This paper builds on agreements within the Sendai Framework for Disaster Risk Reduction (DRR) and the Sustainable Development Goals (SDGs) that the participation of and leadership by women is crucial for ensuring resilience and sustainable development. This consensus has encouraged stakeholders, in particular governments, to incorporate their own commitments to gender equality and women’s empowerment in resilience-building efforts, including Disaster Risk Reduction policies and planning. However, there remains a significant gap between policy and practice, to the extent that the rhetoric of policymakers is rarely matched by actual gains for women’s equal participation and leadership.

Part of the challenge of realising women’s leadership of and participation in DRR is recognising and reducing the barriers that prevent women from being able to participate and lead. Too often, it is assumed that women are not willing to step into decision-making roles, but such an assumption neglects the specific challenges faced by women.

Women are crucial and necessary leaders in DRR and humanitarian response. It is vital to avoid stereotyping women as inherently vulnerable, passive recipients of aid and protection. As first responders in a crisis women bring vital skills, resources and experience to the process of building resilience. Women’s roles in caring for those most affected by disasters are often invisible, and as such their crucial insights into the needs of the wider community – including those who are more vulnerable – may be missed.

Introduction

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Beyond Caring: Enabling women’s leadership in disaster risk reduction by breaking down the barrier of unpaid care work

ActionAid has also seen that women’s leadership fosters self-confidence and empowerment among women, which in itself helps transform power relations and overcome barriers which traditionally exclude women from decision-making and leadership. In countries where ActionAid operates, women are for example leading initiatives to monitor flood levels, diversify livelihoods, adapt agricultural practices in light of climate change, and ensure government’s disaster management strategies incorporate their needs.

One fundamental challenge frequently encountered by ActionAid is women’s burden of unpaid care work within their households and communities. To provide real opportunities for women’s leadership, we must understand how unpaid care work affects women and the barriers it places on their ability to participate in and lead DRR efforts. Only then can we find solutions that make it possible for women to step into vital roles as leaders and decision-makers.

This report draws on ActionAid’s 2016 research conducted in five countries, focusing on the catalysts for, and barriers to, empowering women to be leaders in disasters. It also builds on two ActionAid projects – FLOW (2012-2015) and POWER (2016-2021), which are exploring alternatives to challenge unpaid care burdens in countries around the world. And, most importantly, this report raises the voices of women through sharing their experiences and stories from their communities around the world.

Key demands

1. Governments must mandate 50% women’s participation and leadership in the design of national and local DRR strategies.

2. Governments, communities, and civil society organisations (CSOs) must commit to reducing the unpaid care burden on women and girls, to enable them to participate in and lead DRR planning and activities.

3. Governments must ensure that unpaid care work is included in the calculation of economic and non-economic losses from disasters.

Boge Abera collects water four times per day with her two children. This is a 15 minute journey, so 2 hours in total every day. This is contributing to her ‘time poverty’ to engage in economic and social activities.

PHOTO: GREG FUNNELL/ACTIONAID
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What is unpaid care work?

With women’s unpaid care burden posing a major barrier to being able to take on leadership roles in DRR, we need to understand how it manifests for women. Unpaid care work is defined as those activities undertaken without monetary remuneration to provide services that nurture other people. Unpaid care work is all around us, and takes place in every society – from cooking, cleaning, collecting water and firewood, to caring for the ill, elderly and children.

Yet despite the vital contribution of unpaid care work to family, social and economic life, its value is rarely measured in mainstream calculations of social productivity: in other words, because there is a lack of economic value ascribed to unpaid care, society neither sees nor values it. Furthermore, the burden of unpaid care almost always rests disproportionally on the shoulders of women.

In countries around the world, ActionAid has found that unpaid care work is broadly perceived as ‘women’s work’, with all women regardless of class, race, caste and ethnicity expected to provide care as part of their roles as mothers, wives, and daughters.

As part of ActionAid’s FLOW (2012-2015) and POWER (2016-2021) projects, women and men were surveyed in several countries. Women were found to spend hours more per day on unpaid care work than men. Multiple studies have found that in Pakistan, rural women do almost five hours of unpaid care work per day compared to half an hour for men, and in Tanzania women devote three times as much time as men to unpaid care work activities. The graph below shows findings from a recent ActionAid study of paid and unpaid care work in Bangladesh.

