UNPAID CARE WORK
REDISTRIBUTION FOR SUSTAINABLE DEVELOPMENT

POLICY BRIEF
LIST OF FIGURES

Figure 1    Education of Participants
Figure 2    Men’s and women’s time use
Figure 3    Detailed time use diary
Figure 4    Childcare by number of children under 6 (women only)
Figure 5    Time spent caring for children by region
Figure 6    Time spent caring for adults by age
Figure 7    Time spent caring for adults by marital status
Figure 8    Collecting fuel and water by location – Phase 3
Figure 9    Collecting fuel and water by ethnicity
Figure 10   Changes over time: collecting fuel and water – Ha Giang
Figure 11   Changes over time: collecting fuel and water – Tra Vinh
KEY MESSAGES

• **54 working days per year**: the amount of time each woman in one district in Ha Giang could save if they had improved access to water and sanitation.

• **50 hours per month**: the average amount of time women with children under 6 still spend on childcare alone.

• **5 million hours per month**: the amount of time women could save if the government and private sector funded an extra 100,000 early childcare places.

• **1.1 trillion VND**: the contribution those women would make to the economy each year if they invested their time in paid work in the care economy, rather than unpaid care work. At the same time they could raise their household incomes by 920,972 VND per month.

• **8 hours per week**: the amount of extra time women in the research contributed to paid work by the end of the study.

• **57 minutes per day**: the average reduction of women’s time on unpaid care work by the end of the research. This is equivalent to 29 hours per month.

• **5 hours per day**: the average amount of time women spent on unpaid care work in ActionAid’s first time diary surveys (January – April 2016).
Since 2015, ActionAid Vietnam has been undertaking a long-term research and advocacy programme focusing on unpaid care work and the impact that unequal distribution of care has on women, men, society and the economy. This program has several components, including a time-diary survey which has been undertaken in nine project sites across the country, community behavior-change initiatives, policy analysis and advocacy. Under this program, we have released two previous reports with the Gender Equality Department of the Ministry of Labor, Invalids and Social Affairs (MOLISA). *Make a House Become a Home (2016)* highlighted the high volume of unpaid care work, based on the results of our time diary survey, and the fact that women’s unpaid care burden is significantly higher than men regardless of geographic location, ethnicity, age, education or marital status. *What does it cost women for men to be the family’s backbone? (2017)* dug deeper into the specific factors that increased women’s unpaid care burden, and made recommendations for increased investment in childcare, infrastructure, and behavior-change initiatives. This third research report was supported by Neptune Cooking Oil.
ACTIONAID’S UNPAID CARE WORK PROJECT AIMS TO IMPROVE UNDERSTANDING AND MAKE RECOMMENDATIONS RELATING TO THE ‘THREE RS’ OF UNPAID CARE WORK:

- **Recognition that**
  (i) unpaid care work is work and plays an important role in the socio-economic development of the family, society and country;
  (ii) unpaid care work is not work by women and for women only; a lot of this can be shared by men and other family members;
  (iii) unpaid care work can be reduced and redistributed with support from the government and other members of families and communities.

- **Reduction of unpaid care work, which can be done through**
  (i) recognizing that unpaid care work is important to society’s development and that women are shouldering the loads invisibly;
  (ii) governments and stakeholders providing public services to lessen the burden so that women can have time to rest, study and build their strengths for further development opportunities;
  (iii) men and other family members shouldering their parts in delivering unpaid care work; unpaid care work can also be reduced by introducing different types of machines (washing machines, dishwashers, robot vacuum cleaners, etc.), however, this does not tackle the root cause of the unpaid care work burden on women’s shoulders; and
Redistribution of unpaid care work between household members.

Redistribution between duty bearers and rights holders, and between the state and the citizens. This is the most important action to challenge the inequality between men and women and address patriarchy, and therefore the aspect that needs to be advanced at all levels for meaningful empowerment.

This third report in our series looks at redistribution of unpaid care work, and makes recommendations for how redistribution of work, redistribution of resources and redistribution of power can improve gender equality in Vietnam. It draws on data from three rounds of Action-Aid’s time diary study and focus group discussions conducted in the seven project sites.
This policy brief draws on the results of the third phase of a time use study that was conducted between April and November 2017. The third phase follows the same methodology as the first and second phases (conducted from January to July 2016). The third phase of the study was undertaken in: Ho Chi Minh City, Dak Nong, Lam Dong, Ha Giang, Cao Bang, Tra Vinh, Quang Ninh, and Vinh Long. In Phase One and Two of the study, Hanoi was also a participating province, however ActionAid phased out of its programme in Hanoi during 2016 so Hanoi was not included in the third phase.
Over the course of the study, nine time diary surveys have been collected and analyzed from each participant (see Table 1). To complement the statistics from the time use diaries, the researchers also collected qualitative information through focus group discussions with those who filled in time diaries as well as representatives from local authorities and communities. The participants have also participated in awareness-raising sessions to build community members’ understanding of unpaid care work at household level. District meetings were also conducted after each phase of research as part of validating the results. This primary data has been supplemented with secondary research to better understand trends and context.

**TABLE 1: STRUCTURE OF TIME DIARY STUDY**

<table>
<thead>
<tr>
<th>Phase</th>
<th>Timing</th>
<th>Survey rounds</th>
<th>Participants</th>
<th>Time diaries completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>January to April 2016</td>
<td>1, 2, 3</td>
<td>825</td>
<td>2,475</td>
</tr>
<tr>
<td>2</td>
<td>May to July 2016</td>
<td>4, 5, 6</td>
<td>784</td>
<td>2,202</td>
</tr>
<tr>
<td>3</td>
<td>July to November 2017</td>
<td>7, 8, 9</td>
<td>540</td>
<td>1,561</td>
</tr>
</tbody>
</table>
The methodology for this research differs from that used in similar studies of unpaid care work in Vietnam and elsewhere in several key respects.

