

Gender-Responsive Public Services and Young Urban Women's Economic Empowerment

A report on research in Ghana and South Africa



ActionAid's Young Urban Women: Life Choices and Livelihoods Programme (YUWP) works on young women's economic security, including unpaid care work, and bodily integrity. Using a human rights based approach to development, the project places a commitment to build the active agency of young women living in poverty.

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Foreword

Public services are essential to addressing the disadvantages and discrimination experienced by socio-economic groups that are excluded and marginalised. Gender-responsive public services -those that take into account and address the practical and strategic needs and priorities of women and men – are key to achieving gender equality. Such services can go a long way in meeting basic needs, improving access to justice, promoting economic rights and protecting bodily integrity. However, the provisioning of public services continues to face serious challenges including their ongoing privatisation and/or commercialisation. Fiscal austerity to reduce government deficits has been a cornerstone of public sector “reform”. Since government spending cuts have been highest in social services there has been a direct and disproportionate impact on women. When clean drinking water is not provided in a community, women and girls are most often the ones to travel long distances to collect water for their households. Poor public healthcare means that women and girls drop other activities to stay home with sick relatives as primary caregivers. If sexual and reproductive health services are not provided then many women and girls have to deal with unwanted pregnancies, unsafe abortions and increased care responsibilities. In short, women’s and girls’ labour substitutes public services when they are not available.

In Strategy 2028: Action for Global Justice, ActionAid International sets out to address the structural causes of violence against women while challenging a failed economic model that exploits their paid and unpaid labour. We are committed to securing economic and social rights for women and dismantling the patriarchal structures that systematically deny them. We also commit to working with others to increase civic participation and state accountability in the redistribution of resources, and the provision of gender responsive public services.

Over the past five years, we have been partnering with dynamic groups of young urban women in 7 cities in India, Ghana and South Africa through a programme that focuses on their economic security and bodily integrity dubbed ‘Young Urban Women: Life Choices and Livelihoods’. In 2016 we worked with the Institute of Development Studies (IDS) based at the University of Sussex in the UK to conduct research in Ghana and South Africa to examine the relationship between young urban women’s economic empowerment and the delivery (or lack thereof) of gender responsive public services (GRPS). We looked

especially at how this plays out in resource poor settings such as urban informal settlements. The idea is to challenge and expand the current discourse around women's economic empowerment to ensure that the structural barriers to women's economic justice are recognised and addressed.

The findings of this report show very conclusive links between provisioning of public services and young women's ability to engage in paid work opportunities. It also shows that the provisioning of GRPS is a critical but missing link that has the potential to economically empower young women. Many young women in Ghana and South Africa face multiple barriers to finding and maintaining a job in the formal economy, which reflects poor or lack of access to some essential services. In part, these barriers reflect and reproduce disadvantages and challenges that the whole population faces, such as unreliable water and electricity provision in Ghana, and spatial marginalisation of women, men and children in townships in South Africa. Yet they also have gender-specific impacts. In Ghana, lack or poor provision of services such as water and electricity affects businesses where women's economic activities are concentrated, such as hair and beauty salons, tailors and grocers. In South Africa, lack of access to safe transport means that women either cannot look for jobs beyond the township where they live, or when they do, they face daily insecurity and risk being attacked.

The report forms part of our effort to call attention to the most pressing issues related to young women's economic security. Access to quality, affordable and accessible gender responsive public services is a basic human right and the report puts forward a number of recommendations for duty-bearers towards delivering on this. As a global justice organization, we continue to work with women's rights organizations, social movements and other right-holders to defend the notion of public services as public goods and the central role of the state as the key to upholding women's rights while contesting harmful neoliberal paradigms and reasserting rights-based frameworks for development.

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Acronyms

| | |
|------|---------------------------------------|
| AAI | Action Aid International |
| FGD | Focus Group Discussion |
| GRPS | Gender Responsive Public Services |
| IDS | Institute of Development Studies |
| SRHR | Sexual Reproductive and Health Rights |
| WEE | Women's Economic Empowerment |

01

Executive Summary

Women's economic empowerment (WEE) approaches often neglect to consider both the unpaid labour needed to care for families and women's lack of control over their bodies. In doing this, WEE approaches risk disempowering women and girls, who are the main caregivers in most families, as they might be unable to take full advantage of available opportunities. Further, when programmes do not factor in the presence or lack of services and the reorganisation of unpaid care work when women enter paid work, other females in the family, such as younger girls and older women, bear the costs. A rights-based approach to WEE - one whose objective is economic justice - therefore needs to take into account the processes and barriers to young urban women's access to and participation in economic opportunities.

This research builds on ActionAid's Young Urban Women: Life Choices and Livelihoods programme. It aims to examine the processes by which young urban women engage in paid work without: deepening their time poverty; adding to their concerns about the quality of care that their families receive; without economic gains being eroded by costs of substitute care; and without overburdening other females in the household. The multi-faceted and complex inter-linkages between bodily integrity, economic security and unpaid care responsibilities are especially important to understand, as are the choices that young urban women make regarding the type of paid work they access, as well as increasing their capacity for autonomous decision making. This research aims to better identify the

positive linkages between access to gender-responsive public services (GRPS) and economic justice for women. It examines the potential of GRPS, including access to water, sanitation, health and childcare services, as enablers for young urban women's economic activities and the fulfilment of their rights, including their right to bodily integrity.

The research was carried out in Ghana's Ga West District and Johannesburg, South Africa. The peri-urban areas of Ga West District are densely populated, but lack sufficient coverage and quality of basic infrastructure such as water, electricity, health facilities, roads and transportation networks. In Johannesburg, fieldwork was completed in several townships located on the periphery of the city, taking more than two hours by public transportation to get to the centre of the city. Almost all households have access to basic services such as water and electricity; however, feelings of unsafety within these communities are strong and many of them lack roads or street lighting.

Key findings

Poor access to essential services

means poor access to decent work

Many young women in Ghana and South Africa face multiple barriers to finding and maintaining a job in the formal economy, which reflects poor or lack of access to some essential services. In part, these barriers reflect and reproduce disadvantages

and challenges that the whole population faces, such as unreliable water and electricity provision in Ghana, and spatial marginalisation of women, men and children in townships in South Africa. Yet they also have gender-specific impacts. In Ghana, for example, lack or poor provision of services such as water and electricity affects businesses where women's economic activities are concentrated, such as hair and beauty salons, tailors and grocers. In South Africa lack of access to safe transport means that women either cannot look for jobs beyond the township where they live, or when they do, they face daily insecurity and risk being attacked.

“ Mudiwa (27 years old) lives in the Ga West District in Ghana, with the highest population rate in the Greater Accra Region and a population growth rate higher than the national average. She has no access to running water in her house. Like all the women we met or interviewed, she needs to go outside to collect it. The burden of this task varies. Depending on whether the land on which the water access point is located is public or private, access may be restricted and available only during certain times of the day, resulting in long queues based on the time of collection. The time used for this task adds to the physical drudgery of collecting and carrying heavy loads on one's head from the water source to the home (several times each day or week), which frequently results in neck and back pains.