ActionAid has observed in multiple contexts that socially constructed gender roles are restrictive and reinforce unequal unpaid care work distribution. These are imposed from a young age, with girls spending more time helping their mothers at home than boys. In addition, the underlying social norms of unpaid care are frequently reinforced by religious norms and government policies. Indirect social norms, such as an unspoken taboo on using external childcare services, perpetuate this. Both women and men are affected by norms around unpaid care, with men reporting a fear that performing ‘women’s chores’ will incite social stigma.

Daily Time Allocation of men and women in Gaibandha and Lalmonirhat, Bangladesh (hours per day).
How does unpaid care work impact women’s leadership in DRR?

The burden of unpaid care work has a disproportionate causal impact on the ability of women to participate in and lead DRR activities. ActionAid’s 2016 research into the barriers to women’s leadership in emergencies identified women’s unpaid care burden as a major limiting factor. Using this research, in conjunction with ongoing applied learning and programming on women’s unpaid care in five countries, demonstrates the restrictions unpaid care impose on women’s ability to lead their communities in reducing disaster risks and building resilience.

“We, women, are not as economically strong, that is one of the reasons we cannot play an active role” – Nepali woman

The ‘time poverty’ imposed by unpaid care reduces the amount of flexible time women have to socialise, engage in economic activities, and participate in community activities to reduce disaster risk. This time poverty is exacerbated during disasters when women’s care burden often increases, as caring needs in the community rise due to injury, illness, destruction of homes and resources, or the need to relocate.

The unequal burden of unpaid care also affects the economic power of women, which has direct implications on women’s ability to engage in DRR processes as well as their overall resilience. Participants in ActionAid programmes in Bangladesh reported that the range of personal costs of community volunteering – from transport to equipment – present particular financial barriers. Additionally, economic disempowerment reduces women’s own resilience and ability to withstand shocks. Women who spend much of their time undertaking unpaid care work are less able to perform paid work, leading to increased financial dependence on male relatives, and a linked reduction in women’s control over family resources.

“I make no income, so within my family and society, I hold less position and power.” – Rekha Begum, Bangladesh

The research demonstrates that the lack of value ascribed to unpaid care work, combined with its unequal distribution towards women, limits women’s perceived social value and reduces their self-confidence. Gendered perspectives of paid and unpaid roles in many contexts means the identity of women is closely tied to the home, within a ‘caregiving’ role. This reduces women’s perceived individuality and autonomy and as a result, women are effectively absent from the public sphere, directly affecting their ability to participate as leaders. Disasters frequently accentuate and showcase deeply-rooted gendered norms, for example during ActionAid’s humanitarian response in the Philippines, where women reported feeling held back in preparing for or responding to disasters because they lacked the confidence or experience to speak up.

Women in Malawi hold baskets that they use as slow cookers. They would place a cooking pot on a stove for a few minutes to heat it up and create steam. The hot cooking pot is then put inside the basket, covered with leaves, and left to steam for 4-5 hours. This local innovation reduces women’s time spent cooking and allows them to leave the house to engage in economic or social activities.

PHOTO: MALUMBO SIMWAKA/CISONECC/ACTIONAID MALAWI
Unpaid care work also has an impact on women’s and girls’ education, as it is one of the main reasons girls drop out of school. This is exacerbated in times of disaster, for example ActionAid has found girls are increasingly likely to drop out of school during droughts because they have to support their mothers in collecting water from increasingly distant sources. Women and girls who forgo a formal education are more likely to be illiterate and have less exposure to information and training that can help them prepare for disasters. Women in Bangladesh reported that they didn’t know the basic tools to plan and prepare for disasters, and so didn’t have the awareness to drive DRR activities. In addition, an inability to access information, such as preparedness and early warning announcements, increases the risks to women and undermines their resilience.