- The research has been conducted by the participants themselves and monitored and overseen by trained members of the local community, rather than outside observers.
- The research is also multi-year, rather than one-off, which allows for monitoring of changes in participants’ views and behavior over time.
- The research includes a strong training and awareness raising component. Before commencing the research, community facilitators were trained on concepts of unpaid care work and research facilitation skills. These facilitators received refresher training before each phase of research. Community members participated in a facilitated discussion after each time diary collection, allowing men and women to discuss issues around unpaid care work and its magnitude, explore the underlying social norms and beliefs that contribute to inequality and plan actions together.
- Between phases of research, the majority of communities also held discussions with local authorities to share the results of the time diary surveys. This provided an opportunity for dialogue and information sharing about what local initiatives could help to recognize, reduce and redistribute unpaid care work. These components were designed to ensure that the research does not just record the existing situation, but also empowers communities with solutions to take action to change the situation for the better.
**KEY TERMS DEFINED**

**Paid work** includes work done for a wage or salary, in a family small business, producing or selling products, collecting rubbish or petty trading.

**Unpaid work (calculated in GDP)** includes subsistence agriculture, livestock farming, recycling, or serving on some representative divisions eg: People’s Committee, Youth Union.

**Unpaid Care Work** includes collecting fuel and water, housework (preparing food, cleaning, washing, grocery shopping), care of children, and care of adults (including elderly, sick or with a disability).

**Rest, Education and Self Care** includes learning, education and entertainment (doing homework, watching television, reading, using mobile phones, etc), social or cultural activities (such as meeting with people in the village, attending ceremonies, prayer), sleep, and other self care (eating, dressing, washing).

**DESCRIPTION OF SAMPLE**

The sample in this phase included 540 people. Participants completed 1561 time diary surveys over Phase 3, with 59% of responses from women and 41% from men. The Phase 3 surveys were undertaken in seven locations:
**TABLE 2: LOCATION BY GENDER**

<table>
<thead>
<tr>
<th>Location</th>
<th>Women</th>
<th>Men</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>% of location sample</td>
<td>Number</td>
</tr>
<tr>
<td>Quan Ba District, Ha Giang Province</td>
<td>22</td>
<td>58%</td>
<td>16</td>
</tr>
<tr>
<td>Krong No District, Dak Nong Province</td>
<td>61</td>
<td>58%</td>
<td>44</td>
</tr>
<tr>
<td>Vung Liem District, Vinh Long Province</td>
<td>35</td>
<td>64%</td>
<td>20</td>
</tr>
<tr>
<td>Lam Ha District, Lam Dong Province</td>
<td>62</td>
<td>55%</td>
<td>51</td>
</tr>
<tr>
<td>Binh Than District, Ho Chi Minh City</td>
<td>52</td>
<td>56%</td>
<td>39</td>
</tr>
<tr>
<td>Uong Bi City, Quang Ninh Province</td>
<td>52</td>
<td>60%</td>
<td>36</td>
</tr>
<tr>
<td>Tra Vinh City, Tra Vinh Province</td>
<td>37</td>
<td>70%</td>
<td>13</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>321</td>
<td>59%</td>
<td>219</td>
</tr>
</tbody>
</table>

*Respondents belong to 11 ethnic groups, with the majority belonging to the Kinh ethnic group.*

Source: Unpaid care work time diary surveys – April to November 2017
### TABLE 3: ETHNICITY BY GENDER

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Women</th>
<th></th>
<th>Men</th>
<th></th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>% of sample</td>
<td>Number</td>
<td>% of sample</td>
<td></td>
</tr>
<tr>
<td>Kinh</td>
<td>240</td>
<td>75%</td>
<td>161</td>
<td>74%</td>
<td>401</td>
</tr>
<tr>
<td>Dao</td>
<td>26</td>
<td>8%</td>
<td>22</td>
<td>10%</td>
<td>48</td>
</tr>
<tr>
<td>M’Nong</td>
<td>11</td>
<td>3%</td>
<td>11</td>
<td>5%</td>
<td>22</td>
</tr>
<tr>
<td>K’hmer</td>
<td>13</td>
<td>4%</td>
<td>8</td>
<td>4%</td>
<td>21</td>
</tr>
<tr>
<td>Tay</td>
<td>14</td>
<td>4%</td>
<td>4</td>
<td>2%</td>
<td>18</td>
</tr>
<tr>
<td>H’Mong</td>
<td>7</td>
<td>2%</td>
<td>5</td>
<td>2%</td>
<td>12</td>
</tr>
<tr>
<td>Giay</td>
<td>2</td>
<td>1%</td>
<td>1</td>
<td>0%</td>
<td>3</td>
</tr>
<tr>
<td>E’dè</td>
<td>4</td>
<td>1%</td>
<td>3</td>
<td>1%</td>
<td>7</td>
</tr>
<tr>
<td>K’ho</td>
<td>0</td>
<td>0%</td>
<td>1</td>
<td>0%</td>
<td>1</td>
</tr>
<tr>
<td>Nung</td>
<td>1</td>
<td>0%</td>
<td>3</td>
<td>1%</td>
<td>4</td>
</tr>
<tr>
<td>Hoa</td>
<td>3</td>
<td>1%</td>
<td>0</td>
<td>0%</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>321</strong></td>
<td><strong>100%</strong></td>
<td><strong>219</strong></td>
<td><strong>100%</strong></td>
<td><strong>540</strong></td>
</tr>
</tbody>
</table>

*Source: Unpaid care work time diary surveys – April to November 2017*

Participants range in age from 15 to 79, with the largest proportion falling in the 45-59 year old age group (34.1%), followed by the 30-44 year old age group (31.6%). Most of the participants are married (79.7%) with only 12.1% single and 8.2% widowed, divorced or separated.
Participants have a range of levels of educational achievement (see Figure 1). The majority of participants in the study work in agriculture (71.5%).