Mudiwa has a beauty salon at home and is waiting until she has saved enough money to open her own shop. In envisioning the salon she dreams of, she mentions water and electricity as the main challenges to open it. Electricity is needed to run the appliances and she will need water [already a struggle] to 'wash the towels, the roller: you use water for everything'. ”

Violence and stigma undermine economic rights

Other gender-specific barriers reflect links between violence against women and their economic rights. Women are disproportionately engaged in unpaid care work, which exacerbates their relative economic dependency on men, whose status as breadwinners (actual or ascribed) tends to justify

their persistent lack of participation in care work. This dependency means that many stay in violent relationships due to a lack of economic alternatives. Women also continue to be exposed to sexual violence and harassment everywhere, which constrains their mobility and capacity to maintain a job if this requires long journey times. The gendered stigma towards young single mothers, furthermore, constitutes for many young women an insurmountable challenge to finishing their education, thereby constraining their capacity to find a decent job even further.

Multiple factors cause poor access to decent work opportunities in the labour market

The challenges we describe unfold within a macroeconomic context that is characterised by stagnant if not regressive job creation, especially of decent jobs. In countries with rapid urbanisation, increased youth unemployment rates and persistent, ubiquitous patterns of gender inequality – entrenched, among other things, in the unbalanced organisation of unpaid care work, in women's unequal access to education and assets such as land, and in different forms of violence against women – lack of access to opportunities to enter the labour market most affects young urban women.

“ Karabo (22 years old) has a four-year-old daughter. She lives in Orange Farm Township, 45km from the centre of Johannesburg. She lives with her aunt, two cousins (female and male), her daughter, and her cousin's (female) three-year-old son. She and her cousin (female) are unemployed; her male cousin works as a security guard for a shop. Both young mothers receive a small child support grant from the government. Karabo's aunt helps and supports them by providing a house and meals, and covering the utility bills.

Karabo finished high school and has been looking for a job ever since. She found one but the pay was low and it was too far away – she had to quit after a month. Karabo is struggling to access other opportunities because of unreliable, unsafe and expensive transport. All the young women we talked to reported that trains are always delayed as well as being very unsafe spaces. Due to overcrowding on

the trains, young women are often sexually harassed. In addition, they also noted that when applying for jobs in Johannesburg they would use a different address to get hired, as companies are aware of the difficulties and would not hire someone coming from the distant townships. ”

The nature and extent of gender inequality in terms of unpaid care work burdens, lack of access to economic resources and public services put women at the greatest disadvantage in terms of protecting and promoting their rights. Young women are also specifically impacted by the stage in their lifecycle that they are at – bearing heavy and disproportionate burdens of childcare and household duties from as early as eight years old, which increase throughout their lives.

Many of the accounts that the women we interviewed related appear to suggest that the problem is mostly one of services that exist but are not easily accessible, either because of gender bias in their design and implementation or because of high costs or both. This finding illustrates how important it is for budgetary analysis to look at both planned and achieved inputs and activities

Summary of key recommendations

Many of the accounts that the women we interviewed related appear to suggest that the problem is mostly one of services that exist but are not easily accessible, either because of gender bias in their design and implementation or because of high costs or both. This finding illustrates how important it is for budgetary analysis to look at both planned and achieved inputs and activities. Gender budgeting is an effective strategy for ensuring that an adequate share of public resources is allocated

to services that contribute to the achievement of women’s economic rights and that such resources are effectively spent. The latter part of this report provides pointers as to what an effective gender budgeting process could look like. In addition, governments should:

- Invest in gender-responsive infrastructure and basic services to make them accessible and affordable to young urban women
- Improve the reliability and affordability of public transportation (e.g. decongest roads and create incentives for use of public transportation)
- Create and support initiatives to eradicate any form of gender-based violence at home, in the workplace, and in public spaces
- Build up sexual and reproductive health services and promote their use
- Non-state actors (such as non-governmental and community-based organisations) can continue to:
- Support initiatives that contribute to public officials’ awareness of the linkages between economic empowerment of young urban women and the allocation and use of public resources.
- Support young urban women in coming together to participate in formal decision-making processes, such as gender budgeting at local levels; in addition to lobbying the government for public services.
- Advocate for, create and support initiatives that contribute to reducing and redistributing women’s care work
- Support women and women’s groups and organisations in their struggle for rights, dignity and justice, including by advocating for GRPS, gender budgeting at local levels and changes in gender norms.

02

Introduction

This report explores the extent to which publicly provided services that are gender responsive, of good-quality, affordable and accessible have an impact on significantly reducing unpaid work burden and time poverty of young urban women, enabling them to access educational and livelihood opportunities. This in turn can open up greater economic opportunities for the young urban women and contribute to lifting them out of poverty.

Currently, women's economic empowerment (WEE) approaches tend to neglect unpaid labour needed to care for families and lack of women's control over their bodies. In doing this, WEE approaches risk disempowering women and girls who are primary care givers in most families. It is therefore important to understand the processes by which women can engage in paid work in a manner that also ensures their rights are respected and protected. This study accordingly follows a rights-based approach in examining the processes and barriers to young urban women's participation in economic activities. It aims to examine how young urban women can engage in the paid economy without deepening their time poverty, or worrying about the quality of care that their families receive; and without costs of substitute care eroding the economic gains of paid work; nor overburdening other females in the family. The study also examines the potential of gender-responsive public services (GRPS) as enablers for young urban women's economic activities.

ActionAid International (AAI)'s recent research on young urban women's empowerment (ActionAid



Photo 1 Public service mapping, Orange Farm, Johannesburg
Photo credit: Mar Maestre

2015a) highlights the linkages between bodily integrity and economic rights (including the right to decent work and the burden of care responsibilities). These linkages are especially important for understanding the choices that young urban women make regarding the type of paid work they access, as well as increasing their capacity for autonomous decision making. This research was situated within the existing AAI programme, Young Urban Women: Life Choices and Livelihoods, which was implemented in Ghana, India and South Africa. The report also shows the gaps between existing policies and their implementation, as they are barely impacting young urban women's lives. Young urban women were shown to be disadvantaged in accessing paid work opportunities because of lack of access to childcare services, water and sanitation services, etc. A key policy recommendation of the

study was to demand greater state investment in delivering GRPS – particularly focusing on childcare, water, sanitation and energy – in order for young urban women to overcome the constraints they face in achieving their economic rights.

The key hypothesis this study seeks to test is that improved access to GRPS can lead to young urban women's empowerment, by enhancing their access to the labour market, as well as ensuring that they have enhanced control over their own lives. This entails upholding their bodily integrity, including safety from sexual violence, and ensuring that their unpaid care work arrangements are supported. By understanding further the interconnections between young urban women and GRPS, it is hoped that programmes will be better able to make the case for more investment in GRPS that will lead to an economic empowerment that is optimised: in other words, women will be able to make real choices about when and how to participate in the labour market, without deepening their time poverty, compromising their bodily integrity or worrying about the quality and quantity of care that they and their families are receiving. Otherwise, lack of access to GRPS may constrain women's ability to access the labour market and therefore restrict the type, location and amount of paid work that they can do. In addition, optimising gains also means that costs of substitute care provision (including user fees on water, electricity, etc.) do not erode the economic gains from women's engagement in paid work.

Without consideration of women's roles in unpaid care work and their access to services, economic empowerment programming and policies risk emphasising individual women's responsibility and dismissing the importance of the redistribution of the cost of human and social reproduction across different institutions, including the state and the market. Moreover, when programmes do not factor in the presence or lack of services and reorganisation of unpaid care work when women enter paid work, other females in the family, such as younger girls and older women, risk having to bear such costs. Under such conditions, economic empowerment in one generation may not transmit into the next.

