpaid care work, family structure and the life cycle of the woman. The depleting effects on women's physical and emotional wellbeing (examined below) emanated, apart from other things, from acute time poverty, including a lack of time for rest and leisure.

Effects of imbalance on women's time for rest and leisure

The time available for rest and leisure for women was mostly seasonal in nature with the months of June, July, September and October being the most hectic owing to them being planting and harvesting times on their farms. Women did not get time for rest in the months preceding the rains and winter, as they had to collect firewood and cut fodder to tide the household over the difficult months. The women also shared that *they got no time for rest during important festivals such as Dasain and Tihar* (Care Calendar, women only, across all sites). Other factors such as economic stability, household structure and level of care dependency ratio also influenced the time women had available for rest and leisure. For instance, the high levels of migration in Mehelkuna and Maintada affected women's time for rest and leisure (especially in nuclear households) as they had the additional responsibility for doing the paid work and unpaid care work (Care Body Map, women only, Mehelkuna and Maintada, January 2016).

Further, *care tasks such as the care of children provided little time for rest*. Bhuma BK, whose two children are aged three years and seven months, says, 'I do not get any time to rest in the day as I have to constantly take care of my children along with finishing my other work. I only rest in the night when I sleep' (Maintada, February 2016). As seen in Table 3.2,¹⁹ 39 (of a total of 200) women said that they got no rest or sleep on four or more days of the week. The reasons provided by most women in Mehelkuna and Maintada for the lack of rest and sleep were care tasks, household tasks and fuel and water collection. Women also shared that the lack of public services like irrigation, roads, water, fuel, etc. reduced their time for rest and leisure (also see Ilahi and Grimard 2000). In Chandannath and Depalgaon, women lost sleep and rest owing to their involvement in paid work as well as unpaid care work. As such, *acute poverty and food insecurity in these two sites led to most women being engaged in multiple paid work throughout the year, which affected their time for rest and sleep*.

¹⁹ Women were asked to say how often they did not get time for rest and sleep in the last seven days, and also to choose up to three reasons for the same in the GrOW survey questionnaire.

Table 3.2: Frequency and reasons for not having enough time for rest and sleep in last seven days

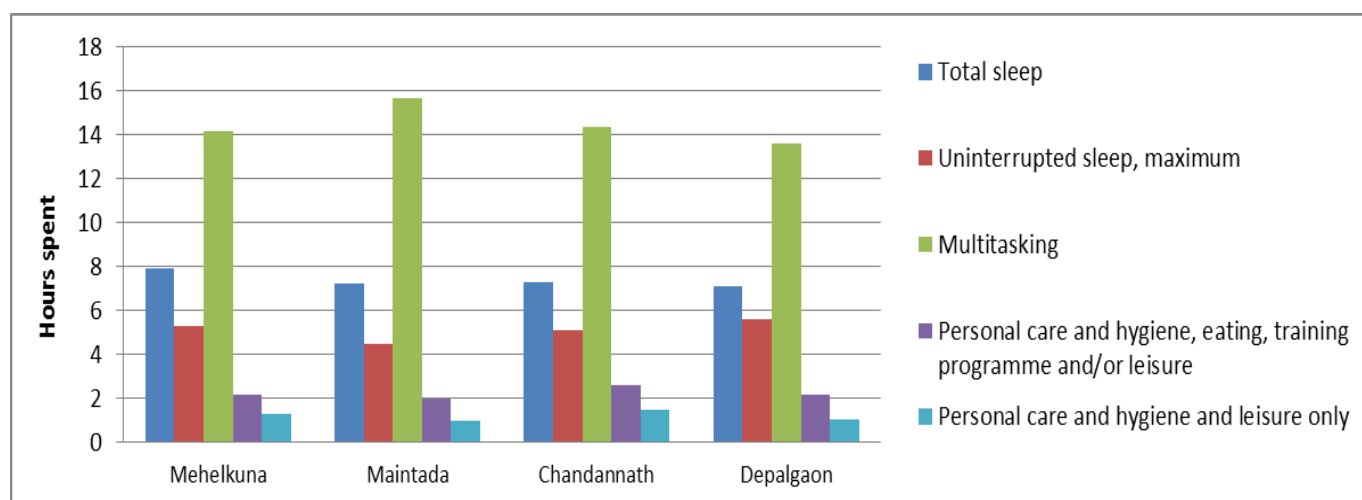
<i>Almost always (3–4 days per week)</i>							
	Care tasks	Household tasks	Fuel and water	Agriculture	Paid work	Community activities	Observations
Mehelkuna	75.0	75.0	25.0	0.0	0.0	0.0	4
Maintada	100.0	100.0	100.0	0.0	0.0	0.0	1
Chandannath	50.0	38.0	13.0	25.0	38.0	13.0	8
Depalgaon	56.0	33.0	11.0	56.0	0.0	0.0	9
Total	59.0	45.0	18.0	32.0	14.0	4.5	22
<i>Always (4+ days per week)</i>							
	Care tasks	Household tasks	Fuel and water	Agriculture	Paid work	Community activities	Observations
Mehelkuna	20.0	70.0	50.0	40.0	30.0	0.0	10
Maintada	9.1	64.0	64.0	27.0	9.1	9.1	11
Chandannath	40.0	60.0	0.0	0.0	80.0	0.0	5
Depalgaon	46.0	15.0	0.0	62.0	54.0	0.0	13
Total	28.0	49.0	31.0	38.0	38.0	2.6	39

Source: Authors' own, based on the project's quantitative data.

The research also found that *women spent just over an hour on leisure, inclusive of time spent on personal care and hygiene* (see Figure 3.14).²⁰ Further, while women spent an average of about seven hours on sleep, it seems that women try to accumulate their sleep time, as the difference between total hours of sleep and the maximum number of hours of uninterrupted sleep is quite different – almost three hours in Maintada, and around 1.5 in Depalgaon. The most interesting finding related to time has been on multitasking: *on average, women were found to be multitasking over 14 hours a day across all the sites, which might, but not always, include childcare*. Our survey also revealed that women were caring for their smaller children even as they tried to sleep at night.

²⁰ Based on Module 2: Women's time allocation of the survey questionnaire; see Annexe 2.

Figure 3.14: Time spent by women on multitasking, sleep, rest, personal hygiene and leisure – Nepal



Source: Authors' own, based on the project's quantitative data.

Interestingly, women said that they get some time to rest when they were menstruating as gendered purity norms assume that menstruating women are impure and would pollute food: 'I am not doing cooking today as I am menstruating so I slept in late' (Rupa BK, Chandannath, May 2016). However, women also shared that they continue to do farm work and other pending household tasks using the time they save from not cooking and serving food to others.

Effects on women's physical and emotional wellbeing: depletion

There was a constant refrain from women about how tired they felt and the emotional effects of constant drudgery and lack of rest (Eyben and Fontana 2011) in the face of necessity:

We don't even get to sit; resting is not possible. When we go to collect firewood in the morning, we carry flatbread with salt. How long can we survive on that? We don't have water to drink. We come back thirsty and tired carrying the basket. Even after coming back we have to arrange many things such as water, the stove, food, the grass and look for the cattle. We have to worry about meeting our daily needs like food. We are able to buy a half a kilogramme of rice if we find some work otherwise we don't. It is not a happy life.