Just over one quarter - 25.6% - of study participants have children under six years old, while 38.7% of participants have children aged 6-18 years. Most have one or two children, with only 7.7% of participants reporting that they have more than two children under 18.

There were some changes to the sample in this third phase of data collection, due to changes in programming locations of ActionAid, and several participants in the original 2016 study moving location or not being able to comply fully with the strict requirements of the research and sample quality. In particular, in between Phase 2 and Phase 3, ActionAid phased out their program in Hanoi, so this location did not participate in Phase 3. In addition, economic developments and a change of priorities in the original survey location in Cao Bang led to a change of location for Phase 3 of the survey – as a result, the quantitative sample from Cao Bang has been removed to ensure that the sample only includes participants who have been involved since the beginning of the project, to better measure changes over the duration of the project. For comparisons between Phase 1, 2 and 3 we have re-analysed the Phase 1 and 2 sample to remove participants from Hanoi and Cao Bang. As a result, Phase 1 and 2 figures in this report appear different from earlier reports in this series.
3. FINDINGS AND ANALYSIS

The findings from Phase 3 of ActionAid’s time diary study show a progressive change across all participants in the survey, with both men and women reducing their time spent on unpaid care work and unpaid GDP work, and increasing the time spent on paid work, over the two years of the study.

FIGURE 2: MEN’S AND WOMEN’S TIME USE

Source: Unpaid care work time diary surveys – January 2016 to November 2017
Over the course of the project, from January 2016 to November 2017, the survey participants experienced several changes:

- Women reduced the amount of time they spent on unpaid care work by almost an hour (57 minutes) and increased the time they spent on paid work by just over an hour (72 minutes).
- Time men spent on UCW did not increase but decreased by 28 minutes over the three phases.
- Men also increased the time they spent on paid work, by just under an hour (54 minutes).
- Equality between men and women in unpaid care work improved over the three phases — although there is still a long way to go before equality is achieved. In Phase 1, women in this comparison group did over two hours per day (132 minutes) more UCW than men. By Phase 3, this figure had dropped to 102 minutes per day.

The results in Phase 3 continued the results from Phase 1 and 2: both women and men spent most of their time on housework, and least time on caring for adults. The results show that the greatest reduction in time on unpaid care work over the project was that women reduced the time they spent on housework by 25 minutes between Phase 1 and Phase 3. Large reductions were also seen in the amount of time women spent collecting fuel and water (22 minutes per day).
Women in ActionAid Vietnam’s research spent less time on unpaid care work and more time on paid work compared to women in ActionAid research overseas. For example, in a multi-country ActionAid study in Nepal, Nigeria, Uganda and Kenya, women spent between 358 minutes per day (Nepal) and 509 minutes per day (Uganda) on unpaid care work. In contrast, men in ActionAid Vietnam’s research undertook more unpaid care work than men in Nepal and Uganda, less than men in Nigeria, and around the same amount as men in Kenya (167 minutes per day).

These differences can partly be explained by participation in paid work – women in Vietnam had a significantly greater participation in paid work than women in the other four countries – spending nearly double the amount of time as women in Nepal and Nigeria in paid work. Differences in levels of rural development and average incomes, as well as cultural factors, between these countries, are also likely to be influential. Vietnam’s relatively lower levels of unpaid care work and higher levels of paid work for women are hopeful signs for the possibility of even greater change in this area.

Source: Unpaid care work time diary surveys – January 2016 to November 2017
Following the final time diary study, 213 participants (66% women and 34% men) answered follow up questions about unpaid care work. The majority of women (62%) and men (57%) indicated that men were giving more support to their wife or partner after taking part in the research. Many men and women in focus groups also reported that men were doing more housework such as cooking or cleaning rather than caring for children or the elderly. This initially seems to contradict the time diary findings, as men’s overall time on unpaid care work decreased over the course of the study. Several factors that could explain this include that the first time diary surveys were undertaken in January – March 2016 and included the Tet holiday period, when men and women (and school-age children) may have been more likely to be at home and less likely to be doing paid work making the amount of unpaid care work in the first phase higher than other phases. Another factor may be that the reduction of women’s time on unpaid care work is significantly more than men, which means the unpaid care work in the family is more equally distributed than before, creating the impression that men are doing more.
A further follow up question asked why participants who stayed home to do unpaid care work did so. Of the 137 participants who answered this question, 39% of women and 48% of men indicated it was because they did not have a job. The most common reason given for not having a job was that there were no jobs nearby. 36% of women and 21% of men who answered this question also indicated that they stayed at home because of childcare responsibilities, while 12% of women and men indicated they stayed at home to care for adults. Other reasons given included old age or ill health, and participation in income-generating activities at home (such as knitting, caring for animals, etc).

The remainder of this section analyses the results of the time diary study in more detail, through the lens of redistribution of work; redistribution of resources and redistribution of power.

### 3.1 Redistribution of Work

The results of ActionAid’s time diary study suggest a strong connection between the large amount of time within phase 3 and over the three phases that women spend on unpaid care work relative to men, and the comparatively lower time they give to paid work. In our study, as both women and men decreased the amount of time spent on unpaid care work, they increased the amount of time spent on paid work. This highlights the need to consider participation in paid and unpaid work together, and to look at redistribution of unpaid care work from the unpaid care economy to the paid care economy. Increasing the scope of the paid care economy in Vietnam could serve to create more paid jobs for women, and at the same time reduce women’s unpaid care burden.
In Vietnam, the early childhood care system is well developed and has received strong government investment under the Education Law 2005 (No. 38/2005/QH11). The Education Law provides for three kinds of early childcare:

- Crèche and childcare groups for children three months to three years old;
- Kindergartens for children from 3-6 years old;
- ‘Young Sprout Schools’ combining crèches and kindergartens.

