

Gender awareness

Tool 19. Being a woman

OBJECTIVES

- ✓ To understand and become aware of the roles that society assigns to women.
- ✓ To analyse the sexist messages of the media
- ✓ To understand how these stereotypes have affected participants' own life history

STEP-BY-STEP IMPLEMENTATION

Group session of analysis and awareness-raising on preconceived ideas about men and women and how they have affected the lives of women.

The facilitator makes a brief introduction about the roles assigned to women throughout history. Then she opens discussion on the following:

- How do you think women are?
- How do you think men are?

The answers are analysed and the facilitator may then ask if each feature may be presents both in men and women.

Then she starts another discussion: What image do you think the media (especially advertising) give you about women's and men's roles?

To answer this question, participants make a collage of advertising images from magazines and television ad videos representing women and men.

They discuss the different roles, paying attention to the objectification of women and the sexist messages.

Finally, the facilitator asks: Being a woman, what difficulties or advantages did you have?

To answer this last question participants make a mural with two columns: advantages and difficulties. Each woman writes or draws in each column their advantages or difficulties

TIME AND RESOURCES

TIME	2.5 hours
MATERIALS AND RESOURCES	Discriminatory and sexist images from advertising on magazines or newspapers, and TV ad videos. Materials to making a mural: brown paper, markers and coloured pencils.

Tool 20. Structural, personal and competence factors

OBJECTIVES

- ✓ To support women to understand the differences between structural, personal and competence factors.
- ✓ To raise awareness on the existence of structural factors restricting women's opportunities.
- ✓ To support women to identify the structural, personal and competence factors affecting their individual situation.
- ✓ To raise awareness on the common problems and strategies among women.
- ✓ To reinforce individual and collective initiative and support among women.

STEP-BY-STEP IMPLEMENTATION

The facilitator asks women to think about things they want to do in their life (for example, having a job, a nice house, children, etc.). They make a list with all their wishes.

Then they think about possible obstacles they find to make their dreams come true (for example, they are not able to find a job because there is a lot of competition in the labour market right now).

After all women have reflected about their dreams and obstacles, participants share their thoughts in the class and the facilitator collects ideas in the following table:

What we want to do	What prevents us from doing it

This will allow women to see that many of the wishes and difficulties are shared among several participants of the group.

Then the facilitator will label the obstacles that came out during the session and organise them in three groups: personal factors, structural factors and competence factors (see table 1 as an example). The facilitator explains the three types of elements in basic terms:

- ✓ Structural factors: things that many of us share and we can't change individually, but may be changed over time with collective action. The facilitator may comment that it is obviously very common that we can't have many of the things we want.
- ✓ Personal factors: things that are particular to our individual situation and we may be able to change or not. They may also be related to structural factors.
- ✓ Competence factors: things that speak about our individual knowledge, abilities and attitudes and that we can change.

This will help women to understand what they may be able to change in their life and what they should be able to negotiate with. From a gender and intercultural perspective, a special emphasis is given to inequalities related to gender and origin discrimination, which limit the personal development opportunities of women. This analysis is useful to assess employability, opportunities and limitations in lifelong learning, personal development, social inclusion and a variety of contexts and situations.

After all factors have been identified, the facilitator opens a discussion about what can participants do to overcome the different obstacles listed and makes a list on the blackboard (see an example



in table 2 the handout). This will allow participants to start to see their individual objectives related to their personal project. It will also help participants to see that structural difficulties can be compensated with the development of individual competences, and what kinds of collective action may help reduce structural inequalities.

TIME AND RESOURCES

TIME	2 hours
MATERIALS AND RESOURCES	A blackboard, pens, paper, markers.

EXAMPLES

TABLE 1. STRUCTURAL, PERSONAL AND COMPETENCE FACTORS

Structural factors	Personal factors	Competence factors
<i>Economic crisis</i>	<i>Having three children to take care of, and no support.</i>	<i>Not being able to use a computer</i>

TABLE 2. WHAT TO DO ABOUT THE DIFFERENT FACTORS

Factor	Type of factor	What to do
<i>Economic crisis</i>	<i>Structural</i>	<i>Being informed about the situation, sharing concerns and support strategies with other people...</i>
<i>Having three children to take care of, and no support.</i>	<i>Personal</i>	<i>Asking a friend to take care of my children once in a while...</i>
<i>Not being able to use a computer</i>	<i>Competence</i>	<i>Trying to find a free computer course, asking my daughter to teach me...</i>



Tool 21. Activity mapping

OBJECTIVES

This tool and the following one consist in participatory activities aimed to foster women's reflexion and discussion around the uneven burden of unpaid care work on women and the impact on their lives and rights. The tools have been taken and adapted from a training curriculum for community facilitators based on the Reflection-Action methodology¹ developed by ActionAid International and IDS in collaboration with Oxfam GB². The two tools included in the present toolkit can be used with groups of women of any literacy level involved in an economic empowerment path. We believe in fact that conscientisation on the value of unpaid care work and on the necessity to distribute it more equally between families and institutions and between men and women should be considered a necessary part of a broader process of women's empowerment.

