

INTEGRATING UNPAID CARE NEEDS IN LOCAL DEVELOPMENT PLANS IN SENEGAL

Introduction

Women around the world often take on significant amounts of unpaid care work, from cooking and cleaning to fetching water and firewood, and caring for children and the elderly or sick family members. This care work is essential for the functioning of households and communities, but it is often not recognised, paid, or valued. As the result, women who engage in this unpaid care work have less time to devote to paid labour, negatively impacting their economic security, opportunity, and empowerment.

In Senegal, women devote daily on average, 4 hours and 9 minutes to housework and childcare, compared to 30 minutes for men¹. More than two-thirds of working Senegalese women are concentrated in the agricultural sector in rural regions, where access to regular basic services such as energy, water, and sanitation is limited and where productive and reproductive activities overlap and compound women's time poverty. Policies and programmes that provide services, social protection, and basic infrastructure, promote sharing of domestic and care work between men and women, and create more paid jobs in the care economy, can accelerate women's economic empowerment in Senegal.

UN Women is implementing the project “Transformative approaches for recognising, reducing, and redistributing unpaid care work in women's economic empowerment” in Senegal, financed by the Government of Canada.

The project is **supporting municipalities in integrating women's unpaid care needs and solutions in their Local Development Plans**. Through a participatory process that includes capacity strengthening of local stakeholders (women farmers' cooperatives, elected officials, male leaders, young men and women, etc.) and discussions on social norms change, communities have identified and prioritised critical investments to address women's unpaid care needs in their communities.

In 2022, as a pilot, six municipalities in Saint Louis (Mbane, Gaé, Richard-Toll, Rosso Sénégal, Ross Béthio and Niandane) started the process of renewing their local development plans, including a focus on unpaid care. Their experience was shared among peer municipalities during a workshop on ‘Local solutions for care reform’ that comprised 60 participants including mayors and local officials from across Senegal.

This Guidance Note documents the methodology used during the pilots and can be a technical resource for municipalities and local stakeholders willing to integrate care provisions into their local development plans.

Unpaid care work means that the person performing the activity does not receive a wage and the work is not necessarily captured in the GDP.

1. Direct care work: Direct care can include care for one's spouse, young children, older persons, sick or disabled relatives, or relatives residing within the same household.
2. Indirect care work: Indirect care often involves domestic chores, such as preparing meals, washing clothes, collecting or buying water and firewood, house maintenance, and other household chores.

Paid care work is generally direct care for people compensated and performed within a household or institution.

How to integrate unpaid care solutions in Local Development Plans (LDPs) in Senegal

The LDP planning process offers several opportunities to discuss local needs around unpaid care and to identify and prioritise community-led solutions to such needs.

Local Development Plans (LDPs) in Senegal are structured around the three pillars of the national development plan “Plan Senegal Emergent” (structural transformation of the economy, human capital, governance) and follow five steps (diagnostic, planning, drafting/validation, implementation, and monitoring-evaluation). While there is no section on unpaid care in LDPs, most activities related to care are included in the chapter on human and social development (PSE axis 2).

The diagnostic phase of LDPs provides information on the existing infrastructure in the municipalities and the SWOT analysis for each infrastructure² as well as gaps and preliminary solutions based on the primary data collection in communities. The diagnostic is an excellent opportunity to collect data on community unpaid care needs (childcare solutions, water infrastructure, etc) and map who does

what in the community care ecosystem (time spent on care provision by age and sex). The diagnostic is key to identifying needs, existing solutions as well as gaps through interviews with community members.

In the action plans (planning phase), municipalities allocate resources to those key investments selected by the community. This phase is critical for the prioritization of infrastructure and services needed to address unpaid care needs.

The infographic below presents the key entry points for unpaid care analysis, identification and prioritization in the LDP process following the methodology developed by UN Women and the Regional Development Agency of St. Louis to support communities in identifying and analysing community care needs and to develop and finance solutions to those needs in the context of Local Development Plans.