Coverage of childcare is high for older children – with 98% of pre-primary children enrolled in Kindergarten as at 2016-17. However, crèche enrolment is significantly lower, with only 15% of children enrolled as at 2016-17. Both public and private childcare centers are available, with the rate of private childcare centers declining in recent years (from 59% in 2002-03 to 16% in 2016-17) as public investment in childcare has risen. With Decision 161/2002/QD-TTg of the Prime Minister prioritizing access to childcare in poor, remote and rural areas, some public kindergartens in urban areas were transferred to being semi-state run kindergartens to promote social responsibility for childcare in advantaged areas.
The Labor Code provides that employers are required to support in building day care facilities or provide a childcare subsidy. However, research suggests that the uptake of this is low, either due to lack of facilities or poor quality – a BetterWork survey of over 2,500 factory workers found that only 3% of women with lower education and less than 1% of women with high education were using factory-provided childcare. Most women relied on other childcare centers (52% of women with higher education and 43% of women with lower education), or support from relatives and friends (37% of both groups of women). Enforcement of this provision of the Labor Code and private companies supporting high-quality childcare could have a significant impact on working women’s time.

Many participants in unpaid care work research commented on the low availability of public childcare facilities. For example, participants in Krong No, Dak Nong commented that there were no public places available in crèches for children under two years old – as a result, women generally bear the responsibility of caring for children under two. In Dan Phuong Commune of Lam Ha District, Lam Dong, participants commented that kindergartens were too far from their homes, suggesting a need to provide more facilities to serve the needs of a dispersed population, while in nearby Tan Thanh Commune participants commented that there were no places available for children under three in local childcare centers and in one ward of Vinh Long participants indicated they could not access childcare for children under four. As referenced in the previous report, the 2016-2017 research conducted by the Women Development Fund of Uong Bi found that there were no public crèches for children up to 24 months in Uong Bi, with the only childcare options for parents of young children being private childcare centers.
As well as access issues for young children there are quality issues with childcare. For example, a 2014 news report quoted the Deputy Minister of Education and Training saying that only 34% of the 16,000 private preschools in the country that provide care to under-threes are licensed. There have been many news reports showing the alarming reality of abuses of children in private unlicensed childcare centers. Some of these quality issues were noted by participants in our research. For example, in Ho Chi Minh City, participants in the research raised concerns about the quality of childcare centers – noting there are insufficient classroom facilities and that there are problems with unlicensed child care facilities. In Tra Vinh, some participants asserted that they were unable to access kindergartens for children under four, while others had access but noted facilities were inadequate with limited classrooms and no playgrounds. As well as quality issues, provision of meals at childcare centers is important for child nutrition and to ensure that women do not need to leave their work to provide lunch for their children.
INSIGHT: WHAT OUR TIME DIARY STUDY SHOWS ABOUT CHILDCARE

In the third phase of our time diary study, women on average spent just over an hour (62 minutes) per day on average on childcare, while men spent on average of 33 minutes per day. However, childcare is regularly under-reported in time use studies as it is undertaken at the same time as other activities, such as housework or unpaid GDP work. Despite this underreporting, childcare responsibilities may still drive women to be at home to be supervising a child, limiting their participation in the labor force. ¹¹

FIGURE 4: CHILDCARE BY NUMBER OF CHILDREN UNDER 6 (WOMEN ONLY)

Source: Unpaid care work time diary surveys – April to November 2017
In the time diary study, there were differences according to geography in the amount of time men spent on childcare, with men in Ha Giang spending more time than any other group.

However, some of this data is affected by low sample sizes – 85% of respondents in our sample with children under six lived in the central highlands or northern mountains regions, while no participants in Vinh Long had children under six, which may explain the relatively low time spent caring for children by women and men in this area.

What this data does show is that childcare is a significant daily task and that it is overwhelmingly a task undertaken by women.

Source: Unpaid care work time diary surveys – April to November 2017
In the traditional family structure, care for elderly parents is the responsibility of the eldest son and his wife, and ‘ideal’ care for the elderly is to live with their married son and his family, with daughters-in-law playing an important role in elder care. However, with changes in labour force participation, rural to urban migration and other social shifts, the traditional family structure is being replaced with a range of alternative structures, with multi-generational households now making up less than half of all family structures. At the same time, Vietnam faces an aging population in the future with the proportion of people over 60 increasing, raising further challenges for aged care within the family.

The Law on the Elderly (Law No. 39/2009/QH12) provides for a number of schemes to support the elderly, including social patronage policies for older people from low-income families or without family members to support them, which include a monthly allowance, healthcare benefits and potentially access to elderly-caretaking establishments. However, this system relies on family members, primarily women, to provide the majority of primary care for elderly people – as more women enter the workforce and the elderly population increases, the pressure on women to meet the care gap is likely to rise.

Improving care for the elderly is a complex policy problem, requiring a response that spreads across health, employment and social security policy areas. Factors to improve the health of the elderly (such as medical or preventative health programs) could help to address the need for home-based care. Further investment in nursing homes, payment for home-based carers, or community-based nursing support could lessen the burden on family members for caring for elderly people; while raising the non-contributory social pension could enable low-income elderly people to pay for services they need and free up time for family members who currently provide those services.
INSIGHT: WHAT OUR TIME DIARY STUDY SAYS ABOUT CARE FOR ADULTS

Throughout the three phases of our time diary study, the time allocated for caring for adults has been low – in phase three, women spent an average of 13 minutes per day and men spent an average of 6 minutes per day caring for adults. This low figure reflects the fact that 87% of participants recorded no time caring for adults. Of those that did spend time caring for adults, the vast majority (74%) were women. Women who spent time caring for adults spent an average of 73 minutes per day on adult care, while men spent closer to an hour (64 minutes).

Age impacted on the amount of time spent caring for adults, with women 45-55 and men 55 and above providing the most care, potentially for ill or elderly spouses or parents.