This research is based on ActionAid's ongoing Young Urban Women programme, that started in

July 2013 in seven cities in India, Ghana and South Africa. This project is designed around ensuring access for 5,800 young women (15–25 years) to their economic rights and sexual and reproductive health and rights. The project is a unique attempt to bridge existing programmatic silos between economic and sexual and reproductive health rights (SRHR) of young urban women. Rather than addressing SRHR or decent work and livelihoods separately, the rights framework conceived for this project is inclusive of young women's economic, social and sexual and reproductive rights.

The research aimed:

- To show how young urban women in our communities are impacted by lack of Gender Responsive Public Services.
- To make a clear and strong evidence-based case for investing on Gender-Responsive Public Services as a way to reduce young urban women's inequalities and as an alternative to the current narrative.
- To challenge and expand the current instrumentalist discourse around women's economic empowerment to ensure that structural barriers to women's economic empowerment are also recognised and addressed.

Research questions

The main research question is: How and in what ways can GRPS lead to young urban women's optimised economic empowerment?

More specifically, the sub-questions include:

1. What are the barriers and opportunities that influence young urban women's participation in the labour market?
2. What are the barriers that young urban women face in accessing the identified public services?
3. What factors influence the provision of GRPS in urban communities?
4. How and in what ways can institutions, policies and practices provide public services that can lead to young women's economic empowerment?

03

Research background

Policies and programmes that do not take into account the everyday structural barriers facing women risk to fail their economic empowerment. In order for WEE to be sustained and shared, programmes must achieve a positive balance between income-earning work, unpaid work caring for families and bodily integrity (AAI 2015: 19). Regardless of the share of household income women may earn as paid workers, in fact, they also do most of the unpaid caregiving (Elson 1995; S. Razavi 2007; Eyben and Fontana 2011). In contexts where the promise of achieving full sexual and reproductive health and rights is unfulfilled, women's access to decent work, therefore, remains limited and precarious.

The nature of the inter-linkages between bodily integrity, economic security and unpaid care responsibilities are not linear, but multifaceted and complex. Paid work has considerable value for women themselves and could constitute the basis for their empowerment, by which we mean women's capacity to have access to and control over secure income, choose the type of work they want to engage in, and voice their claims and aspirations for change. Having access to stable income-earning work is important for women's bodily integrity and economic security; for example, women are more likely to attend medical services when they start to work. Nevertheless, women's engagement in paid employment has not necessarily resulted in a significant change with regards to the disproportionate responsibility they bear for unpaid care work and household chores. ActionAid baseline

findings foregrounded the importance of a 'decent work agenda' for young urban women, with a focus on their economic independence, ensuring that they can make independent choices and take control of their lives. Indeed, the report noted that:

“ Women and girls living in poverty sometimes have to forego their basic human rights to an education, healthcare, decent work and leisure time in order to balance all these activities. This perpetuates gender inequality, reinforces inequitable gender norms and keeps women and girls in poverty.

(ActionAid 2015a)

ActionAid's research on the interlinkages between bodily integrity, economic security and equitable distribution (ActionAid 2015a) show that young women's lack of sexual and reproductive health and rights and the disproportionate burden of unpaid care work impinges on their agency and wellbeing and impedes their access to decent paid work.

Heavy and unequal care responsibilities, compounded by lack of bodily integrity, contribute to time poverty, limited mobility and poor health and wellbeing. They undermine the rights of women, limit their opportunities, capabilities and choices and often restrict them to low-skilled, irregular or informal employment (Chopra 2015; Kabeer, Mahmud, and Tasneem 2011; Shahra Razavi 2007). Low incomes and irregular employment for women have knock-on effects for families, because

women tend to use their income for the health, food security, education and wellbeing of their children (Grassi, Landberg, and Huyer 2015). For the women themselves, the impact is to undermine progress towards gender equality and to entrench a disproportionate vulnerability to poverty (Carmona 2014).

Gendered analyses of labour markets have proved that the urgency and routine necessity of care-giving, particularly for small children, means women typically 'choose' types of paid work that allow them to accommodate care responsibilities, including direct care of children as well as indirect activities (cooking, cleaning, fetching water, procuring food) that contribute to it. Lack of access to sexual and reproductive health services means that women might be unable to decide whether and/or when to have how many children throughout their lives. In turn, in a context where childcare is disproportionately borne by women, lack of control over their bodies and sexuality clearly affects the amount of unpaid care work that they would have to undertake, as well as the types of paid work that they can engage in and sustain over time. This means that, unless direct and indirect care activities are reduced and/or redistributed, women will tend to:

- Crowd into low-paid, low-skilled, unorganised occupations;
- Drop out from better-paid work for 'flexible' arrangements when they become mothers;
- Rely on older women and children, typically daughters, to care for small children;
- Resort to poor-quality childcare arrangements that may be unsafe or inhibit early childhood development (see Kabeer 2012); and
- Have limited benefits from paid work, with high costs associated with direct and indirect care tasks, such as crèches, water, electricity, fuel and food.

Where programmes and policies neglect care and fail to consider that women don't have their rights to bodily integrity fulfilled¹, net programme gains may be:

- Limited, as women may drop out or fail to take full advantage of the opportunities available,

or physical and time pressures may mean that women experience disempowerment, or economic gains are eroded because of the cost of basic services; and/or

- Individualised, rather than shared: it is often the case that an older or younger woman or girl replaces the mother in the care of small children; and/or
- Unsustainable, because poor-quality care or insecure bodily integrity are likely to have lasting adverse impacts on women and girls' cognitive, educational and therefore economic prospects.

Increased employment opportunities will not guarantee decent working conditions and can in turn have an adverse effect on women's bodily integrity; for example, by failing to provide maternity leave, dispute resolution processes – especially around sexual harassment at work – or social protection more generally. Rather, solutions to address the unbalanced distribution of unpaid care work across the 'care diamond' (Razavi 2007) – which includes the household, the state, the market and the community – need to be devised. These include a shift in current public policies from a privatisation drive, to an increased investment in the public delivery of accessible, high quality and affordable gender-responsive public services.

Public services are considered essential for the achievement of human and economic development goals, and associated with fundamental human rights. They are designed to promote social cohesion and solidarity within societies; and promote equity by addressing disadvantages or discrimination that excluded and marginalised socio-economic groups experience. Public services can either directly fulfil basic needs, provide access to justice or promote political participation. In this context, GRPS are public services that take into account and address the practical and strategic needs and priorities of women and men. GRPS go beyond ensuring that women and men have the same access to, use and control over public services. A GRPS approach asks whether the delivery, access and use of public services empowers people to challenge forms of gender inequalities and unequal power relations, while

¹For example, ActionAid's 2015 multi-country research on the inter-linkages between economic security, bodily integrity and unpaid work found that there were links to be found between independent incomes and young women being able to engage in consultative decision-making on their sexual and reproductive health, or to contest violence.



Photo 2 Public service mapping, Johannesburg
Photo credit: Mar Maestre

improving women's lack of control over resources and public services. These services can range from the provision of water and childcare, to adolescent sexual and reproductive health services or access to energy and infrastructure.

This research was conducted to gather evidence on the links between GRPS and women's economic rights specifically in relation to young urban women's bodily integrity, economic security and unpaid care work. Its aim is to assess the ways in which GRPS can lead to economic empowerment of young urban women.