(Kamla Giri, Chandannath, May 2016)

Based on our participatory exercises (Care Body Map, women only; Care Marbles, Care Work Matrix) and our case studies, certain paid work such as stone breaking and carrying sand in Chandannath and Depalgaon was considered very arduous with depleting physical effects: 'Sometimes my hands, legs and back hurt. And, we have to continuously break stones [for seven to eight days to fill one trolley of stones]. The wind gets into our eyes and it hurts as well' (Kusum BK, Chandannath, May 2016). For women in agriculture, there was a heavy burden of work during planting and harvesting which led to high levels of physical fatigue and no periods of rest:

During the peak agricultural season, she [daughter-in-law] has to work both at home and in the farm. Sometimes she goes to work in the farm in the morning and comes back in the afternoon to finish her [care] work... she gets tired; sometimes she gets fever after work or her body aches. She takes herbal medicines and goes to work the next day.

(Jayalal BK, Chandannath, May 2016)

Women recognised the effects of the lack of resources and support on their physical wellbeing: 'If we had big plot of land, we would use ox or hire people for ploughing or digging. It is just a small piece of land. We have to dig it ourselves. My body hurts for the whole night', says Menuka Dhital, who owns a small piece of land and sometimes sells firewood to meet the needs of her six children (Depalgaon, February 2016). Moreover, the multiplicity of paid work that women undertook, along with their care responsibilities, affected both their physical and their mental wellbeing,

If I do this thing, that work will be left. And if I do that work, this work will be left. If there was someone to do these things, my head would not have exploded. And no one is there at home to do these things, so all the burden is upon me. Sometimes, I feel I have done this and that. Other times I feel worried.

(Menuka Dhital, Depalgaon, February 2016)

Across the research sites, *women found unpaid care tasks such as firewood collection, cutting grass, digging, irrigating and fetching water to be particularly high on drudgery and time consuming.* Women complained of back aches, headaches, etc. owing to the nature of their care and paid work (Care Work Matrix, Care Calendar and Care Body Map, women only, Mehelkuna and Maintada, January 2016; Chandannath and Depalgaon, March 2016). *The effects of physically draining unpaid care work were felt acutely by older women.* Gauri BK explains that 'she [mother-in-law] cannot carry a bucket, and she cannot carry big loads. So, she does light work, like cooking, feeding children, sending them to school, bathing them, combing the girls' hair' (Depalgaon, May 2016). Older women such as Rasila BK of Chadannath and Devaki BK of Depalgaon further shared how difficult it became to take care of children with old age and failing health, particularly in a context of low resources and minimal access to health facilities in the area.



Women carrying heavy loads of hay to be used as fodder for their cattle and as roofing material, Depalgaon, Jumla district. *Photographer: Deepta Chopra/IDS.*



Women carrying woven baskets, which are culturally ordained to be carried only by married women; Depalgaon, Jumla district. *Photographer: Soraj Shahi.*

The research also revealed that cultural and gendered norms, such as only married women fetching firewood (across all sites) and carrying woven baskets²¹ (in Chandannath and Depalgaon) (see photo), further burdened women as these tasks could not be redistributed to anyone else in the family. Some of the acute fallout of the heavy physical loads carried by women were the all-too-common cases of uterine prolapse and frequent miscarriages (see photo; Care Body Map, women only and men only (across sites)), which can also be linked to gender norms (Watson 2003; Radl, Rajwar and Aro 2012). Moreover, many women, particularly those with low incomes in Chandannath and Depalgaon, went without medical treatment for these ailments as they did not have enough resources to go to the hospital in the main town (Ghai 2003).

3.3.3 Effects of imbalance of women's work on children and substitute carers

Women were usually helped by their children to do care work, including sibling care, which had a knock-on effect on the children's health and available time. In Mehelkuna, girls complained about the arduous nature of the work involved in obtaining flour and cutting grass (which they often have to do on their weekly holidays to help their mother), finding both tasks physically depleting and time consuming: 'The mill is further down and it takes two to three hours to do the work... we have to carry heavy loads on our heads which results in headaches and back aches' (Care Body Map, girls only, Mehelkuna, January 2016).

Boys were found to be more involved in unpaid care work in families with no daughters. Surendra Giri, 14, complained that he would like to have more time to study but he has to do most of the household tasks (such as cooking) and sibling care as his parents are unwell and his elder sister is married and lives elsewhere (Chandannath, May 2016). Children whose mothers were the primary caregivers also complained of not being able to spend more time with their mothers (Kabita BK, Chandannath, May 2016).

Frequently, older women who took over the tasks of younger women did so at the cost of their own wellbeing: 'In spite of my health, I help carry the firewood as my daughter-in-law cannot do everything', says 50-year-old Purnikala Giri (Chandannath, May 2016). Furthermore, during busy agricultural months, because the entire family was involved in farming, some of the tasks such as cooking and looking after the cattle fell to the older women or older children in the family (Rupa Dhakal, Mehelkuna, February 2016).

Importantly, owing to women's double burdens, *women felt they were not able to give sufficient time to the care of their children*. In households with no adult carers, women at times sought the help of relatives or neighbours for childcare when they went to paid work. However, in some cases, especially in Chandannath and Depalgaon, there were also instances where children 'shadowed' their mothers to the sites of their paid work, despite the lack of childcare provision there, because there was no substitute carer at home (Kabita BK, Chandannath, May 2016; Menuka Dhital, Depalgaon, May 2016).

In this section, we have analysed how women's care and paid work interact based on life cycle patterns, structure of family, gender norms, etc. to show the causes, consequences and coping mechanisms of the dual burdens that women experience, including the depleting effects on women's (and children's) mental and physical wellbeing, their lack of time for rest and leisure, as well their coping mechanisms such as time stretching.

In the next section, we analyse the role of WEE programmes in creating livelihoods options and an enabling environment for women's entry into paid work, particularly, and whether, and if so how, they (can) create an enabling environment for women to more positively balance their care work responsibilities, so that they engender a 'double boon'.

²¹ For carrying manure, firewood, sacks of wheat to the mills, apples and other produce, etc.

4 WEE programming: moving towards a ‘double boon’

As discussed in Section 3.2, the paid work of women from low-income households across all four sites mainly consisted of informal, small-scale and self-employment activities, which were affected by seasonality and characterised by low-paid and labour-intensive work with no or minimal care provision from the employers or state. However, there were variations in terms of recognition of women’s double burden and inclusion of enabling working conditions for women between the two selected WEE programmes and other paid work as well as within the two WEE programmes.

The non-programme women respondents, across the four sites, who were mainly involved in agricultural labour, non-agricultural wage work such as breaking stones/construction work and self-employment activities such as running shops, tailoring, and selling vegetables, apples and firewood among others, did not have any access to care services through employers or state. The *precarious working conditions and the absence of care provision exacerbated women’s burdens, and created a discouraging environment for their participation in paid work*. As we have already noted, women who were involved in arduous paid work like breaking stones or agricultural labouring often worked long hours and carried heavy loads with no safety equipment, which exposed them to injury and health risks. Similarly, women also faced difficulties because of the absence of drinking water and toilet provision. The absence of childcare facilities at the worksite as well as in the community often discouraged women with small children to engage in and continue paid work. At the same time, there were no market linkages for the women who were involved in vegetable and apple farming on their own. They were dependent on the vagaries of the market:

I have to go early in the morning [to the market to sell]. One has to start off at 4am. If it sells, I come without any load. If it does not sell, then I have to carry the same load on the way back.