FIGURE 6: TIME SPENT CARING FOR ADULTS BY AGE (AMONG PARTICIPANTS WHO ENGAGED IN ADULT CARE)

Source: Unpaid care work time diary surveys – April to November 2017
Marital status also impacted on time spent caring for adults. Among the group that spent any time caring for adults, married women spent the most time (78 minutes per day) and both married women and men spent more time than single women and men on care.

These figures suggest that while the majority of people do not have responsibility for adult care, for those who have an elderly family member or other adult to care for, the time commitment for this care can be significant – particularly for married women. This supports the need for policy initiatives to address availability of caring support.

Source: Unpaid care work time diary surveys – April to November 2017
The impact of childcare investment on women’s paid work is well documented – lack of childcare is a key constraint on women’s full and active participation in the labour force. Although other pressures and opportunities are pulling more women into the workforce in Vietnam, evidence from Vietnam and related countries suggests that even increased participation in the workforce does not in and of itself lead to more affordable childcare becoming available, without Government intervention. That is, women absorb the pressure of dual productive and reproductive roles, and limit their career progression without high quality affordable childcare options. There are therefore clear economic and social benefits to increasing accessibility of quality early childcare - as well as benefits from the perspective of early childhood development. Results from time diary surveys also suggest that investing further in support for adult care could save significant amounts of time for women and men, hence, contribute to sustainable social economic development of women and men.

Investments in the care economy do not only free up women’s time, they also create jobs – predominantly for women. Figures from Ministry of Education and Training (MOET) have shown that women comprise 98% of all teachers in the crèche system (children aged 0-3) and 99% of all teachers in kindergartens (children 3-5). Currently, there are 65,825 teachers employed in crèches and 250,791 teachers employed in kindergartens. With a ratio of one teacher to 10 children in each crèche, increasing crèche places has significant potential for job creation. In the UK, the Women’s Budget Group has calculated that up to 1.5 million jobs could be created in the UK if 2% of GDP were invested in care industries, compared to 750,000 jobs for an equivalent investment in construction.
Examples from overseas show both the benefits of investing in early childcare for young children, and the potential pitfalls. Fontana and Elson reviewed two programs in Chile and Mexico.\textsuperscript{21} Mexico’s Federal Day Care Programme for Working Mothers subsidizes provision of day-care services for children from the age of one to four years from lower-income households, whose mothers do not have access to social security-based services. Rather than providing State-run daycare services, the program uses a subsidy system to encourage people to start up community-based childcare centers and lower the costs of accessing those centers for low-income women. After two years of operation, the programme has been credited with creating 380,000 new jobs for women and providing much needed childcare for more than 240,000 children. However, the program has also been criticized for creating low-quality jobs for women, with informal conditions, no social security and low pay.\textsuperscript{22}

As another example in Chile, the government launched Chile Crece Contigo in 2006 with the aim of guaranteeing free access to crèches and kindergartens for all children under four from the two poorest income quintiles, and universal pre-school coverage for four and five year olds. The child-care services are provided directly by public institutions, and educators are required to have a five-year university degree in early education. Workers are public employees and entitled to benefits but they still receive salaries which are among the lowest in the educational sector. Although the program has greater employee benefits, takeup has been more limited.\textsuperscript{23} These two examples highlight potential policy options for Vietnam. Vietnam already makes significant budget investments in education and early childcare (30.24 trillion VND in 2013),\textsuperscript{24} however it is clear that there remains a significant need for childcare facilities to support carers of children under three and a growing need for adult care options. Investing in more public care places would increase availability of childcare for low-income households and also create jobs for women, as would investment in nursing homes or community carers for the elderly. Alternatively or additionally, exploring private sector models, combined public-private models, or community-based caring models could help to free up women’s time while boosting this important sector of the economy in order to have a sustainable and stable society.
When exploring options for private care, it is also important that investment in the care economy creates decent jobs for women, with living wages. The example from Mexico given above highlights the risks that childcare workers can be employed on low pay without social security. And as discussed above, concerns have recently been raised in the Vietnamese media about the quality of private childcare options. Alternatives to state-provided care therefore need to come with regulation to ensure safety of children and decent work for women.

While the care economy is often seen as an opportunity to create jobs for women, it can have other redistributive impacts, for example where it is coupled with incentives for men to work in childcare. Greater representation of men in caring roles could assist in changing social norms that associate caring roles with women, and help to raise the perceived value and status of these jobs.
What is the impact of investing in the care economy?

Women with children under six still spend an average of just under 50 hours per month on childcare alone. If the government and private sector funded an extra 100,000 early childcare places for young children, it could therefore give back 5 million hours of women's time each month while creating paid jobs in the care economy for women and men. If the 100,000 women whose time was saved by those new childcare places were able to invest that time in paid work, each woman could raise their household incomes by an additional 920,972 VND per month (assuming they were paid at minimum wage).

CHANGING THE WORKPLACE TO REDISTRIBUTE WORK

Redistribution of caring responsibilities also requires reconsideration of workplace norms that follow a male breadwinner model, and the legal and policy environment that supports that. This includes working hours and leave entitlements that are family friendly for both men and women.

In Vietnam, the Labor Code and the Social Insurance Law provide that mothers are entitled to six months paid maternity leave and fathers are entitled to five days paternity leave to look after the newborn (more in special circumstances). This is a generous leave provision that supports women to take time out from work for child caring. However, the leave is not transferable between mothers and fathers and therefore reinforces the viewpoint that women are primary caregivers. Other benefits in the Labor Code for mothers of young children (such as reduced hours) are also welcome supports, but by being unavailable to fathers of young children, again reinforce social norms about women’s caring role.