This tool looks at the different activities that women and men do each day and how this contributes to the local economy.

Participants see that care for people is a critical part of the economy even if this is not paid work. Participants also begin to discuss the division of labour between women and men and why some activities are more often done by women rather than men and vice versa. This tool asks participants to think about all the activities they do in their daily life and map this out on cards for participants to categorise. This includes activities such as cooking breakfast, resting, paid work, sport activities.

STEP-BY-STEP IMPLEMENTATION

Step 1: In a group discussion participants list out ALL of the activities that normally do during the day.

Step 2: Participants draw, or write if they can, one activity per card. Men and women will be given different coloured cards – for instance, men may receive green cards while women receive yellow cards. If it is a women-only group ask them to also write down or draw activities that men do normally on different coloured cards.

Step 3: The facilitator then asks 'Which of these activities helped you to take care of your family and friends?'

Step 4: The participants then group these activities together including the four categories – housework, care of children, care of adults (see table below). The facilitator places a card above these activities titled 'Care for people'

Step 5: The facilitator then asks, 'Which of these activities are paid or generate income?'

Step 6: Participants then group these activities together and the facilitator places a card above these titled 'Paid work'.

¹ www.reflect-action.org

² ActionAid, IDS, Oxfam, *Redistributing care work for gender equality and justice - a training curriculum*, June 2015: www.actionaid.org/sites/files/actionaid/redistributing_care_work_final_0.pdf

Step 7: 'Which activities do you do in your leisure time?'

Step 8: Participants then group these activities together and the facilitator places a card above these titled 'Recreational activities'.

Step 9: 'Which activities relate to resting and taking care of yourself?'

Step 10: Participants then group these activities together and the facilitator places a card above these titled 'Rest and self-care'.

Table: Activity categories

Paid work	Doing wage or salary work
	Working in own/family small business
	Producing products for sale/market
	Small-scale trading
	Domestic worker
Care for people (unpaid care work)	Housework (preparing food/cooking, cleaning the house, washing clothes, shopping for food and household products)
	Care for children (feeding, bathing and dressing a child, playing with a child, helping a child with school work, accompanying a child to school or clinic or any other public service, moral support, community work)
	Care of adults (feeding, bathing a disabled, old or sick adult, accompanying an adult to health clinic or any other public service, moral support, community work)
Recreational activities	Learning (attending adult education class, doing homework)
	Social and cultural (socialising with friends and family, praying, attending a ceremony (e.g. funeral), attending a sport event, doing sports/other hobbies)
	Mass media use (watching TV, listening to radio, using the internet, reading newspapers, using mobile phones)
Rest and self-care	Sleeping (sleeping, resting in bed)
	Other self-care (eating or drinking, dressing oneself, washing oneself, receiving healthcare)

**Critical questions:**

- Is there anything missing from this activities mapping?
- Does this activity mapping capture the main activities that you see in your community?
- Identify those activities that take up the most time for you.
- As women's cards and men's cards will be different colours it will be visually clear which activities men and women spend more time doing.
 - What activities do men and women do that are the same? What activities do men and women do that are different, and why?
 - What activities do girls and boys participate in?
 - How much time do women and men spend on different activities?
 - Can both men and women do the care activities listed here?
 - Are there activities that are done more by younger women?
 - Are there activities that are done more by older women?
- How does the quantity of money you have affect how much time you spend on care work activities?
- Which of these activities do you do at the same time?

Power issues to consider:

Gender. Having different colour cards for women and men will immediately show the similarities and differences between their activities. In most cases women and girls will be more involved in care work activities than men and boys. You will likely find that men have more time for paid work either as agricultural labourers, factory workers, traders etc. Many women will be involved in paid work and in unpaid work such as subsistence agriculture. Here facilitators want to show that women are involved in paid and unpaid work alongside unpaid care work. To deepen the analysis facilitators can ask:

- What is the value of the unpaid and care activities?
- How does that impact on how we see women's and girls' contribution to the economy/community?

Age: Children and youth may have different activities than women and men as they may be in school rather than working. However, girls may be asked to carry a heavier care workload compared to their brothers or other male components of the family. Older women may also have to take on more care work than older male relatives.

Disability. People who are disabled or challenged physically and mentally and those who may be sick (due to old age or a disease) are often care responsibilities for other members of the household. This would imply increased unpaid care work for other household members and they may need to access community care and support.

Class: Some people in the community will also be able to pay for care services and goods while others will not. For instance, richer community members might be able to pay for electricity or hire domestic workers in their households to help with the cooking and taking care of children. This will mean they spend less time on care work than poorer households.

**EXPANDING THE DISCUSSION:**

Care for people – can it be paid for? Yes – care work can be paid for such as hiring a domestic worker or paying for a childcare centre. Cooking in a restaurant or nursing for patients in a hospital are all examples of paid care work.

How do salaries for paid care work compare to the salary of an engineer or a politician? Salaries for care-related work are often much lower as they are assumed to require low levels of skill even though they have many benefits for the community. This can show that paid care work is often undervalued and underpaid despite its contribution to the economy.