Young urban women: background

In countries with rapid urbanisation, increased youth unemployment rates, and persistent, ubiquitous patterns of gender inequality – entrenched among things in the unbalanced organisation of unpaid care work, in women's unequal access to education and assets such as land, and in different forms of violence against women – young urban women will be the most affected by lack of access to opportunities to enter the labour market. The nature and extent of gender inequality in terms of unpaid care work burdens, lack of access to economic resources and public services put women at greatest disadvantage in terms of protecting and promoting their rights. Young women are also specifically impacted by the stage that they are usually at in their lifecycle: bearing heavy and disproportionate burdens of childcare and household duties from as early as eight years old, which increase throughout their lives.

Interlinkage of gender discrimination and lack of opportunities have an impact on young urban women's sexual, reproductive and economic rights. The urban context is a critical component of the research given rising urbanisation rates across Africa and Asia. Since 2008 more than 50 per cent of the world population – over 2.5 billion people – live in urban areas and it will grow to 75 per cent by 2050; 90 per cent of the new urban dwellers expected by 2050 will live in Africa and Asia. In these regions, many informal workers operate and reside in urban informal settlements (Roesel and Grace 2015). Where urban areas provide opportunities for greater access to employment and public services, they can also be sites of exploitation, particularly for young women living in poor urban areas.

Young urban women often struggle against conditions that hamper their bodily integrity, such as forced marriages, intimate partner violence, inadequate access to toilets and washrooms, restricted movement and sexual harassment on the streets and at their workplaces. The full realisation of a young woman's bodily integrity depends on adequate education, basic infrastructure, social protection and human rights measures at workplaces, enabling young women to access health care, legal support and related services, child care and sharing of unpaid care work, among others.

Many of the women with whom ActionAid and partners work are employed in the informal sector, with few or no rights at their workplace. This is accentuated by the lack of access to child care and education facilities; very few respondents from Ghana, for example, had access to free or low-cost child care.

However, despite struggles to secure sufficient economic resources, it would be a mistake to assume that young women simply succumb to poor treatment and sexual harassment at work. Rather than lodging complaints, instead they leave jobs in the formal sector and generate income from other sources in the informal economy, such as selling food, soap, etc. In this context, their ability to achieve greater economic security would be greatly enhanced if the state provided better infrastructure and quality services especially in the sphere of child and health care – in other words, GRPS.

04

Methodology

This research used a mix of primary and secondary data. Secondary data comprised project reports from country teams, as well as budgetary information from the respective countries.

We used qualitative methods to collect primary data. We undertook a mix of semi-structured interviews of young urban women, key informant interviews with programme and service delivery staff, and participatory tools undertaken in the context of focus group discussions (FGDs) with women.

Individual interviews with women

In each country, we interviewed women who had participated in the AAI programme and a few non-participant women. This was done to identify any differences between participant and non-participant women's articulation of their engagement in care and paid work, and their economic rights. The sample was based on the following criteria in the table below.

A total of 17 women were interviewed across the two countries (see Annex I).

Qualitative interviews with women lasted between one and one and a half hours. They consisted of three modules. In the first part of the interview we compiled a time use diary by asking women to describe the activities they would do on an ordinary day in their life. This first of all entailed exploring their care work responsibilities within the household

where they lived, as well as eliciting indirectly those of the other household members, by looking at issues of time use, intensity, physical burden, psychological pressure and costs. We put particular emphasis on the links between the activities that women narrated, and the presence/absence, quality, accessibility and affordability of essential services such as water, electricity, childcare, health facilities and transportation. In the second part of the interview we asked women to respond to a set of questions that addressed:

- Women's experiences in paid work: types of work, schedule, working conditions;
- The interaction between paid and unpaid care work: time and household arrangements, transfer of care, use of services;
- The interaction between women's economic and sexual rights: issues around gender-based violence, sexual harassment at work and sexual violence in public spaces, access to family planning information and methods;
- Gender norms affecting women's paid work: gender roles and the gender division of labour in care work; gender pay gap; role of the state in reproducing or challenging the status quo;
- Barriers that women face in identifying specific services mentioned during the ranking exercise (see below) and suggestions to make them more gender-responsive in terms of location, cost, accessibility, responsibility.

In the third and last part of the interview, we asked women if they wished to share a 'story of change'

illustrating a more or less successful attempt at modifying their access to, or use of, a service or an activity which they deemed important. This third part did not bear much insights inasmuch that the AAI project had not specifically worked on women's access to public services, and therefore it was difficult for women to identify relevant instances of change.

Table 1 Research participation criteria

| Criteria | Remarks |
|---|---|
| Have participated or not in the ActionAid Project | All FGD participants and interviewees, except those purposefully targeted |
| Working status | All should be engaged in paid work, whether outside of their home or home based |
| Aged 18–25 years | Women who were aged 15–25 at the time of project start (2013) |
| Have children | The sample should include women who have children aged 0–10 years and women who are not mothers |

Focus group discussions with women

Four FGDs were conducted in Ghana and four in South Africa. Each FGD involved 8–12 women² from different communities that the AAI programme has targeted. Within each, we discussed different dimensions of the interplay between care and paid work, focusing on the services that women valued and/or used in their ordinary lives. For this purpose, we used a range of participatory tools that we chose and/or adapted on the basis of participants' profiles and experiences of paid work.

In each country, we first held a focus group that included women from different communities, backgrounds and civil and working status (as per the sample criteria in Table 1 above): married women, single mothers and women without children; entrepreneurs, workers and unemployed women. We initially asked them to describe the community they lived in through the services they used in their daily life (i.e. the public service map exercise) and subsequently they identified and discussed collectively which service they valued most according to a number of criteria, based on a five-point scale, as follows:



Photo 3 Mapping the impact of care on to the body, Ghana
Photo credit: Mar Maestre

- **Accessibility:** women here talked about their views on the distance to the public service under discussion; their safety in accessing it; gender-, sexuality- and/or race-based constraints;
- **Affordability:** the focus here was on the cost of services, ranging from gratuity to exclusiveness (i.e. from free to very expensive);
- **Relevance:** women assessed the perceived usefulness of the service in their day-to-day life and work routines. If the service did not exist (e.g. community health-based facilities), we asked them to project this question on to an ideal or next-best scenario (e.g. 'Would you consider that having X in your community would be useful in the way you balance care and paid work?').

Once we had finalised the assessment matrix, we asked them to identify one service only by asking them 'If you could choose to improve/introduce one service to ease your day-to-day life, what service would it be?' (i.e. the ranking matrix exercise). We took the outcome of this discussion as a roadmap to understand the relevance of different types of services to women's dual engagement in care and paid work, and triangulated it during our interviews to check its relevance and nuance its strength to reflect women's different positions.

In addition to these two exercises, which we repeated in most FGDs, we also used the care body map exercise, which aimed to understand how the sum of unpaid and paid work affects women's bodies and wellbeing.

²In one case in South Africa there have been more than 20 YUW attendants.

Individual interviews with key informants

In both countries we interviewed key staff involved in the AAI programme and district-level public employees working in the sectors and domains of interest: water, electricity, gender, labour and welfare. In South Africa, however, the proximity of our fieldwork to summer holidays, compounded by a broader elusiveness of public offices contacted, resulted in our inability to interview as many of the stakeholders as we had wished to. We interviewed a total of nine stakeholders in Ghana and six in South Africa (see Annex I). Qualitative interviews with key informants lasted between 45 minutes and 1.5 hours, and revolved around their involvement in the project and/or in the provision of services that affected women's dual engagement in the sphere of care and paid work.