Improving access to paternity leave, or transferability of entitlements for carers of young children, could contribute to shifting assumptions about the caring roles of men and women, and support fathers to increase their care responsibilities. Private employers who employ both men and women should also consider how policies within the workplace could also support caring responsibilities – for example, by allowing flexible working arrangements and leave for both men and women to facilitate their caring roles.
Equality in unpaid care work also requires redistribution of local level resources and funding for infrastructure, towards infrastructure that reduces the burden of unpaid care work. One key area highlighted by the results of the time diary survey is the time women spend on collection of fuel and water. Inadequate water supply is still a problem in some areas of Vietnam; for example, the most recent Multiple Indicator Cluster Survey (MICS) has found that only 17.5% of households in the Northern Midlands and Mountains region and 11.6% of households in the Central Highlands have access to piped water. Although coverage of clean water sources has improved across the country, often household members (usually women) have to take time to collect this water from wells, boreholes or other sources nearby.

Moreover, 67.4% of people in the Northern Midlands and Mountains region and 51% of people in the Central Highlands still use wood as their main type of cooking fuel. Again, lack of improved fuels often requires women and girls to spend time collecting firewood.
As detailed in our second report, *How much does it cost women for men to be the family’s backbone?*, our time diary survey has highlighted that women in mountainous and remote areas, or from ethnic minority backgrounds, spend significant amounts of time collecting fuel and water. Phase 3 of the time diary study still found significant variations in the amount of time men and women spend collecting fuel and water between locations – from a low of 3 minutes in Ho Chi Minh City to 114 minutes in Ha Giang.

**FIGURE 8: COLLECTING FUEL AND WATER BY LOCATION**

**FIGURE 9: COLLECTING FUEL AND WATER BY ETHNICITY**

*Source: Unpaid care work time diary surveys – April to November 2017*
Over the course of the time diary study, women have reduced the average amount of time spent on collecting fuel and water across all locations, with some variations. For example, in Ha Giang, both women and men reduced the time on collecting fuel and water – resulting in less time on this activity overall by the third phase of the study. This is likely due to some water infrastructure development that was completed in the area between the beginning and end of the study that made water more accessible to households.

In contrast, in Tra Vinh, men reported increasing the time they spent collecting fuel and water over the course of the study, while women reduced the time they spent on collecting fuel and water – that is, it is possible that the labour has been redistributed between men and women in households. This is supported by comments from focus group discussions which indicate that men, after taking part in the research, had increased the time they spent on housework over the study. One male participant from Tra Vinh commented at the end of the final batch of data collection that he had increased the time spent on collecting firewood.

Source: Unpaid care work time diary surveys – January 2016 to November 2017
It is clear that investing in infrastructure such as irrigation, roads, transport infrastructure and other market facilities can deliver economic benefits by improving agricultural productivity and market access. On the other hand, investment in water, sanitation, improved fuel (such as through electrification or gas) and other household-level infrastructure is more likely to be viewed as a community development investment rather than an economic good. However, redistributing resources to fund household level infrastructure can have economic benefits by freeing up time that both men and women, but particularly women, can contribute to other economic activities. These activities could include participation in paid work, further time investment in household informal businesses, participation in education or vocational training, or development of new businesses. For example, a study from rural Senegal found that the time savings associated with small piped water systems and the increased water available allowed women to enhance existing productive activities and initiate new enterprises.  

It is important that improved access to water addresses economic as well as physical barriers to access. In one focus group in Vinh Long (where women spent nearly an hour per day collecting water), participants mentioned that while there is access to clean water, people are charged for using it, so many still gather water from the river to use.
How much time could investment in water and sanitation save?

Across the three phases of our study, women in Quan Ba District, Ha Giang province, spent an average of 143 minutes per day collecting fuel and water. Over one year, this totals 870 hours of work for each woman. If collecting water comprises half of this time, improving water access in just one household could save a woman 435 hours per year.

Assuming an 8-hour working day, this means that women in Quan Ba could each save 54 working days per year if they had improved access to water.

3.3 REDISTRIBUTION OF POWER

Redistribution of unpaid care entails a redistribution of power within the household and society. When men spend more time on unpaid care work, the whole family can have concrete benefits, such as more time for women to participate in paid work, study, rest and leisure. It would also shake up the entrenched power dynamic, in which women’s income is dependent on men’s work and women’s work is considered subordinate.
This household power dynamic was referred to at several points in focus group discussions, for example, women and men in Lam Dong and Dak Nong commented that the unpaid care burden reduces women’s financial independence. Another commentator in Uong Bi noted that while women and men enter the workforce in the same starting point, women’s unpaid care responsibilities prevent them from catching up with men’s rate of advancement. In Cao Bang, one of the participants noted that women’s participation in civic activities is curtailed – for example, some women had to miss local events organized by the Women’s Union to celebrate International Women’s Day and Vietnamese Women’s Day due to childcare responsibilities.

Unpaid care responsibilities are linked to traditional household gender roles, but also serve to reinforce these roles. Participants in focus group discussions overwhelmingly cited social norms and prejudices as the primary reason why women do more unpaid care work than men. As one participant in Ho Chi Minh City put it: “Generally, housework is considered an obligation by women. They accept and see housework as joy, showing their gratitude to their families”. Participants also commented that the association of childcare and housework as “women’s work” is “deeply rooted” and not an easy social norm to change. As one participant in Uong Bi commented “the perception of people, especially men, about UCW is still limited, it will take time to change their perception”.

Unpaid care work also marginalizes women socially, relegating them to lower status roles in society and restricting the time available for participation in activities that would give them greater power and influence in society, and in the household. Focus group participants commented that unpaid care work prevents women from participating in paid jobs, community political activities and meetings, education and training activities – all areas that would increase women’s social capital and power. Lower participation in paid work also impacts on women’s decision-making power in the household, with women less likely to have influence and power over household decisions.
While much of the focus of discussions on unpaid care work has been on how redistribution of unpaid care work within the household and within society can benefit women, recent analyses have also focused on benefits for men and families. The global State of the World’s Fathers report, produced by the international MenCare campaign, has noted that greater involvement of fathers in child-rearing has been linked to higher cognitive development and school achievement, better mental health for boys and girls, and lower rates of delinquency in sons. Studies find that fathers who report close, non-violent connections with their children live longer, have fewer mental or physical health problems, are less likely to abuse drugs, are more productive at work, and report being happier than fathers who do not.