(Sumitra Khatri, Depalgaon, May 2016)

Further, lack of public services such as roads and transportation also added to the drudgery for women involved in vegetable and apple farming, who had to carry the produce on their back and walk a long distance to sell in the market.

In such a context, in the following section, we seek to contrast the experiences of WEE programme participants (particularly in alleviating the double burden for women) in order to understand how WEE programmes may generate a ‘double boon’, viz., paid work that empowers and supports unpaid care work responsibilities.²² To do this, we analyse the experiences of women and staff of the programmes to understand whether and how the programmes (may) account for the unpaid care work performed by women.

²² Across all sites, there were several other WEE programmes implemented by state and non-state actors focusing on providing saving/credit and income-generating opportunities to women, mainly through the formation of groups and cooperatives and facilitating self-employment activities. These programmes, particularly the groups formed by the District Women’s Development Office, highlighted the issues of women’s disproportionate unpaid work burden. However, none of the programmes provided any institutional mechanisms or support to address the issue. On the other hand, women also complained of increased time poverty because of the mandatory participation in multiple women’s groups with the same nature and goals.

4.1 Enterprise Development Programme (EDP)

The focus of Oxfam's EDP on women's economic empowerment has resulted in several positive changes, especially in terms of women's participation as producers as well as members of the Pavitra Seed Cooperative.²³ As per the latest data provided by Oxfam's EDP team in Nepal (March 2017), the focused targeting of women participants, including *dalit* women, has resulted in a substantial number of *dalit* women members of the EDP in Mehelkuna (119 out of a total of 338 female members of the Pavitra Seed Cooperative), though the number is low in the other VDCs where the EDP through the Pavitra Seed Cooperative is active (Maintada has eight *dalit* women members out of a total of 76 female members). This number could possibly be low owing to the limited landholdings in the hands of the *dalit* community and more difficult access to the programme for people living in the highlands.

Along with an increase in women's participation, the quality of women's engagement in the various components of the programme has also changed owing to the Participatory Learning Centres (PLCs) that Oxfam in Nepal runs with its local partner, EDS, at the start of the implementation of the programme. As one of the programme staff, NP2 puts it, 'There was a time when the women could not even say their names, they would skip the meetings, they were apprehensive about attending it. However, today, they can easily express their thoughts and ideas and attend every programme' (Maintada, January 2016).

One of the key aspects of the EDP is to create backward and forward linkages for women producers. As we have seen in Section 3.2, the Pavitra Seed Cooperative enabled forward linkages by negotiating and agreeing the amount and rates for the seeds with traders beforehand, thereby ensuring a market and guaranteed income for the farmers. The Cooperative also enabled backward linkages through the provision of short-term loans to the women farmers to facilitate the seed production process. The best price shop (see photo) also helped women to access good fertilisers and seeds for a fair price without travelling too far to procure them. Women also found training in agricultural techniques provided by the EDP useful as it helped them increase agricultural productivity, thereby enabling an increase in their incomes (NC2, Maintada, January 2016).

4.1.1 Care-responsiveness of the EDP

In terms of the care-responsiveness of the EDP, the PLCs have helped EDP staff to recognise women's time poverty and double burden (Ghosh *et al.* 2017a). Interestingly, *the programme seeks to alleviate this burden by decreasing their paid workload through mechanisation*. The provision of seed-sorting machines by the EDP to women is also an important alleviator of drudgery, with women EDP participants noting how these machines have both improved productivity and also drastically reduced the time spent on the same work from one month to two or three days (Care Body Map, women only, Maintada, January 2016), thereby decreasing their time poverty substantially (see Ghosh *et al.* 2017a).

Apart from these indirect interventions targeted at overall drudgery and work burdens, a direct intervention aimed at reducing *care* burdens has been through the introduction of a biogas facility in Ward 5 of Mehelkuna provided by the Pavitra Seed Cooperative, which NP2 notes has 'decreased their workload and improved their health' (Mehelkuna, January 2016). At the same time, the recognition of women's care needs has also been institutionalised in the Pavitra Seed Cooperative, albeit to a limited extent; during trainings that involve women staff, the Cooperative covers the expenses of a substitute child carer as well.

²³ For details please see Oxfam (2016) and Ghosh *et al.* (2017a).



Women buying seeds and fertilisers from the best price shop, Mehelkuna, Surkhet district. *Photographer: Anweshaa Ghosh/ISST.*

4.1.2 Challenges in implementing the EDP

Almost all women seed producers also spoke of the *lack of irrigation facilities in the area as a challenge as it hindered their economic gains* and it increased their burdens as they had to irrigate their farms manually (see Ghosh *et al.* 2017a). Furthermore, the source of drinking water and water for irrigation is the same and thus community members have to take turns to irrigate their farms, which restricts their ability to earn more income (Jamuna BK, Mehelkuna, February 2016; Rukmini KC, Maintada, February 2016; NC4, Maintada, January 2016).

Women also spoke about the difficulty in carrying sacks of grain on their heads in the absence of affordable transport: 'We have to carry it [the seeds] as public transport charges are high' (Mankumari Oli, Mehelkuna, February 2016). In Maintada, NC6 shared that efforts were made to build a seed collection centre in Maintada with the help of Oxfam and two of the local cooperatives including the Pavitra Seed Cooperative, but it failed due to staff inefficiency so the women have gone back to carrying their produce to the market. A recent email conversation with Oxfam, staff revealed that a new seed collection and processing unit had been set up in Mehelkuna in July 2016; however, though useful, it would be still difficult for women from remote villages (in the highlands) to reach this one collection centre in one VDC given the distance and reach of the programme in different VDCs.

4.2 Karnali Employment Programme (KEP)

KEP is a social protection programme targeted at households living in extreme poverty in the Karnali region. From a care lens, this programme was selected for the study based on its gender-specific component, which prioritises female-headed households as one of its target groups. This targeting has encouraged women from low-income households with no alternative source of earning to gain access to income and contribute to household care expenditures. Initial analysis at the time of state programme selection for the study also showed that there was high female participation in the programme. *A crucial reason for this high female participation in KEP can be attributed to the fact that the programme's guarantee of work and income for more than a month (35 days) is valued by the low-income households in the context of Jumla district where there is high rate of insecurity and scarce employment opportunities for women from low-income households.*

Another gender-responsive feature of KEP is that *it mandates equal wages for women and men*. The KEP implementation guidelines stipulate a wage rate equal to 80 per cent of the unskilled district wage rate (MoFALD 2014). The total KEP wage rate includes a basic flat rate and a supplementary rate, calculated on the basis of the volume of work finished by a group in a number of days and therefore varies according to the group's productivity (NP3, Chandannath, March 2016). While the basic rate ensures a minimum wage for the workers, the dependence of a supplementary rate on productivity might be disadvantageous for women (especially those with small children) as they get overburdened because of the pressure to finish the work faster while simultaneously having to fulfil their unpaid care work obligations.