Ethics

Interviewees and participants for FGDs were identified by AAI. Although their consent was, therefore, already implicit in their attendance, we nonetheless began each research activity with a detailed presentation of our ethical principles and procedures, enshrined in a consent form that both we and our interviewees signed (Annex II). In order to maintain confidentiality, interviewees' names have all been anonymised, and sensitive information either removed or modified to avoid their identification. Overall, compliance with IDS Research Ethics Policy (IDS 2015) and AAI Ethical Research Principles and Guidelines (ActionAid 2015) has been maintained throughout.

Research locations

The research was carried out in two of the countries of implementation of the Young Urban Women programme.

In Ghana, the young urban women project is implemented in the Ga West District, which has the highest population rate in the Greater Accra Region. More precisely, the project's activities revolved around Kpobiman, where the Young Urban Women Resource Centre is located, although it attracted and involved women from a number of surrounding communities. The Ga West District is urbanising

rapidly as a result of the expansion of the Accra metropolis and Tema municipality, and its population growth rate, which is higher than the national average, reflects this region's attraction of significant flows of internal migrants (Iddrisu, Sedegah, and Yakubu 2015). Communities and areas like Kpobiman moved from being rural to peri-urban, and from scarcely to densely populated. However, the coverage and quality of basic infrastructure such as water, electricity, health facilities, roads and transportation networks, seem unfit for the needs of an expanding population whose livelihoods mainly revolve around finding work in the city. Clearly, this situation heavily affected how the young women this program targeted fulfilled their share of care work, and were able to seek and/or retain different types of paid job.

In Johannesburg, the AAI programme worked with multiple townships around the city, aiming to enrol 1,000 young women from both cities (Cape Town and Johannesburg). In Johannesburg, townships are often located on the periphery of the city, often taking more than two hours on public transportation



Photo 4 Public service mapping, Orange Farm, Johannesburg
Photo credit: Mar Maestre

to get to the centre of the city. Johannesburg is a city that attracts migrants from within South Africa and from neighbouring countries, with an increase in international migration of 9.8% since 2011 (ActionAid 2015b). Almost all households have access to basic services such as water and electricity, however, there are strong feelings of unsafety within these communities, many of them lacking roads or street lighting. For this research we visited Diepsloot, Orange Farm and Braamfontein (located in the center).

05

Linking women's economic empowerment and public services: research findings

Ghana

Ghana's population has grown from four million in 1950 to more than 25 million in 2011, and has been projected to reach 50 or even 60 million people by 2050 (Vidal 2011). In recent years, the economy has grown at a very rapid pace: by 7.3% in 2013 and a slightly lower but still robust rate of 4.2% in 2014 (Okudzeto, Lal, and Sedegah 2015). At the same time, economic growth has not reduced inequality and youth employment prospects are particularly dismal: 'up to 60% of young people in developing regions are not working nor in school, or only have irregular jobs' (UNFPA 2014). A significant part of the population in Ghana is below 25 years old: 38.9 per cent are 14 and under, and 18.9 per cent are aged 15–25. Furthermore, according to the 2014 Ghana Demographic and Health Survey, 5.4 per cent of urban women aged 15–19 and 11.6 per cent aged 20–24 have a child (GSS and GHS 2015). The majority of women aged 15–24 years are either self-employed without any employees, contributing to family work or looking for work for the first time (GSS 2009).

Most of the women who participated in FGDs and/or we interviewed worked either as self-

entrepreneurs or employees and just a few reported being in search of an occupation.³ Putting women's voices first, in this section we will describe how the presence or lack, quality, and/or affordability of a number of services that they deemed relevant to their everyday lives impinged on their dual engagement in care and paid work, and therefore, on their pathways to economic empowerment. We have arranged them in descending order of relevance based on the ranking exercise subsequent to the public service map (see Methodology) that we undertook with women on our initial day of fieldwork in Kpobiman.

Electricity and water

These were ranked as the most important services by the women with whom we undertook the first public service map. The women discussed how the two services were intrinsically interrelated in their experiences of undertaking and balancing care and paid work. Both are central to different types of care activities that women are mostly responsible for: cleaning the house, cooking and preserving food, washing the house and clothes, bathing babies, etc. The more the time women invest in these activities, the less time they can therefore spend

³This observation reflects one of the fieldwork criteria we set (see Methodology). It should not be taken either as an indicator of employment rates or of labour market distribution.

on a range of others, including paid work, leisure and rest. Electricity and water are also central to many activities that women undertake as self-entrepreneurs. We next discuss the barriers that women faced in accessing both these services.

Electricity

Ayodele (26 years old) is married and has a small child. She runs her own shop in a peri-urban settlement away from her own, which she reaches daily with the help of her husband, who owns a private motorbike. Ayodele's business is a hair and beauty salon, akin to those that many other women we met or interviewed either worked in or were saving money for in the hope of opening one of their own. In the quote below, she describes how poor provision of electricity in Ghana affects the return on her work:

“ Due to our electricity system, we've had quite a problem, I don't know if you know about it... Sometimes for three days without any power. And you know, I'm a hairstylist, a beautician, so in my shop I need power to work. If there's no light, there's no production, no productivity. Even you have to close the shop! Because you have to use electricity to do the drying, the tonging... even just to turn the light and the fan on... When power cuts worsened, lights were going on and off constantly, on, off, on, off, like five or six times [in a day]. And before you realised it, maybe your dryer has blown... because when the electricity comes back, the voltage is [too] high, it spoils your equipment... and you have to get a new one. ”

During FGDs, some women reported that electricity supply is 'more expensive than rent.' Although its high cost and unreliability are not gender-specific problems, they affect women's daily lives in specific ways. As the quote above suggests, they affect businesses such as Ayodele's, in which women typically prevail. Other women self-entrepreneurs who worked as tailors described the high cost of electricity as a bottleneck preventing them from buying new and faster machines. The high cost of electricity also reduces the likelihood that women can afford technologies that would reduce the time they ordinarily invested in care activities such as cooking (e.g. availability of fridges) and doing the laundry (e.g. availability of washing machines).



Photo 5 A seamstress runs her business from a container, Ga West District
Photo credit: Helen Quansah

Our respondents' attitude towards the lack of electricity blended fatalism and anger. In general, the perception was that it constituted an entrenched problem of which the real causes were unknown, but which severely affected the livelihoods of poor people who pay for it on a pay-as-you-go basis, rather than being on a contract. For example, Ayodele recounted that:

“ [a]cross the country, everybody was complaining of the utilities bills. Because everybody's using pre-paid [electricity]. Those of us who pay it after usage, we can discuss the bill at the office, and they'll make you questions, ask clarifications. Some they'll even tell you 'we are sorry'; some do not do anything about it. But those who are using the pre-paid service, they recharge [their account] in the morning... and the light goes off even before they go to work: finished, credit is gone. ”

Other women related similar problems to us. For example, Mudiwa (27 years old) works as a hairdresser at home and is waiting until she has saved enough money to open her own shop. In envisioning the salon she dreams of, she singled out electricity and water as the main challenges that she would have to face were she to open it. Electricity is needed to run the appliances on which the service itself relies. She would also need a lot of water to 'wash the towels, and the roller too: you will use water for everything'.

During our fieldwork we were not able to speak to public officials involved in the management and supply of electricity.