Photo: UN Women Africa

Phase 1: Diagnostic

Data needs and other entry points

Data collection at the individual, household, and community level via interviews or focus groups to obtain information about:

- Unpaid care needs disaggregated by sex and age; Time spent on care work by sex and age and type of care work; Men’s and women’s access to and control of resources that can be used to meet care needs (e.g. income, assets, public services and infrastructure, insurance, social protection and saving mechanisms, digital technology, etc.)
- Influencing factors leading to unpaid care work distribution between family members (by sex and age)
- Existing and potential solutions to address unpaid care needs

Examples

Snapshot of the diagnostic analysis of the municipality on childcare provisions (Education)



Time spent on childcare within the household (by sex)

On average, women spent five more times than men in childcare daily in the community



Number of day-care centres for kids under 3
1 (private)

Gaps identified

- **The lack of sanitation and school canteens in the early childhood centres (for over 3 years old)**
- **Insufficient equipment for quality services in ECF**
- **Insufficient qualified teachers**
- **Only childcare centre (for under 3 y.o.) is fee-based and families cannot afford it**



Who takes care of children under 3 within the household? (by the degree of importance)

- **Mother**
- **elder sisters**
- **other family members**



Households' primary reasons for not sending children to childcare

- **Too costly**
- **Too far**
- **Poor quality of services**



Solutions

Resources allocation to:

- **Improve equipment in ECC early childcare education**
- **Build childcare centres to be operated by the community**
- **Train childcare teachers and workers**

Phase 2: Planning

Data needs and other entry points

From the needs, constraints and solutions identified in the diagnostic, a priority action plan (in the form of a matrix) is elaborated, including the:

- Identification of priority needs for men and women (differentiating by age when relevant and possible)
- Identification of priority actions needed to meet the differentiated and common needs of men and women

- Formulation of expected results
- Budget of the priority actions selected

If the necessary data have been collected and analysed during the diagnostic, and women and their representatives have participated in planning discussions, a gender-responsive identification of priorities and investments should follow

Examples

An example of action in a Gender-Responsive Priority Action Matrix



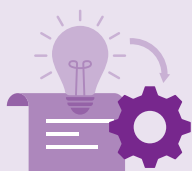
Action

Provide women with labour-saving equipment to reduce domestic work (e.g. one multifunctional platform)



Actors involved

Municipal council, Women's associations



Place of implementation

In each of the 6 villages of the municipality



Implementation Period

January to July 2023

Phase 3: Priorities validation



Data needs and other entry points

Women farmers groups and women's organisations participate effectively in the consultation and validation of the plan.

Phase 4: Monitoring and evaluation process in the LDP

Data needs and other entry points

Establish specific targets, indicators and mechanisms to monitor the execution of unpaid care-related activities and investments included in the LDP.

Examples

Examples of targets and indicators³:

Quantitative

- X% of the LDP total expenditure allocated to unpaid care-related expenditure
- X number of community early development centres funded by the local government

Qualitative

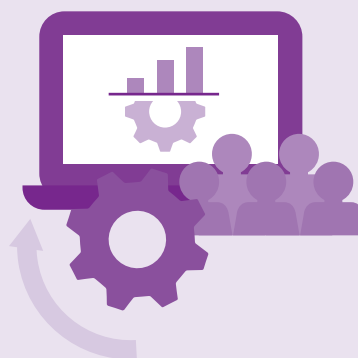
Another way in which to assess and monitor the gender impact of the investments in the LDP is to build a matrix using a qualitative methodology that assesses for each of the investments under the plan, whether they benefit more to men, women or both of them equally, depending on who uses the services more. The rating can be completed during community meetings as part of the validation phase of the plan, asking for men and women's input. See example of result below.

Data needs and other entry points

Ensure women's participation in LDP review, monitoring and evaluation processes

Examples

- Women organizations participate in the monitoring and evaluation of the LDP (YES/NO)
- % of women represented in the M&E management and governance committee/s of the LDP (50%)



Investment	Benefits men more	Benefits women more	Both of them equally	Meets unpaid care need
Rehabilitation of road to water point		x		Yes
Rehabilitation of road to market			x	Yes
Construction of health post		x		Yes
Adding community creche to local market		x		Yes
Rehabilitation of community centre	x			No