Furthermore, KEP makes provision for direct payment to the workers through the authorised representative from VDC, in the presence of KEP staff and social mobilisers. Programme staff note that this has resulted in the improved access of women to income as well as a say in household care expenses (NP4, Chandannath, March 2016). KEP's implementation guidelines, issued in 2014, recommend disbursement of payment through banks in the coming years, which may pose difficulties for women if it is not also combined with financial inclusion initiatives ensuring that women access banks without a tedious process of withdrawing money (MoFALD 2014).

4.2.1 Challenges in the implementation of KEP

Lack of childcare provision is one of the biggest hindrances to both women's participation in the programme and in enabling a 'double boon' for women through KEP. The programme excludes women with children under one year old from working. Among those who are selected, the absence of childcare facilities either discourages women with small children to continue working or forces them to take small children to the worksite which, on the one hand slows down their work and on the other, puts children's health at risk. Menuka Dhital, a KEP worker from Depalgaon, either leaves her one-year-old son with her mother-in-law in the village or takes him to the worksite. She shares:

It takes two hours to reach there... if it were nearer, I could leave the child on the ground. But there are rivers around where we work. How could we work there? If there was someone who would hold my son, thinking it is difficult for me to work carrying the son, it would have been easier for me.

(Menuka Dhital, Depalgaon, May 2016)

Similarly, *the long distances to the worksites have also affected the ability of the programme to enable a positive balance for women with their dual responsibilities*. Although KEP's implementation guidelines (MoFALD 2014) specifically mention that the worksite should be within one-hour walking distance from the village, most of the women respondents at the two sites shared that it takes them two to three hours to reach the worksite: 'It is very far, it takes

two hours to reach and two hours to come back... I did not even have energy to walk because of the tiredness' (Ramkala BK, Depalgaon, May 2016). This disrupts their ability to balance both their unpaid care work and paid work responsibilities.

The working conditions in the KEP worksites are difficult with a lack of provision of basic facilities. Workers spend eight hours at the worksite; however, there is no provision of drinking water, toilets, or safety gear such as helmets, boots, goggles, etc., hampering their safety and security (see Ghosh, Singh and Chigateri 2017b). In addition, *the drudgery and intensity of manual work such as carrying stones or cement in KEP also leads to physical depletion*, especially of women who are already burdened by the drudgery of unpaid work. The impact of labour-intensive social protection programmes such as KEP on the physical capacities of women (as well as men) from low-income households, who have to depend largely on their bodies to survive and earn, should be seriously taken into account.

4.3 Moving towards a 'double boon'

Women's economic empowerment can be fully realised only when there is a positive balance between women's paid work and unpaid care work responsibilities. In terms of WEE programming therefore, a positive balance can only be achieved when programmes enable a 'double boon', viz., provide access to paid work that is 'empowering' along with support for unpaid care work responsibilities. As discussed in Section 3, our analysis indicates that there are several factors that influence the achievement (or lack thereof) of a positive balance, including the availability of familial support (which in turn are influenced by macro-economic factors such as male migration which impinge on the structure of the family), the availability and location of decent work, access and proximity to public resources and services such as roads, water, fuel, electricity, etc. Other factors such as the life cycle patterns of women also have a direct effect on their entry into and exit from paid work as well as the nature, type and location of paid work that women are engaged in. The other important findings from the project reaffirms that women's double burden has a spillover effect on girl children and older women in the families, leading to hindrances in children's time for study and play and negating older women's time for rest and leisure and pushing them further towards ill health.

In this context, we examine two things: (1) the perceptions to the proposed solutions of the three Rs – Recognition, Reduction, Redistribution, along with the fourth R of Representation (Elson 2008; Kidder 2013), along with decent work amongst our respondents; and (2) what the two WEE programmes may do to engender a 'double boon'.

4.3.1 Solutions to engender a 'double boon': perceptions of the respondents

On redistribution to other family members, there were mixed reactions to husbands helping with women's unpaid care work. In almost all group exercises, especially in men's groups, there was an agreement that men needed to help in the household as well. However, *some women wished that their husbands would help them with work but at the same time were sceptical about men helping them out*: 'Even when my father was here, my mother and me did all the household tasks. He hardly helped' (Care Body Map, girls only, Mehelkuna, January 2016). Others blamed rigid gender norms making it difficult for men to participate in some of the unpaid care tasks such as fetching firewood (Gyanu Giri, Chandannath, May 2016). In Mehelkuna and Maintada, where there is high male migration, some men who worked as migrant labourers, like Kamal BK, shared the difficulties that migration entailed for both the individual and the family and pointed to the wider macroeconomic context that engenders migration:

I wish we had employment opportunities around here as we could look after our families too. It would not have been difficult for us to travel around, the family could be closer to us but unfortunately the work is far from here, we stay here for two to four months and return again, we don't know how they run the house because we aren't present here.

(Maintada, February 2016)

Some of the women expressed their anger as well: 'Where are the men in the village? Our husbands have all migrated outside. How can we then distribute our household work to them? [The state] should provide for better economic opportunities here so that the men don't need to migrate to other countries' (What If, women only, Mehelkuna, January 2016).

A crucial finding in this research was women's reflections on redistribution of childcare to the state or the employer. We found that in the four sites, *the idea of the state or employer delivering childcare provision is non-existent* (Care Marbles, women only, across all sites). In our participatory tools discussions and case study interviews, it took time for women to articulate the need for childcare provision in the community and/or by the state owing to there being no precedent for this facility in Nepal. The closest option to childcare provision is the presence of community-run Early Childhood Development (ECD) centres and/or the institutional pre-primary classes (PPCs) aimed only at three- to four-year-old children. In Chandannath,²⁴ women found ECD centres useful as it allowed them to do paid work without worrying about their children, albeit for a short period of time. In Mehelkuna, men recognised that ECD centres could be useful for women, especially single women and those whose husbands had migrated, to send their children so they are able to finish their paid and unpaid work (Care Body map, men only, January 2016).

With regard to representation, we found that *women, especially in Chandannath and Depalgaon, did not seem to have any ideas about or aspirations for collectivisation*. In Mehelkuna and Maintada, women who had assumed leadership positions (in cooperatives or women's savings groups such as NC1 in Mehelkuna) were able to articulate better individually but forming a collective to voice their demands was rare. However, the need to encourage women to be more participatory in community meetings was shared by some programme and community members; NC4, who is the Chairperson of local-level women's network, shares:

Women should be put forward whenever infrastructures are being planned in the village. The women should be encouraged to join any kind of committee that is formed, be it in schools or development infrastructures. Women should be invited to join and taught the process if they are unknown to it as currently women are said to withdraw due to their lack of knowledge.

(Maintada, February 2016)

Women from across the four sites wished there was some quality decent work that they could do which would help them to earn more so they would not have to take out loans to run their homes. Women also wanted more skills training and knowledge-based training – in Mehelkuna and Maintada, women vegetable seed producers would like greater farm productivity and market linkages through broad-based trainings in farm productivity. In Chandannath and Depalgaon, women asked for more job creation through trainings and skill development (Kusum BK, Chandannath, May 2016; Radhika BK, Depalgaon, May 2016). Women with small children wanted paid work (and worksites such as those of KEP) to be closer to home so that they could participate in paid work *and* look after their children.