Reports from men and women involved in focus groups supports this. After participation in ActionAid’s program several participants commented that men and boys in their household had begun to take on greater roles in housework and child care. As one participant commented:

“After participating in the survey, I realized that my wife also has to do paid work and she has to do unpaid care work, I used to only watch TV and take a nap but didn’t help my wife with the housework. I am very happy to be involved in the program, thanks to which I now help my wife more than before.”

However, despite comments and responses from focus groups indicating that men had increased their participation in unpaid care work, time diary results show that men in fact reduced their participation in unpaid care work, and that women continue to do a significantly greater share. Therefore, we can see that the distribution of UCW can only change when there is a fundamental shift in power within households and in social norms.
Mr Duong Minh Tuan, a member of the H’Mong ethnic minority in Thong Nong District, has participated in the unpaid care work time diary survey since 2016. Since participating in the study, Mr Tuan has changed his views on unpaid care work: “I realized that housework isn’t just women’s responsibility, it should be shared among men and the family as well”. Mr Tuan now helps his wife with cooking, cleaning, washing dishes and looking after their one year old daughter.

“I always help my wife with housework so she can feel better and we can have more time to look after the children”. Mr Tuan’s wife, Ms Giang Thi Nu, appreciates the opportunities to participate in community activities: “Now I have more time for social activities such as local meetings, events or going to the market”.

Participants in the time diary study discussed initiatives they had already undertaken to encourage individual change within households on unpaid care work. Activities that communities had already undertaken included communication activities through theatre and awareness-raising activities supported by the local authority. Participants also made recommendations for initiatives they would like to see supported to further change views on unpaid care work. These included: workshops, training and awareness-raising to help men to understand the importance of sharing care within the household, as well as practical training courses for men on parenting skills, cooking, cleaning and other caring tasks. There is also some limited evidence to suggest that participation in a time diary activity such as the study can lead to changes in unpaid care work – with participants commenting that the participation in the study sparked conversations back at home about sharing of care, in turn leading to change.
Overseas, a range of behavior-change initiatives have been undertaken to encourage change in sharing of care:

- Awareness and training programs aimed at youth: these programs target young people to shift norms and behaviours around men’s and women’s roles at an early age, before these norms are fixed. For example, in India, the International Center for Research on Women developed the Gender Equity Movement in Schools (GEMS) program for teenage students. The program encourages relationships based on equality, examines social norms, and questions the use of violence. Students who participated showed changes in attitudes towards gender roles, increased support for a higher age at marriage for girls, and for greater male involvement in household work, as well as increased opposition to both gender discrimination and the use of violence.\(^{41}\)

- Training for fathers: training programs for fathers that equip men with skills in childcare and encourage men to form groups with other men who are participating in caring, have also had an impact overseas. For example, the Program P parent training program, implemented by the Rwanda Men’s Resource Center and Promundo provides training for expectant fathers. Preliminary results from a randomized controlled trial found that men in the intervention group shared care work more equally with their partners than men in the control group.\(^{42}\)

- Bringing more men into caregiving professions could also help to shift social norms by highlighting examples of men as carers and normalizing men’s caring role. It could also increase wages in this sector, as men’s participation in a sector generally increases wages in that field.
4. CONCLUSION

LESSONS LEARNED AND NEXT STEPS

Over the course of ActionAid’s two year study, ActionAid and partners identified some lessons that could be useful for future studies on unpaid care work. Some of the main lessons are:

- Community ownership: ActionAid’s study was community owned, and run in each district by facilitators from the district. This model contributed to greater understanding and buy-in from participants and facilitators. Detailed and comprehensive training for facilitators on unpaid care work concepts and the rationale for the program was a vital component in this research to ensure consistency across the results.

- Linking research to advocacy at local and national levels: at the end of each phase of data collection, communities organized meetings with local authorities to share the results of the time diary study in their location, and discuss existing or new initiatives that could be effective to address this. This resulted in some useful recommendations and actions.

- Resourcing and consistency: maintaining a consistent sample over the two years of the study was a challenge for the research team and for local facilitators, and resulted in the sample shrinking over the course of the study. Changes to the sample occurred due to changes in ActionAid’s programming, changes in local circumstances, and changes in the individual circumstances of particular participants. Future multi-year time diary exercises should ensure large sample sizes to ensure that changes to the sample do not impact significantly on the results.
As a next step, ActionAid will continue to support communities to advocate for improvements in gender-responsive public services, including working with relevant local and national authorities. At local level, communities are developing plans for further education, training and awareness-raising, as well as local level advocacy to address service provision gaps that exacerbate women’s unpaid care burden. At national level, ActionAid plans to further explore the nexus between unpaid care work, labour force participation and social security, looking into how unpaid care work impacts on women’s access to pensions and retirement benefits.

CONCLUSION

Redistributing unpaid care work requires action at multiple levels of society and the economy – from the household, to the workplace, to the District budget. Although the time diary study saw women reducing the amount of time they spent on unpaid care work, the redistributive effects of participation in the study were small. The most significant reductions in unpaid care work occurred between Phase 1 and Phase 2, but there was little change between Phase 2 and Phase 3, suggesting potentially that community discussions and increased awareness on unpaid care work resulted in an initial change, but not sustained significant changes: by the end of the study, women still did significantly more unpaid care work than men.

In order to redistribute unpaid care work, it is necessary to tackle the fundamental social norms and ingrained systems that maintain the ‘male breadwinner’ model and keep women in unpaid and undervalued care roles. Tackling those norms requires more than awareness and education – it requires investment of resources and a willingness to change policies and practices from government and the private sector. Only when change occurs both in the household and in society can gender equality truly be achieved.