Examples of Care-Related Investments in Local Development Plans

Examples of investments in LDPs	Impact on women's unpaid care
<p>Education</p> <p>Number of early childcare education centres and infrastructure available</p>	<p>Access to early childhood care centres allows women to increase their time on productive activities. In Senegal, putting their children in any type of preschool facility results in an average increase of 4 hours per day in the time devoted to professional activities for mothers or female custodians⁴.</p> <p>Investing in free universal high-quality childcare education in Senegal will create new jobs, the majority of which will be women's jobs. There is evidence of a subsequent reduction in the gender employment gap by 31%. There are additional gains associated with women's increased participation in the labour force and children's human capital⁵.</p>
<p>Health</p> <p>Number of health centres and infrastructure available</p> <p>Number of health professionals (doctors, midwives, etc.) available</p>	<p>Illness or disability of household members affects women's time and effort required for care work. In Northern Senegal, 45% of women need to take care of a family member with a disability or chronic health problem, which affects their activities, work time and income⁶.</p> <p>Improved access to and availability of health centres allows women to seek medical attention when needed, reducing the burden of unpaid care work that might otherwise be required to care for sick family members. In addition, health centres can provide education and resources on preventative care and healthy living, lessening the overall demand for healthcare services and the associated unpaid care work in the future.</p>
<p>Social protection</p> <p>Types of social protection schemes available (health insurance, food subsidies)</p>	<p>Social protection schemes that are affordable and adapted to women's needs provide legal and financial support and help reduce the financial burden of caring for children or sick family members, enabling women to engage in paid employment or pursue activities outside the home.</p>
<p>Water and sanitation</p> <p>Number of wells available within a distance of 5 km</p>	<p>In Northern rural Senegal, women spent on average 1.8 hours per day fetching water⁷. Improved access to water and sanitation reduces the time required to collect water or manage sanitation needs. This can free up time for women to engage in paid employment. Moreover, improved water and sanitation reduce the burden of waterborne diseases, which would require significant unpaid care work to manage.</p>
<p>Transportation</p> <p>Number of rural roads or bridges connecting to water access points</p> <p>Number of existing transportation routes are perceived as safer</p>	<p>Poor transportation makes it more difficult for women to access the resources and services they need to care for their families. The rehabilitation of roads and provision of safe transport can reduce the time needed for children to reach school, for household members to reach health services and for women to access markets and employment.</p>
<p>Electricity</p> <p>Number of sources of energy (classic and solar) available to household</p> <p>Rate of electricity coverage has increased</p>	<p>Electrification can decrease the time that women spend cooking, cleaning or heating the household. For example, when rural electrification was introduced in South Africa, the time women spent on housework decreased, leading to a 9% increase in female labour participation⁸.</p>
<p>Labour- and time-saving technologies</p> <p>Availability of food processing devices has improved (solar millet mills, rice huskers)</p> <p>Number of households using time-saving cooking devices such as stoves has increased</p> <p>Availability of multi-functional platforms to power time saving devices and other comms technology (see next)</p>	<p>There is evidence that labour-and-time-saving technologies not only reduce the drudgery of unpaid care borne by women but also have potential redistributive effects on the time spent on care tasks between women and men within the household⁹. Depending on the device, they can also have positive effects on household health (e.g. clean stoves), and reduce healthcare-related burden in the future. They can also save time spent gathering wood.</p>
<p>Communication</p> <p>Rate of internet coverage increased</p> <p>Mobile network coverage improved</p>	<p>Ninety per cent (90%) of women farmers in rural northern Senegal are familiar with financial services such as mobile money, which help them save time and money. Access to internet and mobile services of different types can reduce women's transaction time in productive and care activities.</p>

Leveraging LDPs to Recognise, Reduce and Redistribute local unpaid care of women in Senegal

Social norms significantly shape unpaid care work by assigning caregiving responsibilities to women and girls. These social norms contribute to the undervaluation and underappreciation of unpaid care work and to the unequal distribution of unpaid care between men and women at the household and community level.

Gender-responsive local and national economic policies address unpaid care by 3 principles (recognition, reduction and redistribution of unpaid care work). “Recognition” entails acknowledging that unpaid care work is often overlooked in households and society at large. Recognition involves making care work visible in programmes, plans and community discussions. The “Reduction” of unpaid care activities entails decreasing the drudgery and time intensity of care activities. The “Redistribution” of care work involves sharing care responsibilities between households and society and between women and men.

The planning process of the Local Development Plans in Senegal offers an opportunity to adopt measures that contribute to each of the ‘R’s.