²⁴ One of the earliest attempts made for provision of childcare under three years of age was the implementation of rural development projects starting in mid-1980s by UNICEF and other INGOs which focused on the establishment of community-based home childcare centres (Joss 1989). This project was also implemented in Jumla district but the current Women's Development Officer (WDO) was unable to provide information on this.

In this context, the research found that the *education of women is an enabling factor to engender a positive balance as it strengthened the ability for women to find better paid work opportunities and also their personal capacities for negotiation in the family, the community and the workspace*. For example, Sarita Kunwar of Maintada was selected as an executive member in various women's groups because of her educational and leadership skills. As an executive member, she got opportunities to participate in meetings and trainings which have further enhanced her mobility, confidence and leadership skills, and strengthened her decision-making abilities in the household regarding access to and control over income as well as initiating new paid work activities.

4.3.2 What WEE programmes can do to engender a 'double boon'

Our analysis of the two WEE programmes revealed that there is a basic recognition amongst the programme staff at both the lower and higher level regarding women's double burdens and the accompanying drudgery and time poverty that women face. However, *there is a lack of understanding of the complex linkages between women's paid work and unpaid care work*. As such in the case of both these programmes, especially more so in the case of KEP staff, there is a need to build capacities of the staff across the hierarchy, on the relationship between care and WEE, viz., the ways in which unpaid care work affects women's participation and productivity in paid work and vice versa.

With regard to employment guarantee programmes such as KEP, there is a need to incorporate a more focused approach to WEE in its programme design and implementation, and an integral component of this is the recognition of women's care responsibilities. Firstly, in many cases, women respondents were not aware about the selection process or the wages they are entitled to. Since KEP is considered demand-driven, the participation of women in the Ward Citizen Forum²⁵ should be made mandatory so that women's opinions and needs also get represented in the proposed project and the household selection process.

Secondly, KEP has identified female-headed households as one of the target groups; however, the percentage requirement of women's participation is not set in the guidelines. It is imperative for KEP to specify the percentage so that women's participation is institutionally guaranteed; this will also make it imperative that KEP incorporates attendant provision related to women's care needs at the workplace (see Ghosh *et al.* 2017b).

Importantly, *KEP needs to significantly improve its working conditions and should give priority to workers' welfare and the care needs of women*. The pilot and demonstration projects implemented with the direct support of KEPTA in four VDCs of Jumla district in 2014–15 have demonstrated improved working conditions with substantial focus on worker's welfare as well as women's childcare needs (Beazley 2014). Through these projects, basic facilities such as drinking water, toilets, primary health services, safety gear as well as accident insurance were provided to the workers. Similarly, crèche facilities were provided for women workers with small children (in four VDCs direct support was provided). KEP should prioritise the rolling out of the reformed working conditions in all its programme areas, as demonstrated in the pilot and demonstration projects. *Additionally, the criteria of location of worksite to be within one-hour walking distance should be strictly followed, mainly to prevent time poverty and physical depletion of women (ibid.)*. Appropriate human resources focused on the social context of work should be provided so that issues of the workers' welfare as well as the care needs of women are prioritised.

²⁵ A ward-level citizens group representing various stakeholders within a ward.

KEP, like any employment guarantee programme around the world, discourages mechanisation in order to provide more man-days to the participants. Though this has economic benefits for the participants, the arduous and physically depleting characteristic of the work compels us to ask what constitutes decent work. Rupa BK, who worked under KEP shares, 'I wish they gave us baskets to carry the stones rather than ropes as it would be better to be able to slide the rocks rather than carry them on your back and head' (Chandannath, May 2016). As such, *KEP could envision and give priority to less arduous employment avenues which do not necessarily diminish the physical capacities of women as well as men and particularly put women at disadvantage*. Rethinking areas of work such as horticultural asset building like apple farming, etc. that pregnant and lactating women can do will give them a chance to become beneficiaries of the programme, an aspect which is completely missing at present.

As the projects are mostly demand-driven, coordination is needed between KEP and VDC Ward Citizen Forums to think of new avenues of employment opportunities for low-income households so that the onus of creating public infrastructure is not entirely put on the labour of unskilled women and men from low-income households. In addition, there needs to be space within the programme that allows for workers, especially women, to put forth their grievances in a safe space. We found no form of workers' collectivisation for KEP and women were hesitant to make claims for decent work for fear of losing out on work. The local CBOs also need to build awareness regarding workers' rights and women's unpaid care burdens at the community and the state level to engender dialogue.

With regard to the EDP, introduction of mechanisation (seed-sorting machines) has been a boon for the women as it helps save their time and energy. However, lack of sufficient equipment affects their ability to maximise the utility of such technology. There is a need for a study to evaluate how mechanisation in seed production has helped women in increasing their productivity and wellbeing. Women's ownership of technology would further help in the EDP's aim towards state recognition of women as primary agricultural producers (see Ghosh *et al.* 2017a).

Moreover, WEE as envisioned by the EDP will remain incomplete unless the programme intersects with public infrastructure and goods such as irrigation, roads, childcare centres, health services, etc. which will help women producers through their life cycles without burdening other women and girl children in the family. The programme can thus think of ways to connect with existing public services to strengthen these services and maximise outreach.

For both programmes, it is important to note that the situations of women who were non-WEE participants varied across the sites. In Mehelkuna and Maintada, paid work options other than agriculture were negligible and the EDP, as discussed above, has limited interaction with women who do not own land (mostly the *dalit* communities) in the form of PLC classes. Interestingly, KEP only targets families that do not own any land as these households are the most vulnerable. However, this also leaves out many women who own insufficient landholdings and are mostly involved in breaking stones and/or carrying sand like other vulnerable women in Chandannath and Depalgaon. The study found that *conditions of such non-WEE programme participants are more precarious as, across the sites, they have very limited means for decent paid work*. In terms of social organisation of care, there was not much difference between WEE and non-WEE programme participants. Women continued to be primary caregivers across all sites irrespective of their socioeconomic status or their involvement with the programme. There was no difference in these two categories with regard to their time poverty, especially in connection with access to public services like roads, fuel, electricity, etc.

Therefore, there is an urgent need for the state to recognise the macro- and micro-economic factors that shape women's care and paid work responsibilities and it must develop WEE programmes, policies and budgetary allocations based on a holistic care perspective that will lead to a reduction of women's drudgery. *The focus of WEE programmes should not only be on increasing women's participation in economic participation but also in analysing in what ways these economic opportunities can lead to empowering outcomes without adding to their unpaid work burden.* The state and non-state programmes should also go beyond awareness programmes on the imbalance of paid and unpaid work and focus and invest more on institutional changes and integrated and multigenerational public infrastructure in the communities enabling a 'double boon'. For instance, the 10 per cent VDC budget allocation for women could be channelled towards reducing women's unpaid work burden. Instead of working in a fragmented manner, coordination between different state bodies such as the District Women's Development Office and VDCs as well as non-state actors working on women's economic empowerment is therefore necessary to recognise and initiate integrated efforts towards reducing the imbalance of unpaid and paid work and to actualise WEE.