Should all work related to the care for people or the environment be paid for? Not all unpaid care work should be paid for – i.e. care of one's own children, taking care of an elderly parent, protecting a community's river and forests.

A note on the monetisation of care – This module does not suggest that all unpaid care work should be paid for. The strategy is to recognise care work, reduce it and most especially redistribute it so that care work is not concentrated on women and girls alone. It is also important to consider that even when care work is paid it is underpaid because it is considered women's work and is less valued. Therefore in the case of paid care workers, such as domestic workers, nurses or childcare providers, we want to see them earn a living wage because the care provided benefits individuals and society as a whole.

TIME AND RESOURCES**TIME**

2 hours

**MATERIALS AND
RESOURCES**

Coloured cards, pens, brown paper



Tool 22. The care work share square – how can care work be shared?

OBJECTIVES

Description: the idea of collective responsibility is depicted by distributing personified roles (i.e. husband, daughter, civil servant, etc.) amongst participants for the person sitting in the middle, the caregiver, to list the number of actors that can support and share her care work towards the achievement of her rights.

Objective: to introduce the idea that care is a collective responsibility that involves not only households, but also the private sector and, especially, the state. To introduce the state as the key duty bearer responsible for addressing the unequal distribution of care work and systemic gender inequality and injustice.

STEP-BY-STEP IMPLEMENTATION

Steps for using the tool:

Step 1: Participants choose the care work activity that they most want to be distributed, for instance, child care, caring for ill people, cooking or water collection. The facilitator asks: who are the people doing this task now? (i.e. mother, eldest daughter). The caregiver named is situated in the middle of the square. The selected care activity is represented with a symbol and located in the caregiver's hands. A real case, a participant from the circle, can be used.

Step 2: Around the person four areas are drawn. The facilitator now presents the first two areas. One is the household (i.e. family) and another one the community (i.e. neighbours, friends, NGOs, religious organisations, elders' council). Participants choose symbols for the two spaces.

Step 3: Participants are then asked to think of people from the household and community that are helping the person in the middle to do the selected care activity (i.e. child care) besides the person in the middle.

Step 4: The facilitator now presents the other two areas around the person sitting in the middle, one is the state (i.e. local government/municipality) and another one the private sector (i.e. employer, markets, shops). Participants are then asked to think of people from the state and the private sector that are helping the person in the middle with the selected care activity. For instance, in the case of the state, this could be a school teacher, a nurse, a local councillor who has brought a childcare facility to the area. For the case of the private sector, this could be an employer who has included a childcare facility in the workplace or a local business providing paid childcare services (in this case, the facilitator can remind that paid services should not substitute state free public services when it comes to care, especially in poor areas).



Critical questions: Ask the person in the middle about the real situation:

- Do you have few or many people sharing your caring task?
- The people around you, do they also do lots of other care work and have no time for other non-care activities (i.e. eldest daughter, nurse in the local clinic)? Or could they do more?

Ask the person in the middle about the ideal situation:

- An ideal care work share square can be drawn by adding more people so that care work can be better shared and distributed. Who else could do this task in the four different squares? This would allow those presently doing the task to take less time/physical strain/money to complete the caring task.
- Is there someone missing in the family and community that could do more care work (i.e. men and community groups)? And in the state (i.e. more nurses) and private sector? The facilitator should make sure that the state square is filled up with ideas since the state is a key actor for redistributing care work, especially in areas where people cannot afford to pay for care services.

The facilitator can close with the key idea that care is everybody's responsibility and we cannot leave one or several people to do it all, as this is unfair and leads to violations of their human rights.

Tip for the facilitator: If the group is interested in learning more about how care is included in human rights documents consider sharing this brief summary with them:

187 out of 194 countries have ratified the Convention on the Elimination of All forms of Discrimination Against Women (CEDAW). CEDAW explicitly recognises women's disproportionate responsibility for some aspects of care and the impact this has on their human rights:

"The responsibilities that women have to bear and raise children will affect their right to access education, employment and other activities related to their personal development. They also impose inequitable burdens of work on women... Relieving women of some of the burdens of domestic work would allow them to engage more fully in the life of their communities. Women's economic dependence on men often prevents them from making important political decisions and from participating actively in public life."

Governments are therefore responsible for ensuring that the responsibility for care does not encroach on fulfilling women's rights, while also guaranteeing those in need of care can access good quality care provision. Many other internationally agreed human rights obligations are also relevant. For instance, governments have an obligation to respect, protect and fulfil all the human rights contained in the International Covenant on Civil and Political Rights and International Covenant on Economic Social and Cultural Rights 'without discrimination of any kind'. This means that governments must ensure that women are able to fully enjoy rights such as the right to work, the right to political participation, the right to social security, the right to freedom of expression, the right to an adequate standard of living on an equal basis with men.

TIME AND RESOURCES

TIME	1 hour
MATERIALS AND RESOURCES	Basket, brown paper, pens