Redistributing unpaid care work is also essential if Vietnam is to achieve the Sustainable Development Goals. Vietnam’s economic development requires the skills, talent and abilities of the whole population – both men and women. Women’s contribution to work, public life and the community is held back by the heavy unpaid care burden they carry – and this holds back Vietnam’s progress in sustainable development. Investing in redistribution of care work is therefore an important investment in the sustainable development of the whole country.
5. RECOMMENDATIONS

These recommendations follow on from, and build on, the recommendations in the two previous reports in this series: Make a House Become a Home, and What does it cost women for men to be the family’s backbone?

1. Investment in the care economy:

(a) The government of Vietnam should develop a strategy for investing in the care economy. This should include:

• Increasing funding to enable more places in crèches for children aged 3 months to 36 months in accordance with the Education Law.

• Exploring options for stronger training and registration mechanisms for home-based crèches to ensure that low-income women can access safe, high-quality childcare.

• Investigating alternative policy approaches to increase access to childcare, such as those implemented in Chile and Mexico, including subsidy schemes or other incentives to encourage the development of the private care economy in Vietnam. Investigation of these alternatives should consider how the maximum availability of low-cost, quality childcare places can be achieved while providing decent jobs for women at a living wage.

• Exploring policy options to increase support for long-term care of the elderly in the face of the ageing population, like increasing pensions for low-income elderly people, providing carer payments or community nurses, and addressing preventative healthcare.
(b) The private sector should play a leading role in the care economy. Private sector organizations should invest in family friendly policies to ensure that both male and female workers can balance paid and unpaid care responsibilities. Private providers of care services should ensure they pay living wages to their employees and encourage both men and women to take up jobs in the care sector.

(c) The government of Vietnam should consider ways to use laws and policies around family-friendly working conditions to incentivize men’s caring role, without undermining the necessary support for women who still do the vast majority of unpaid care work. Examples include increasing paternity leave, allowing transferability of maternity or paternity provisions, and instituting incentives for workplaces to allow flexible working arrangements for parents of both genders.

2. Infrastructure to support care work:

Local authorities should prioritize infrastructure projects that improve household access to water (such as installation of household water tanks and piped water) and improved fuel (such as rural electrification or cooking fuel subsidies). These initiatives should be mainstreamed into other rural development projects where possible, as well as being funded as stand-alone projects. Gender analysis of rural development and infrastructure projects should be undertaken to identify how these projects can support the care economy as well as the formal economy, and avoid reinforcing existing gender roles.
3. Training and awareness-raising:

(a) Government agencies, socio-political organizations (such as the Vietnam Women’s Union, Youth Union and the Fatherland Front) and social organizations should invest in training and capacity building programs for men and boys that challenge gender stereotypes around caring, reinforce the importance of shared care, and provide practical skills in parenting and housework for men. A starting point may be initiating and developing the “Father’s Caring Hands” program that is envisaged under Target 5.4 of Vietnam’s National Strategy to implement the Sustainable Development Goals.

(b) Government agencies, private companies and media outlets should collaborate on awareness raising initiatives to empower women and men to challenge existing social norms on gender roles and equally redistribute care work responsibility.
Participants only answered this question if they stayed at home during the day.


Uong Bi Women Development Fund (2016) Survey on evaluation of public kindergarten for children from 6-24 months in Phuong Dong, Trung Vuong, Thanh Son Ward, Uong Bi City. Unpublished


Ibid.


Note: figures for widowed, divorced and separated people removed due to too small a sample.


Ibid.


22 Ibid.

23 Ibid.


28 Ibid at p. 107.

29 Elson and Fontana, op cit.

30 Focus group discussion, Vinh Long, Batch 9.

31 Focus Group Discussion, Krong No (Dak Dro and Dak Xuyen Wards), Batch 7 and 8; Lam Ha, Batch 7 and 8.

32 Focus Group Discussion, Uong Bi, Dien Cong Ward, Batch 9.

33 Focus Group Discussion, Thong Nong, Can Nong Ward, Batch 9

34 Focus Group Discussion, Binh Than, Ho Chi Minh City, Batch 7.

35 Focus Group Discussion, Uong Bi, Batch 8.


38 Ibid.

39 Focus Group Discussion, Uong Bi, Batch 7.

40 To watch a video of Mr Tuan’s story, visit: https://youtu.be/G4zsytM-TIA


Data analysis and policy brief preparation by:
Fyfe Strachan, ActionAid Vietnam

Policy brief reviewed by:
Tran Thi Bich Loan, Gender Equality Department
Nguyen Phuong Thuy, ActionAid Vietnam

Executive Editor:
Hoang Phuong Thao, ActionAid Vietnam

ActionAid’s research signature:
‘People-centred evidence with women and girls at the core, combined with knowledge from in and outside the organisation, enables power shifts. This brings about changes at local, national and international levels.’
ActionAid’s solutions to address women’s disproportionate responsibility for unpaid care work can be categorized into three Rs:

**Recognition:** of unpaid care work means that the work done by (mainly) women is acknowledged by the women themselves and others. It also means that it is recognized as being “work” and “production”, as well as an important contribution to a country’s socio-economic development. Recognition can include providing compensation, recognizing unpaid care work in pension schemes, or measuring unpaid care work in national statistics.

**Reduction:** of unpaid care work means that the burden is reduced for individual women and for the society more generally. This can happen through the service being provided in a different way (for example, government-provided childcare or provided closer to where people live and work so that less time is spent accessing public services such as health care).

**Redistribution:** of unpaid care work means that the overall amount of unpaid care work remains the same, but it is more fairly shared among different people. One example of this is where male household members take on a greater share of housework and childcare.
ACTIONAID VIETNAM

Floor 5, 127 Lo Duc Street, Hanoi. Vietnam
Tel: +0243 3 9439866
Email: mail.aav@actionaid.org
Website: www.actionaid.org/vietnam