Water

Mudiwa faces various problems accessing water. As with all the women we met and interviewed, she does not have access to running water in her home, and therefore needs to go outside to collect it and store it. The burden of this operation varies among other things on the basis of the distance of the water source from the women's homes, as well as the means of accessing it.⁴ In fact, depending on whether the land on which the water access point is located is public or private, access to water might be restricted and available only at certain times of day, resulting in long queues based on the time of collection. The transaction time wasted in this task adds to the physical drudgery of collecting and carrying heavy loads on one's head from the water source to home (and possibly several times a day or week), which – as women described during participatory exercises – frequently resulted in neck and back pains.

Moreover, different technologies to access water demand different degrees of physical effort from its collectors, who overwhelmingly are women. Some water points are taps attached to pipes, while others are wells, only some of which have electrical pumps. The relatively higher comfort of these latter, however, is partially offset by the higher price per water unit that users have to pay to cover the cost of electricity that the facility providers have to pay: 'The water too has become expensive, because at the end of the month you have to pay an electricity bill for the water that you've pumped,' said Ayodele. The frequency of electricity cuts in Ghana therefore also affects the overall accessibility of water.

During our fieldwork we met with district officers in charge of water and sanitation who stressed that the policy of the government is to make clean water accessible and affordable to the communities. However, the state company, Ghana Water Company, is responsible only for the provision of water to the urban areas, whereas a community water and sanitation agency takes it to rural and peri-urban areas. The situation that we encountered, therefore, partly reflects the high cost of building

infrastructure in less densely populated areas, in a context of insufficient public resources invested in this sector,⁵ as related by one of our key informants, describing how the state responds to different communities' needs:

“ Normally we first look at their source of water, at the type of water that they are using. If they don't have water at all, then there is need for us to provide them with a borehole, water. So we go there and engage in community water consultations. Sometimes community members will say that our scheme is OK, but that they need a toilet facility: so we look at their felt need, and we provide what they need the most. Sometimes there is a problem when we have two communities [that] need water and we can only assist one. So we will first serve the community where there is no water at all or the water is polluted and it is densely populated, and after we go to the other area. ”

Information gathered from different key informants also suggests that there is an ongoing wave of privatisation of essential services, beginning from water and waste collection, and ending with land itself, which is being sold to private developers. However, more in-depth research would be necessary to confirm this impression to identify and show the link between the human and gendered costs of privatisation. Nevertheless, it is clear that for the women we interviewed and met in Kpobiman, accessing water contributes significantly and disproportionately to their physical and time burdens.



Photo 6 Water and sanitation facilities in Kpobiman, Ghana
Photo credit: Mar Maestre

⁴It also depends on the season of the year and the type of roads leading to them (e.g. in the rainy season, unpaved roads become muddy and slippery, making water collection harder).

⁵See, for example, Chan and Ameyaw (2013: 251), who found that 'under-investment by government is the major cause of the ill-performance' of the water supply sector'. From our interviews we also sensed that investments in this sector are highly dependent on external donors' funding.

Health services

Women ranked improved accessibility to public health facilities as very important. They lamented the time and money they spent in reaching the existing one, which was far from Kpobiman, as well as the dismissive attitudes of health staff – whom they nonetheless acknowledged to be overburdened with work. For example, Ayodele recounted that differently from Kpobiman:

“ Other communities have a Centre for Health Workers. There aren’t doctors, but maybe there is a nurse, a midwife, a pharmacist. They do not treat emergency cases – for that you have to go to the district – but they provide small medications, for headache, or malaria, or maybe antenatal care... [If we had a health centre] we would no[t] have to take a car and go to the hospital and stand in a long queue just for a common cold, because that also puts pressure on the hospital, because everyone in the community goes there and it’s a lot of people... and this sometimes irritates the health worker[s], because they have to take care of people who are seriously sick or need immediate attention. ”

As it is women who are primarily in charge of caring for sick household members, the financial and time burdens entailed in reaching distant healthcare facilities, or caring for sick people at home, affect them disproportionately. In turn, this situation encroaches on their overall capacity to balance their care and paid work tasks.

Transportation

Ndidi (25 years old) is a single mother who recently began to work at a community health centre, while her own mother – with whom she lives – takes care of her small child. The salary that Ndidi receives is small and she prefers to walk to work rather than spend money on transportation: ‘When you get into work, you are already tired’. She continued: ‘if the salary was higher, I would take a car [shared taxi], transportation, [or put my child in] commercial care’, but for the time being, she ‘wake[s] up early in the morning and [when] the sun is not out yet, I walk to work.’ On her way back, though, she takes a shared taxi.

Ndidi’s choice to rely on private transportation to go home partly reflects the lack of an extensive and/or reliable network of public transportation. In part, however, it also reflects her personal safety concerns, in a context where most women reported preferring to reach home before it gets dark.

There are strong linkages between access to affordable, reliable and safe transportation and women’s dual role in care and paid work. Firstly, the time spent on transportation to and from work reduces the overall time that women have to engage in other activities. This is further exacerbated in contexts where the provision of transport is unreliable for a number of reasons, including congestion. Hence, Gbemisola (22 years old), who is doing an unpaid internship at a health facility, shares a taxi to work every day to make sure that she does not arrive late:

“ Taking a public transport is really tiring... We sit in the bus, and then depending on where are you sitting, if somebody has to alight, you have to get up for the person to go out, and then go back in, sit down... And it’s usually hot, especially during this weather, in the dry season. And then there’s traffic. You sit in the heat for a long time... And at the bus stop they [the drivers] are not supposed to wait for a long time, but some might do it... they’ll stay there waiting for people to come, even when there’s no one at the bus stop. So if you are already running late to work, then by all means you will be. That’s why you have to wake up early, and make sure that you do everything [your house chores] earlier. So that even if they’re delayed you’ll still get there [to paid work] on time. ”

As the quote above suggests, to accommodate her care and paid work responsibilities, Gbemisola needs to stretch her day, as well as spend more money on (private) transportation to make sure that the distance from her house to town does not affect her chances of moving from an internship to a permanent role.

On another level, gendered mobility constraints and women’s fear of travelling home when it is dark constrains the geographical range within which they can look for paid work, overall diminishing the likelihood they will find it. Both these constraints emerged clearly in the interview with Aisha (24 years

old), a single mother who lives with her older sister's family, following the death of both their parents. Due to support provided by the Young Urban Women programme, Aisha now works in construction, an unconventional job for a woman. At the time of the interview, however, she was being discriminated against for this gendered transgression: firstly, by being paid less than her male peers; and secondly, because prevailing gender norms and fear of sexual violence meant that she had to spend a higher share of her time and salary on transportation:

“ *[the employer] pays the guys 60 cedis a day. But because I am a lady, he pays me [only] 40 cedis. So there is a 20 cedis gap. And the guys, because they are guys, they can sleep at the work site, so they also save their transportation [money and time], but I am a lady, [so] I can't mix with them and every day I have to come back home.* ”

Her journey back home in the evening, however, is potentially dangerous and unsafe. Indeed, she recounted witnessing a violent act of robbery against a woman, which could have happened to her:

“ *I was coming back from my workplace and when I reached a crossroads I saw two guys standing on the road. I thought 'Ah-ah, what are they doing over there?' A part of me thought I should go and another was saying not to, to stay back. So I stood there for, like, five minutes, and I saw another lady passing by. I saw the guys questioning her. Then [the] next thing I saw was that they knocked her down and they took her phone and her bag. They took everything and they left... So if I come back home late from work, I have to go into town and walk from there to my house... because on the other [shorter] road there is no street light, so when you get there the place is very dark.* ”

Aisha subsequently suggested, 'if there were street lights, I think it will help reducing the risk'.