5 Conclusions

In Nepal's context, we found through this study that women are unable to balance their paid work and unpaid care work owing to several factors – lack of availability of decent employment opportunities in rural areas, lack of quality public services, the migration of men, especially in Mehelkuna and Maintada, lack of assets such as land in the *dalit* communities, prevailing gender norms especially around women's participation in unpaid care work and mobility – all of which contribute towards women's inability to avail benefits from paid jobs. As discussed, older women and girl children often help women with their childcare and household work, especially when women left the house for paid work. Life cycle patterns also influence the nature, location, time and the ability for women to bargain in their paid work. In Mehelkuna and Maintada, high male migration also burdened some women further as they had to take on some of the men's responsibilities such as ploughing, etc.

Overall, women complained of extreme drudgery because of the nature of unpaid work (fetching firewood, cutting grass, childcare, household chores) and paid work (vegetable and seed production, agricultural and non-agricultural wage labour like breaking stones, carrying sand, selling firewood, working under KEP, etc.), which were all physically exhausting. Rest and leisure, as seen in all agrarian societies, were limited to agricultural lean seasons. However, women in Chandannath and Depalgaon were engaged in some form of paid work even during the lean season, further reducing their time for rest and leisure.

As part of the research, we also examined the extent to which the two selected programmes – Oxfam's EDP in Nepal in Mehelkuna and Maintada and KEP in Chandannath and Depalgaon – were able to provide decent work conditions and mechanisms through which the programmes tried to lessen women's double burden. The EDP was found to be more understanding and receptive to women's voices and demands and was able to extend some form of support by providing seed-sorting machines, collection centres, etc.

On the other hand, although KEP targets women (amongst other vulnerable groups), it does not have a strong vision for their economic empowerment. Owing to the difficult nature of the work, and the lack of child crèches at the worksite (despite a mandate for them), most often, women with small children are unable to participate. During recruitment, pregnant and lactating women were discouraged from participating. There is also a lack of decent work conditions such as safety equipment, toilets, drinking water, etc. (especially in Chandannath where there was no intervention from KEPTA). It was also found that in households where

men were present, they would go for KEP work while the woman went intermittently, which affected her ability to participate and earn under the programme.

In conclusion, we present two ideas that require more thought and debate. First, it is important to question the conditions of the paid work currently available to women in these areas. KEP discourages mechanisation in order to provide more working days to its participants. However, it should be understood that the kind of construction work that falls under the programme is difficult and dangerous. As such, promoting decent work conditions is an absolute must in this case. The outstanding question then is – would some form of mechanisation help in making work conditions decent and make women's lives easier; or would this be a way of displacing labour and reducing the number of jobs available? This question needs more analysis given that a recent document by the UN Secretary-General's High-Level Panel on Women's Economic Empowerment points to 'lack of time and labour saving equipment and devices' amongst women as a hurdle towards achieving WEE (Klugman and Tyson 2016).

The second question that requires more deliberation pertains to the voices of women asking for paid work that is close to home, mainly to enable a balance between their unpaid care and paid work responsibilities. If this possibility was to be recommended, would it be reinforcing the gender norm of unpaid care work being a woman's primary responsibility? It is crucial that while closer locations are essential for fulfilling decent work conditions, at the same time it is imperative to also campaign for redistribution of unpaid work amongst family members, especially men, in order to break the gender norm of women as primary caregiver; and the state. This also brings into focus the mass outbound migration of Nepalese men for work that also hinders reduction and redistribution of unpaid care work within the family. This is a macro-economic question that the state and the international development organisations working in Nepal need to give more thought to, considering that Nepal is one of the least developing nations in the world.

A final aspect that needs to be understood by policymakers when they design WEE programmes is that livelihoods options alone will not be enough, given that employment opportunities are rare in these areas. Instead, WEE programmes need to provide decent work and more employment opportunities for men and women in the communities. This is especially important as the study found that women across the four sites would rather work on their farms than break stones, because it is physically less demanding.

Moving towards a 'double boon' will not be possible without building an understanding of the care issue at the levels of the household, community, market and the state. Elson's clarion call for the three Rs – Recognition, Reduction and Redistribution; along with the fourth R of Representation (Kidder 2013) needs to be understood and implemented at all levels for women in low-income households in order to move towards a 'double boon'. There is an urgent need for advocacy from top to bottom in policymaking and programme design and implementation to take cognisance of how care affects WEE and vice versa and to understand the various socioeconomic factors that affect women to reach a 'double boon'. This is not an easy task given the patriarchal mindset that governs policymakers and programme designers who still consider care work and unpaid work to be primarily a women's responsibility. Programmes and policies need to be inclusive and cut across sectors in order to reach optimal WEE and a 'double boon'.

Advocacy for unpaid care work is at a nascent stage in Nepal. More dialogue is needed on women's unpaid care work between academicians, practitioners and policymakers. Programmes aimed at women's empowerment need to have a care perspective in their design and implementation, and grass-roots level communication and advocacy needs to be encouraged and implemented in order to reduce women's double burden and move towards a 'double boon' for women by providing decent work along with the redistribution of care work within the family, community, market and the state.

Annexes

Annexe 1: Site demographic information

Table A1.1 Disaggregated data for the four sites as mentioned in Section 2.2

Sites	Household	Population			Average household size	Sex ratio
		Total	Male	Female		
Mehelkuna	2,308	9,815	4,280	5,535	4.25	77.33
Maintada	2,622	11,187	4,864	6,323	4.27	76.93
Chandannath	1,839	8,491	4,192	4,299	4.62	97.51
Depalgaon	498	2,398	1,167	1,231	4.82	94.8

Sites	Total household	Absent population					Sex not stated
		Absent household	Total	Male	Female		
Mehelkuna	2,308	880	1,255	1,101	154	0	
Maintada	2,622	1,254	2,025	1,667	358	0	
Chandannath	1,839	62	74	60	14	0	
Depalgaon	498	16	24	20	4	0	

Sites	Total household	Main source of drinking water							
		Tap/piped water	Tubewell/handpump	Covered well/kuwa	Uncovered well/kuwa	Sprout water	River/stream	Other	Not stated
Mehelkuna	2,308	603	14	101	382	734	462	3	9
Maintada	2,622	378	2	53	705	1,123	349	4	8
Chandannath	1,839	1,784	0	1	1	33	5	0	15
Depalgaon	498	480	0	0	2	15	1	0	0

Sites	Total household	Fuel used for cooking							
		Wood/firewood	Kerosene	LP gas	Cow dung	Bio gas	Electricity	Other	Not stated
Mehelkuna	2,308	2,200	4	81	1	13	1	0	8
Maintada	2,622	2,547	4	46	3	10	4	0	8
Chandannath	1,839	1,722	4	92	0	1	0	5	15
Depalgaon	498	497	0	0	0	1	0	0	0

Sites	Total household	Fuel usually used for lighting					
		Electricity	Kerosene	Biogas	Solar	Other	Not stated
Mehelkuna	2,308	726	85	14	307	1,168	8
Maintada	2,622	850	32	6	182	1,544	8
Chandannath	1,839	1670	18	0	32	104	15
Depalgaon	498	3	0	0	301	194	0

Note: Chandannath Municipality was restructured in 2014 and now comprises the four VDCs – Chandannath, Kartik Swami, Mahat and Talium. For the purpose of this study, we visited wards from all four VDCs.

Source: Central Bureau of Statistics (2014).