“Before Cyclone SIDR, We didn’t know that disaster risk can be reduced with preparation and plans. We’ve never prepared for any disasters before. If we heard of a natural hazard coming our way we would just pray.”
– Bangladeshi woman

In contexts where women try to take on roles outside of gender norms or reduce their own burden of unpaid care work, new barriers emerge – particularly those related to violence against women. During ActionAid programming, women have reported being verbally harassed for working outside the house, particularly when taking up leadership roles. In other contexts, women leaders have been threatened or ignored. Women interviewed by ActionAid in the Philippines reported experiencing increased domestic violence if their husbands thought they were not doing enough house work. In times of conflict and disasters, disruption of social norms due to displacement and social collapse means gender roles are more likely to be challenged, so women are particularly vulnerable to violence. In Gaza, ActionAid found that a combination of traditional gender roles, poverty, and an ongoing crisis led to increased reports of sexual assault and harassment, with women linking this to the fact that men did not see value in women’s leadership or work outside the home. As well as violating women’s fundamental rights, these implications may leave many women reluctant to participate in and lead DRR activities.

Recommendations to overcome women’s unpaid care burden and promote women’s leadership in DRR

To ensure the participation and leadership of women in DRR processes and therefore achieve the outcomes of the Sendai Framework and the Sustainable Development Goals, stakeholders cannot continue to ignore the intersection of resilience-building and women’s empowerment. Governments and other stakeholders need to take measures to support women in overcoming barriers to engage in this work.

Therefore, ActionAid calls for immediate action in four key areas. The 4R framework, used by ActionAid to challenge unpaid care work,¹ aims to reduce this burden, as well as empowering women, encouraging their leadership, and promoting advocacy for change. The framework has four interdependent tenets: Recognition, Reduction, Redistribution, and Representation.

1. The 4R framework was used by ActionAid Ghana and explored as part of the FLOW and POWER multi-country projects aiming to overcome unpaid care. It is an extension of the ‘3R framework’ created by British economist and sociologist Professor Diane Elson in 2008.
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Recognising unpaid care work

Unpaid care work often goes unnoticed. Governments tend to exclude unpaid care work from local and national assessments, statistics, policy announcements and budget decisions. This both undermines the perceived value of unpaid care and contributes to perpetuating the silent continuation of traditional gender roles.

Consequently, active recognition by governments of both the existence and value of unpaid care is a crucial first step to overcoming its burden on women. The need for sex, age, and disability-disaggregated (SADD) data and gender analysis to strengthen women’s participation and leadership in DRR is noted in the Sendai Framework guidance. However, this should be a compulsory requirement. As yet very few parties are conducting gender analyses or collecting SADD data in disaster contexts or more broadly in national statistics. This data gap must be tackled across all levels.

Similarly, when post-disaster losses are calculated purely along economic lines, equally devastating and disruptive non-economic losses such as unpaid care work are ignored and undermined. There is existing work on valuing non-economic losses, particularly in the context of climate change damages, and the impact of disasters on unpaid care work must be included to ensure that the full picture of their impact on women is understood. From contaminated water facilities to lost cooking equipment, to the time burden of caring for injured family members, an active recognition must be given to the gendered impact of disasters on unpaid care.

Reducing the burden of unpaid care work

To overcome unpaid care work as a barrier to women’s participation and leadership in DRR, efforts need to be made to lessen the burden of care work itself, both for women and the wider community. This can be achieved through gender-responsive service provision such as childcare, health services, more and closer water sources, energy alternatives, transport infrastructure, and other basic services, as well as developing technologies to ease care burdens, particularly during disasters.

The invisibility of unpaid care work results in limited state investment in gender-responsive public services and disaster planning, with many states failing to prioritise essential services that could redress the burden of unpaid care while also reducing losses from disasters and contributing positively to community resilience. Public spending and policy commitments to reduce unpaid work and ensure equal access to and control over resources need to be prioritised in order to ensure women have the time and resources they need to participate in DRR activities.

Redistributing the burden of unpaid care work

Redistribution promotes fair sharing of the unpaid care burden amongst different individuals, in particular male household members, but also the government and broader society. During several years of programming to address unpaid care work, ActionAid has consistently found that the most effective way to promote redistribution is by addressing negative and harmful social norms. The traditional roles of women perpetuate the continuation of unequal unpaid care burdens: individuals, communities, and CSOs all have a part to play in tackling these established roles.

Support to address these embedded norms and to enable women to reduce the burden of unpaid care needs to be long term, as such changes do not happen quickly. Successful techniques found by ActionAid’s FLOW and POWER programmes include facilitating both men and women in communities to create and share ‘time diaries’, raising awareness of the unequal distribution of care, as well as encouraging dialogue with both genders and between spouses at the community level. Working alongside traditional community leaders, as well as engaging government at the local and national level, can create deeper local buy-in to sensitisation campaigns.