During FGDs, women voiced ambivalent attitudes towards the role of the police in their community. On the one hand they wished there were more officers in their community to enhance their perception of safety. On the other, however, they complained

about widespread corruption, suggesting that the attention of individual policemen is sensitive to citizens' (in)ability to pay them an 'economic incentive'. Although an investigation of sexual violence was beyond the scope of our research, it is plausible to hypothesise that women's access to law enforcement might be partially informed and constrained by men's – and therefore also policemen's – sexist and patriarchal attitudes, which women widely reported, and we observed during fieldwork.

Safety from sexual harassment, violence and gendered stigma

The link between WEE and bodily integrity, economic and sexual rights, emerged recurrently during our interviews and FGDs. During one of these discussions, a woman reported that her employer had sexually harassed her and punished her for daring to speak out against him. Indeed she, rather than he, was moved to another office following her complaint. As a result she was unable to keep the job due to longer transportation time and higher costs. Other women reported how men used their economic privilege and power to demand sex from women. For example, Aisha said that:

“ *some men will sexually harass you, and maybe say that 'if you have sex with me, I will give you the job.' And because some women don't have any option, or maybe they need the job, they will give themselves out to get it.* ”

Women's relatively lower bargaining position in sex also exposes them to the risk of teenage pregnancy, thereby entering into a vicious circle that constrains their livelihoods further. As Jayde said:

“ *There's a lot of teenage mothers in the community. And the main problem is that the mothers of these teenage girls don't have a good job, they are not employed. So their children want to go out there and make a living for themselves, and then in the process they meet men who deceive them and get them pregnant.* ”

Most women spoke of the gendered stigma and ostracism that surround teenage mothers, which prevent them from continuing their education, and

contribute to constraining their future livelihood options to low-skilled and low-paid jobs, or marriage. When we asked Gbemisola why it was that we mostly saw women selling items – especially food – on the street, she established a neat link between women’s exclusion from formal paid jobs, discriminatory gender norms and poor education:

“ *I think part of the problem is in the culture. So it seems that it’s believed that women are housewomen. So, the husbands of women who did not go to school and are unemployed, expect them to do all the household chores, and get everything ready, take care of the children... And, I mean, after you’ve cleaned the house and did everything, you can’t just sit in the house all day long, so women might decide to go out and sell [food]. I also think it’s due to teenage pregnancy: if a girl drops out of school and she is not highly educated, the only job that she can do is to sell [in the streets] to support themselves. Most companies do not hire them for any jobs.* ”

We asked why not:

“ *Maybe because they don’t have the level of education needed to do the work.* ”

Or, we suggested, maybe it was because they blamed the woman for being a single mother:

“ *It’s true, they don’t blame the men at all. The woman is stuck with the child, while the man is free to work. But if both took care of the child or arrange a timetable in a way that both can work and take care of the child or the children at the same time, then you’d see fewer women out on the streets selling. And maybe if you suddenly dropped out of school because of teenage pregnancy, and the man helped you to go back to school and learn again, and get the same qualification as men have.* ”

During our interviews and discussions with key informants on the difficulties that women faced in employment, we observed a widespread attitude of blaming women either for transgressing chastity norms or for being unable to ‘catch up’ after

pregnancies.⁶ Interviewees seemed to be unaware of the structural constraints within which women’s lives unfold across their life stages, including fewer opportunities to access and control a monetary income in relation to men, and their greater caring responsibilities. Failure to consider these structural constraints overlooks how gendered stigma around sex and sexuality curtail women’s freedoms and opportunities; and contribute to reproducing unequal relations of power between men and women.

Crèches

Although we expected a demand for crèches to support mothers’ engagement in paid work, this request did not emerge during focus groups nor in-depth interviews. This seems to suggest that however burdensome, women manage to cope with the task of caring for young children by relying on the network of their female relatives until they can send the children to public schools, which reduces the time that they spend with their children during the day, but does not eliminate their childcare responsibilities. For example, Ayodele recounted that she splits care of her small baby with her 12-year-old sister: ‘I am taking care of the child, or my little sister comes to the shop and helps me.’ When we asked her whether these responsibilities affected her sister’s educational pattern, she said that her sister attended school regularly, and helped her only for a few hours in the afternoon: ‘She comes after school, after 2:30, and helps me to carry the boy, so by 5:30 I leave the shop.’ Her sister’s help, though, did not go unreciprocated. When we asked Ayodele what she thought the reasons were for her sister’s help, she framed it within a tight net of kin reciprocity:

“ *She helps me... I don’t know why, but she helps me because... I don’t think I do anything special for her in exchange... Sometimes she needs something for the school, maybe money for the school fee...]Or I go to the shop and give her some clothes. Sometimes I also help her doing her homework, if she has a question or she does not understand something, I help her with that... And then I also take care of her too, if she needs advice... I tell her that she can*

⁶These informants included various officials in public offices – as outlined in Annex 1.

do it in this or that way. And I think it's because I've been telling her that I took care of her when she was little. When she was born I was about her age now and I took care of her. So I tell her that if she doesn't take care of my child I will not take care of her when she gives birth herself! [She laughs.] So I tell her that we are working hand in hand. She does help me with the baby, but it's not all the time. ”

Far from romanticising the family as a conflict-free unit, or childcare as an effortless labour of love, this quote suggests that unlike other essential services (e.g. water, electricity, health, transportation), women we interviewed managed childcare through non-monetised exchanges, resulting in its lower financial burden on everyday household expenditures. This observation does not contradict the relevance of the provision of free-of-charge and good-quality crèches,⁷ as women lamented the poor quality of existing ones, which, however, were private and therefore eroded the income that women got from paid work. Instead, it suggests that if given the chance to intervene to improve a service they deemed relevant in a context of scarce financial resources, women seemed to prioritise services that they were already paying money for and/or that they would continue to rely on throughout their lives rather than for just a few years and that they could not organise through non-monetary arrangements.

South Africa

South Africa's growth has not been as rapid as Ghana's, though it has been strong and steady since apartheid, and until the global economic recession that began in 2008 (World Bank 2014). South Africa 'remains a dual economy with one of the highest inequality rates in the world, perpetuating inequality and exclusion.' (ibid., 2017) With a highly urbanised population comprising mostly young people, South Africa's government struggles to address unemployment. In addition, the unemployment rate for young people aged 15–24 years increased from 45.6 per cent in 2008 to 51.3 per cent in 2014, constituting the largest increase among all age groups.



Photo 7 Public service mapping, Johannesburg
Photo credit: Mar Maestre

South Africa is one of the countries whose constitution is often touted as comprehensive in protecting human rights.

Despite this and the accompanying progressive legislative framework, the birth of a new South Africa has not resulted in a radical transformation of the lives of poor people, and although women's rights are recognised, poor access and quality of services hinders young women from improving their livelihoods.

The urban context in South Africa is hard for many young people. The majority of the women we engaged with had been looking for a job for the past one to three years or had just started an unpaid internship, hoping to get full-time employment afterwards. Almost all of them had completed high school. We met and interviewed young women who were still in high school, but were already worrying about finding employment after matriculating. By telling some of the young women's stories captured during our research, we want to help navigate the linkages between access – or lack thereof – to basic services, bodily integrity and employment, and the ways in which they affect women's empowerment.