Table A1.2 Disaggregated data for all the four VDCs which that now make up the Chandannath Municipality

Population in Chandannath Municipality

Chandannath Municipality	Chandannath	Kartik Swami	Mahat	Talium	Total
Household	1,839	454	807	896	3,996
Total	8,491	2,186	3,625	4,745	1,9047
Men	4,192	1,072	1,786	2,319	9,369
Women	4,299	1,114	1,839	2,426	9,678

Absent population						
	Total household	Absent household	Total	Male	Female	Sex not stated
Chandannath	2,308	880	1,255	1,101	154	0
Kartik Swami	454	10	19	12	7	0
Mahat	807	40	73	54	19	0
Talium	896	61	116	81	35	0

Main source of drinking water									
	Total household	Tap/ piped water	Tubewell/ handpump	Covered well/ kuwa	Uncovered well/kuwa	Sprout water	River/ stream	Other	Not stated
Chandannath	2,308	1,784	0	1	1	33	5	0	15
Kartik Swami	454	410	0	0	0	36	75	1	4
Mahat	807	545	0	2	2	201	48	2	7
Talium	896	708	0	0	2	171	5	0	10

Fuel used for cooking									
	Total household	Wood/ firewood	Kerosene	LP gas	Cow dung	Biogas	Electricity	Other	Not stated
Chandannath	2,308	2,200	4	81	1	13	1	0	8
Kartik Swami	454	445	0	1	0	0	0	1	7
Mahat	807	776	0	15	0	0	0	8	8
Talium	896	886	0	0	0	0	0	0	10

Fuel usually used for lighting							
	Total household	Electricity	Kerosene	Biogas	Solar	Other	Not stated
Chandannath	2,308	726	85	14	307	1,168	8
Kartik Swami	454	401	7	0	20	19	7
Mahat	807	750	4	0	34	11	8
Talium	896	70	4	3	534	275	10

Source: Central Bureau of Statistics (2014).

Annexe 2: Summary of survey questionnaire

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 country²⁶ 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.

A2.1 Synthesis of the questions contained in each module

1. **Household roster.** Respondents listed each household member,²⁷ 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 child²⁸ and/or for a dependent adult.²⁹ 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-supported paid work.³⁰ 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.

²⁶ The research project was undertaken in India, Nepal, Rwanda and Tanzania.

²⁷ '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'.

²⁸ Any daughter or son younger than 18 years old was defined a child.

²⁹ A dependent adult could be a 'sick, disabled or elderly' person.

³⁰ Only for women classified as WEE programme participants.

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 child³¹ (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.

³¹ In particular, in the third trimester of the pregnancy.

Annexe 3: Summary of in-depth interview guides for the household members

A3.1 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 A3.1 Summary of the modules included per type of respondent

	Woman	Spouse	Other significant carer (OSC)
Module 1: Socio-demographic characteristics	X	X	X
Module 2: Sharing care	X	X	X
Module 3: Experiences and perceptions	X	X	X
Module 4: Experiences about women's paid work and WEE programme and policies	X		
Module 5: Interactions between paid work and unpaid care work	X	X	X
Module 6: Solutions	X	X	X

A3.1.1 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.

A3.2 Summary of in-depth interview 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 4: Summary of qualitative key informant interview guides

A4.1 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.

A4.2 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 per 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 5: Participatory toolkit

Table A5.1 Summary of the participatory research method used per group of respondents

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

A5.1 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.

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.

Groups of respondents it was used for: Mixed adults.

(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.

Annexe 6: Case studies

Site 1: Mehelkuna

	Name of respondent	Gender	Programme	Date of interview	Place
1.	Gita BK	Female	EDP	14 May 2016	Mehelkuna
2.	Sharmila Oli	Female	EDP	14 May 2016	Mehelkuna
3.	Deepa Oli	Female	None	14 May 2016	Mehelkuna
4.	Sita Karki	Female	EDP	14 May 2016	Mehelkuna
5.	Deepti Karki	Female	None	14 May 2016	Mehelkuna
6.	Mankumari Oli	Female	None	14 May 2016	Mehelkuna
7.	Nirmal Oli	Male	None	14 May 2016	Mehelkuna
8.	Laxmi BK	Female	EDP	15 May 2016	Mehelkuna
9.	Sunkumari BK	Female	None	15 May 2016	Mehelkuna
10.	Urmila Dhakal	Female	EDP	15 May 2016	Mehelkuna
11.	Rupa Dhakal	Female	None	15 May 2016	Mehelkuna
12.	Hari Prasad Dhakal	Male	None	15 May 2016	Mehelkuna
13.	Jamuna BK	Female	None	15 May 2016	Mehelkuna
14.	Asha Khatri	Female	None	15 May 2016	Mehelkuna
15.	Gita BK	Female	None	15 May 2016	Mehelkuna
16.	Sharmila Oli	Female	None	16 May 2016	Mehelkuna
17.	Deepa Oli	Male	None	16 May 2016	Mehelkuna
18.	Sita Karki	Female	None	16 May 2016	Mehelkuna

Site 2: Maintada

	Name of respondent	Gender	Programme	Date of interview	Place
1.	Rukmini KC	Female	EDP	14 May 2016	Maintada
2.	Meena KC	Female	None	14 May 2016	Maintada
3.	Sunita Dangi	Female	EDP	14 May 2016	Maintada
4.	Sushila Dangi	Female	None	14 May 2016	Maintada
5.	Keshav Dangi	Female	None	14 May 2016	Maintada
6.	Bhuma BK	Female	EDP	14 May 2016	Maintada
7.	Khila BK	Male	None	14 May 2016	Maintada
8.	Sarita Kunwar	Female	EDP	15 May 2016	Maintada
9.	Bhagwati Kunwar	Female	None	15 May 2016	Maintada
10.	Jayanti BK	Female	EDP	15 May 2016	Maintada
11.	Kamal BK	Female	None	15 May 2016	Maintada
12.	Malati BK	Male	None	15 May 2016	Maintada
13.	Raji BK	Female	None	15 May 2016	Maintada
14.	Manju BK	Female	None	15 May 2016	Maintada
15.	Rekha BK	Female	None	15 May 2016	Maintada
16.	Durga BK	Female	None	16 May 2016	Maintada
17.	Hemkala BK	Male	None	16 May 2016	Maintada
18.	Rukmini KC	Female	None	16 May 2016	Maintada

Site 3: Chandannath

	Name of respondent	Gender	Programme	Date of interview	Place
1.	Kamla Giri	Female	KEP	14 May 2016	Chandannath
2.	Surendra Giri	Male	None	14 May 2016	Chandannath
3.	Kabita BK	Female	KEP	14 May 2016	Chandannath
4.	Sabitri BK	Female	None	14 May 2016	Chandannath
5.	Kusum BK	Female	None	14 May 2016	Chandannath
6.	Gyanu Giri	Female	None	14 May 2016	Chandannath
7.	Purnikala Giri	Female	None	14 May 2016	Chandannath
8.	Heema Raut	Female	KEP	15 May 2016	Chandannath
9.	Yogest Raut	Male	None	15 May 2016	Chandannath
10.	Januka BK	Female	KEP	15 May 2016	Chandannath
11.	Jaylal BK	Male	None	15 May 2016	Chandannath
12.	Rasila BK	Female	None	15 May 2016	Chandannath
13.	Rupa BK	Female	KEP	15 May 2016	Chandannath
14.	Rambahadur BK	Male	None	15 May 2016	Chandannath
15.	Parbati BK	Female	None	15 May 2016	Chandannath
16.	Pramila Rokaya	Female	None	16 May 2016	Chandannath
17.	Jeevan Rokaya	Male	None	16 May 2016	Chandannath
18.	Sanju Rokaya	Female	None	16 May 2016	Chandannath