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2. See, for example, UNFCCC Technical Paper on Non-Economic Losses (2013); Non-Economic Loss and Damage Caused by Climatic Stressors in Selected Coastal Districts of Bangladesh, BCAS (2014)
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Representation for change

Empowering women to represent and advocate for themselves facilitates a broader discussion around the value of women’s unequal workload, empowering women for individual and collective action to bring about a change in their status in society.

Both in and out of situations of disaster, ActionAid has consistently found that women’s solidarity is crucial to empowering individuals and women generally. The conceptualisation of women as victims of disasters must be shifted, replaced with a perception of women as active agents of change in DRR activities. All stakeholders should support women to come together and advocate for their rights from both a society and a government perspective.

Women must be consulted and continually engaged in all DRR and humanitarian response activities, and supported to identify ways to overcome the barriers of unpaid care work in order to do so. Women should particularly be consulted when decisions are being made on provision of services that might reduce the burden of unpaid care, such as water and fuel services, easing cooking and cleaning, or child and elder care. Women’s organisations must also be supported to engage in DRR conversations at the local, national, and international level – from district-level forums to representation at the Global Platform on DRR.

Specific recommendations:

1. Governments must improve the collection and analysis of SADD data in all sectors of national and local statistics, particularly on unpaid care work and engagement in DRR, within both economic and non-economic measurements of productivity.
2. Governments and international bodies must include unpaid care losses in calculations of non-economic losses from disasters.
3. Governments must provide gender-responsive services and infrastructure that aim to reduce the burden of unpaid care work on women and specifically address unpaid care work during and after disasters.
4. Governments and civil society must, at a minimum, aim to take a ‘do no harm’ approach when engaging women in DRR processes, ensuring any additional care or financial burden is limited as much as possible.
5. Governments and civil society must take an active approach in supporting women to challenge negative traditional norms and gender roles, including funding and piloting interventions that aim to shift these norms and redistribute unpaid care burdens.
6. Governments and civil society must fund, support, and empower women’s groups and organisations, with a focus on building those capacities that enable women to participate in and lead DRR, advocate for their own rights, and participate in collective action around addressing unpaid care.
7. Governments and civil society must ensure that women’s through dedicated funding support and by creating opportunities for more grassroots women to build their self-confidence and awareness of DRR and resilience.

Conclusion

Decreasing the unpaid care burden on women is crucial to enabling women’s participation in and leadership of DRR. It will increase the time women have available to engage in community activities, and enable them to pursue economic income-gaining activities to provide more independence, which in turn increases women’s perceived value at a community level, and raises their self-confidence. This will stimulate the promotion of women’s leadership in DRR. Furthermore, reduced unpaid care work would also leave more time for women’s education, which will help them in participating in and leading DRR activities, as well as potentially reducing violence against women. In addition, decreasing the unpaid care burden is also a crucial aspect of building women’s and communities’ resilience. Without the time to pursue economic activities, education, and community-building activities, women are less likely to be resilient to shocks and disasters, as unpaid care work reduces the ability to gain the skills, autonomy and independence that are crucial to individual and community resilience.

In Vietnam, ActionAid has been training community rescue teams in search and rescue and first aid to ensure rapid response in case of floods. Women have been encouraged to take up leadership positions in these rescue teams.

PHOTO: HARRY FREELAND/ ACTIONAID
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Acknowledgements:

2017 ActionAid International.

This paper was written by Tessa Bolton with Jessica Hartog and Melissa Bungcaras.

We are grateful to Caitlin James for her research, and for inputs and feedback we would like to thank Jane Lennon, Stacey Sawchuk, Christina Kwangari, Francisco Yermo, Teresa Anderson, Jonathan Reeves, Mark Wheeler, Chikondi Chabvuta, and Soren Ambrose. Edited by Stephanie Ross. Layout by www.nickpurserdesign.com

The accompanying series of 5 case studies of inspiring women were compiled by Tessa Bolton with significant inputs from Noore Jannat Proma, Azumi Mesuna, Chikondi Chabvuta, Takatei Bote and Jessica Hartog.

ActionAid is a global movement of people working together to achieve greater human rights for all and defeat poverty. We believe people in poverty have the power within them to create change for themselves, their families and communities. ActionAid is a catalyst for that change.

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May 2017