The majority of LDPs’ investment plan actions focus on “reducing unpaid care” by increasing investment towards local care-relevant infrastructure and time- and labour-saving technologies and ensuring gender-responsive social protection systems for rural women and girls. The LDP’s process itself, through community discussions and prioritization, can contribute to making unpaid care more visible, and in so contribute to recognise it. Over time, social norms change will lead to more egalitarian gender roles and a more balanced distribution of unpaid care and to redistributing the responsibility for unpaid work between women and men, and girls and boys in the households”. The following are examples of actions linked to the LDP process to recognise, reduce and redistribute unpaid care work.



Photo: UN Women/Chérif Khoury

Examples of actions to recognise, reduce and redistribute local unpaid care of women in Senegal

Recognise the value of women's unpaid care work

- Inclusion of a stand-alone section in the LDP focused on unpaid care, summarizing the needs identified, showing differences in the distribution of unpaid care needs between men and women, and summarizing proposed solutions
- Applying a gender-responsive budgeting lens to LDPs by analysing local investment allocations by gender, and using that to lobby for prioritising the allocation of local resources to care-related services and initiatives
- Conducting surveys at the local level (disaggregated time-use data, cost analysis of school dropout among girls due to domestic responsibilities, etc.) to build the case for local investments in care.
- Establishing key indicators to monitor the execution of unpaid care-related investments in the implementation of the Local Development Plans
- Establishing clauses to include 'care investments' as core expenditures to be protected in the event of budget cuts
- Organising community discussions to share results of unpaid care community analysis during community meetings in local development planning processes.



Reduce the drudgery and time intensity of care work

- Provision of household time-saving equipment and infrastructure (efficient stoves, millet mills, huskers)
- Rehabilitation/construction of mini-drilling water points, improved wells and/or standpipes
- Extension of solar panel networks
- Rehabilitation of rural roads or bridges connecting to water access points
- Expanding high-speed internet access
- Construction/rehabilitation of health centres (cases de santé)
- Expansion of community childcare infrastructure (day care centres in markets or near farms, mobile crèches, etc.)
- Provision of school feeding programmes in local schools



Redistributing the responsibility for unpaid work within the households

- Dialogue and capacity-building sessions with male leaders (religious, cultural, and political) for positive masculinity and social norm change around unpaid care work.
- Advocacy campaigns at the local level to 'de-feminise' caregiving and increase male involvement in home-based care services. Initiatives could use creative methods of communication (e.g., male role models, drama performances, father schools, media campaigns, etc.).
- Create role-sharing programs in schools to combat stereotypes that perpetuate the unequal distribution of care from an early age.
- Raise awareness of the responsibilities of local officials to promote women's economic empowerment.
- Support mobilization of women's and youth organisations for advocacy on unpaid care.



Related resources

UN Women, 2023, A bottom-up approach to unpaid care policy and programming. The experience of the 3R project in Senegal.

UN Women, 2023, Innovative solutions to recognize, reduce, and redistribute the unpaid, care work of rural women in Senegal.

UN Women, 2023, Infographic: Solutions pour le travail de soins non rémunéré des femmes en milieu rural du Sénégal.



Endnotes

- 1 ANSD and UN Women (2022). *Time Use Survey Senegal 2021*
- 2 *SWOT analysis (Analysis of the strengths, weaknesses, opportunities and threats)*
- 3 *The target threshold levels will be defined based on the data collected during the planning process of the LDP and aligned to international benchmarks*
- 4 *A study commissioned by UN Women and produced by CRES research centre on "Study on existing childcare centers initiatives in Senegal and household's willingness to pay", Senegal 2022. UN Women's Report*
- 5 *ONU Femmes, 2021 "Investir dans l'éducation préscolaire universelle au Sénégal : effets sur la création d'emploi et les recettes fiscales"*
- 6 *A study commissioned by UN Women and produced by Amarante Consulting on the "Needs analysis, ecosystem mapping, market and pre-feasibility study in the context of digital innovation for financing and managing risks and shocks related to unpaid care work for rural women in Senegal", Senegal 2022. UN Women Report*
- 7 *ibid*
- 8 Dinkelman, T. (2011), "The Effect of Rural Electrification on Employment: New Evidence from South Africa", *American Economic Review* 101 (7), pp. 3078-3108.
- 9 *Oxfam (2018), Infrastructure and equipment for unpaid care work: Household survey findings from the Philippines, Uganda and Zimbabwe, Oxfam GB*



Photo: UN Women Africa