Site 4: Depalgaon

	Name of respondent	Gender	Programme	Date of interview	Place
1.	Radhika BK	Female	KEP	16 May 2016	Depalgaon
2.	Dhanbahadur BK	Male	None	16 May 2016	Depalgaon
3.	Sheetal BK	Female	None	16 May 2016	Depalgaon
4.	Tara BK	Female	None	16 May 2016	Depalgaon
5.	Pushpa Khatri	Female	None	17 May 2016	Depalgaon
6.	Bhagirathi Khatri	Female	None	17 May 2016	Depalgaon
7.	Kapil Khatri	Male	None	17 May 2016	Depalgaon
8.	Sumitra Khatri	Female	None	17 May 2016	Depalgaon
9.	Pooja Khatri	Female	None	17 May 2016	Depalgaon
10.	Menuka Dhital	Female	KEP	17 May 2016	Depalgaon
11.	Mahesh Dhital	Male	None	17 May 2016	Depalgaon
12.	Gayatri BK	Female	None	17 May 2016	Depalgaon
13.	Chandra BK	Male	None	17 May 2016	Depalgaon
14.	Rimkala BK	Female	KEP	16 May 2016	Depalgaon
15.	Harka BK	Male	None	16 May 2016	Depalgaon
16.	Gauri BK	Female	KEP	16 May 2016	Depalgaon
17.	Sunil BK	Male	None	16 May 2016	Depalgaon
18.	Devaki BK	Female	None	16 May 2016	Depalgaon
19.	Ramkala BK	Female	KEP	16 May 2016	Depalgaon
20.	Sriram BK	Male	None	16 May 2016	Depalgaon

Annexe 7: KII – programme and community

Code	Programme	Date	Place
NP1	EDP	24 December 2015	Mehelkuna
NP2	EDP	7 January 2016	Mehelkuna
NP3	EDP	28 April 2016	Kathmandu
NP4	KEPTA	24 March 2016	Chandannath
NP5	KEP	23 May 2016	Chandannath
NP6	KEPTA	30 June 2016	Kathmandu
NC1	Community	8 January 2016	Mehelkuna
NC2	Community	8 January 2016	Mehelkuna
NC3	Community	6 January 2016	Mehelkuna
NC4	Community	12 January 2016	Maintada
NC5	Community	10 January 2016	Maintada
NC6	Community	14 January 2016	Maintada
NC7	Community	24 March 2016	Chandannath
NC8	Community	23 March 2016	Chandannath
NC9	Community	24 March 2016	Chandannath
NC10	Community	30 March 2016	Depalgaon
NC11	Community	30 March 2016	Depalgaon
NC12	Community	29 March 2016	Depalgaon
NC13	Community	28 March 2016	Depalgaon

Annexe 8: Participatory tools

Site 1: Mehelkuna

Name of tool	Respondent group	Location	Date
What If	Women only	Mehelkuna	January 2016
Care Work Matrix	Women only	Mehelkuna	January 2016
Care Marbles	Women only	Mehelkuna	January 2016
Care Body Map	Women only	Mehelkuna	January 2016
Care Basket	Women only	Mehelkuna	January 2016
Care Calendar	Women only	Mehelkuna	January 2016
Care Basket	Mixed children	Mehelkuna	January 2016
Activity Mapping	Mixed children	Mehelkuna	January 2016
Activity Mapping	Mixed adult	Mehelkuna	January 2016
Care Wallet	Mixed adult	Mehelkuna	January 2016
Care Public Service map	Mixed adult	Mehelkuna	January 2016
What If	Men only	Mehelkuna	January 2016
Care Body Map	Men only	Mehelkuna	January 2016
Role Play	Girls only	Mehelkuna	January 2016
Care Body Map	Girls only	Mehelkuna	January 2016
Role Play	Boys only	Mehelkuna	January 2016
Care Body Map	Boys only	Mehelkuna	January 2016

Site 2: Maintada

Name of tool	Respondent group	Location	Date
What If	Women only	Chandannath	March 2016
Care Work Matrix	Women only	Chandannath	March 2016
Care Marbles	Women only	Chandannath	March 2016
Care Body Map	Women only	Chandannath	March 2016
Care Basket	Women only	Chandannath	March 2016
Care Calendar	Women only	Chandannath	March 2016
Care Basket	Mixed children	Chandannath	March 2016
Activity Mapping	Mixed children	Chandannath	March 2016
Activity Mapping	Mixed adult	Chandannath	March 2016
Care Wallet	Mixed adult	Chandannath	March 2016
Care Public Service map	Mixed adult	Chandannath	March 2016
What If	Men only	Chandannath	March 2016
Care Body Map	Men only	Chandannath	March 2016
Role Play	Girls only	Chandannath	March 2016
Care Body Map	Girls only	Chandannath	March 2016
Role Play	Boys only	Chandannath	March 2016

Site 3: Chandannath

Name of tool	Respondent group	Location	Date
What If	Women only	Chandannath	March 2016
Care Work Matrix	Women only	Chandannath	March 2016
Care Marbles	Women only	Chandannath	March 2016
Care Body Map	Women only	Chandannath	March 2016
Care Basket	Women only	Chandannath	March 2016
Care Calendar	Women only	Chandannath	March 2016
Care Basket	Mixed children	Chandannath	March 2016
Activity Mapping	Mixed children	Chandannath	March 2016
Activity Mapping	Mixed adult	Chandannath	March 2016
Care Wallet	Mixed adult	Chandannath	March 2016
Care Public Service map	Mixed adult	Chandannath	March 2016
What If	Men only	Chandannath	March 2016
Care Body Map	Men only	Chandannath	March 2016
Role Play	Girls only	Chandannath	March 2016
Care Body Map	Girls only	Chandannath	March 2016
Role Play	Boys only	Chandannath	March 2016
Care Body Map	Boys only	Chandannath	March 2016

Site 4: Depalgaon

Name of tool	Respondent group	Location	Date
What If	Women only	Depalgaon	March 2016
Care Work Matrix	Women only	Depalgaon	March 2016
Care Marbles	Women only	Depalgaon	March 2016
Care Body Map	Women only	Depalgaon	March 2016
Care Basket	Women only	Depalgaon	March 2016
Care Calendar	Women only	Depalgaon	March 2016
Care Basket	Mixed children	Depalgaon	March 2016
Activity Mapping	Mixed children	Depalgaon	March 2016
Activity Mapping	Mixed adult	Depalgaon	March 2016
Care Wallet	Mixed adult	Depalgaon	March 2016
Care Public Service map	Mixed adult	Depalgaon	March 2016
What If	Men only	Depalgaon	March 2016
Care Body Map	Men only	Depalgaon	March 2016
Role Play	Girls only	Depalgaon	March 2016
Care Body Map	Girls only	Depalgaon	March 2016
Role Play	Boys only	Depalgaon	March 2016
Care Body Map	Boys only	Depalgaon	March 2016

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