The FGDs with the young women included a series of reflexive exercises on structural barriers they face in accessing work and the availability or lack of services that support them in overcoming such barriers. Often, lack of basic public services is the main structural barrier to accessing work. The discussion ended with the ranking exercise and

⁷For a recent discussion of the effectiveness of different types of childcare support see Roelen, Delap, Jones and Karki Chettri (2017).

the women showed clearly that major barriers were mobility (or transportation) and safety.

Women discussed issues of safety, which affected their mobility within their townships, in particular after dark, and when using public transportation to go beyond the townships. They are core to women's ability to access a decent job, since both factors determine the time women have available for paid work, the location of the job they can undertake and even their capacity to look for a job as they have to use transportation to do so. If women cannot use the transportation to apply for jobs or attend interviews, their ability to access decent work is strongly reduced.

Transportation

Karabo (22 years old) has a four-year-old daughter. She lives with her aunt, two cousins (female and male) and her cousin's three-year-old son. She and her cousin (female) are unemployed; her other cousin (male) works as a security guard for a shop. Both mothers receive a small child support grant from the government. Karabo's aunt helps and supports them by providing a house and meals, and covering the utility bills. Karabo finished high school and received her 'matric' (high school) certificate. She has been looking for a job since she finished school, to provide for her daughter. She found a job, but the pay was low and it was too far away:

“ you are taking the job just because you need the money coming in, because my aunt is the only person providing for us, food and everything... I went to this organisation... it was very far... It was last year, April. It was in the middle of April and I stopped in the middle of May, so it was for a month and a half. It wasn't because of the job, it was also the money, because when you do this work, they don't pay you much. We had to take our transport money... the money flew away. ”

Karabo had to quit her job because she was spending it all on transportation. She could not contribute money to her aunt's household and at the same time was unable to care for her daughter or help do household chores. Karabo's dream is to be a policewoman: 'I have passion for that. The passion drove me all the way to Pretoria for the [police

academy] application'. In the meantime, she is still trying to find work. The most recent opportunity she found was to work in a call centre:

“ I was trying to get into this call centre, it's an agency where they train you for a week [paid for by the prospective employee] and after that they get you to interview, then they put a job placement for you... The transport issue is especially [hard] from here, this place [Orange Farm] is very far... Eventually you have to take transport and you have to take your lunch money and everything. It's a problem... You have to go to Johannesburg every day and it's 20 rand going there and when you come back again it's another 20 rand. It's 40 rand a day. Obviously you are going to have lunch there, so what are you going to eat on your lunch break? So it's 40 rand a day and lunch money. ”

As we can observe, Karabo is struggling to access this opportunity as well because of the high transportation costs. The cost of private transport is high, yet young women prefer it, as they do not feel safe using the public train system.

Johannesburg's public rail system is affordable and often used by poor people, mostly men. It connects the townships with the city centre. However, it is almost always delayed, overcrowded and prone to crashes or mechanical failures. All the young women we talked with reported that trains are always delayed, as well as being very unsafe spaces. Due to overcrowding on the trains, young women are often sexually harassed. Iminathi (22 years old), who has a two-year-old son, said:



Photo 8 A group of women participating in AAI programmes during a focus group discussion, Johannesburg
Photo credit: Mar Maestre

“ our trains are not safe, there is a lot of crime there. It is not safe. They are always packed. Super-full, so if you are a female there, you are not going to feel comfortable because there are a lot of males around. From here to town it is an hour. So instead you take a taxi, even though it is expensive. ”

As shown, shared private taxis, which are more costly but reliable, are the only alternative, though some women also reported harassment when using them, mostly after dark. In addition, taxi stations are sometimes far from houses, so women have to walk longer distances to get home. This places them at risk of sexual assault if they get home in the evening.

Safety

All women reported feeling unsafe and safety was mentioned in two different instances. Firstly, women felt vulnerable and unsafe after dark or when using transportation, especially public transport. Secondly, women felt stigmatised by their choices regarding their sexual choices and rights (e.g. teenage pregnancy). In both instances, they expressed fears of sexual harassment, violence and discrimination, both in their townships and also often when using public services to move between townships or travel to the centre of Johannesburg. During the ranking exercise one of the young women, Precious, said:

“ If you connect all of this, going to the hospital, are you gonna be safe? We are not safe. Everywhere we are not safe, you know? And the only thing that we want is to be safe. How do you know that when you drink the water you will not get sick? You know going to the toilet is a bad situation. You won't be safe in that space. When you are at the park will you be safe? You don't know. Are you safe? So for me it is if everyone is safe. Whether you are at work or home, you just want to be safe. ”

This issue of [lack of] safety has been discussed above with regards to transportation. Women fear sexual harassment or being robbed while using trains or taxis, and/or when walking alone after dark, as there are barely any street lights in some areas. There is also no effective police force. These perceptions of safety reduce women's mobility. For

example, Iminathi talks about her township and how she cannot leave the house in the evenings:

“ you can't come home very late because the last taxi is at 8pm from town to here. At midnight, you would be scared... There are terrible things around you here. You have a group of boys that come around in tens, that rob people, they do horrible things, they hurt people, they stab them... So it is not safe. Especially at night. [In the evening] I never go out... it is not safe. ”

Women, especially teenage mothers and young women, also felt discriminated against and unsafe in trying to access certain public services. During an FGD, some women mentioned the inadequacy of the police:

“ They[the police] have an attitude. You know even last week we had an incident where I stay where there's an alarm system. So the alarm, when you press it on, it rings to the police station. So it kept on ringing and ringing but the police never came. They decided to shut it down. It was irritating. After two hours they came. And there are two police stations. We are more or less near to both. ”

“ But as a woman you are not safe [in a police station]. Because [if]you as [are] someone who has been raped, there are some policemen who will rape you again. ”

Women's feelings of safety are directly linked to their access to public services. As discussed with one group of young women:

“ Basically, in order for us to access the police station we have to travel. So it's costly, it's expensive for us. So, basically, [I would] like to bring the police station close to where I stay. To make it easily accessible. ”

“ The reason why I'd like the services to be closer to my community is because most of us when we are looking for job opportunities [we have to travel] a long way, and we have to wait in long queues, so it would be more convenient... And then also hire people who are actually qualified to do certain work. For example, I like the

idea of victim empowerment service [service provided in a different community]. Actually hire people who are qualified to provide proper counselling for victims, rape victims. ”

Finally, some women also mentioned feeling stigmatised for being teenage mothers. In some cases it prevented them from going to school while pregnant. In others, when accessing health clinics they could not get enough information about their rights when pregnant. A key informant from the government mentioned:

“ *I think young women would need also policies that are directly [relevant], that are not generic. Policies that would be talking to young women[‘s] issues... Our policies are very generic. I would talk specifically in hospitals. You look at the treatment that young women are getting. Either they go for their abortions, which is their legal right, but the treatment that they are getting – we label them, we judge them, professionalism is no longer there. Hospitals – people are scared to go there. ”*

This stigmatisation prevents women from finishing their education or feeling empowered enough to look for a job after they have given birth. It often has long-term negative consequences, drastically limiting their livelihood options.

Access to sexual and reproductive health and rights and health services

The challenges to accessing health services include information availability, rurality, attitude of health workers and communities, and limited resources for counselling. In addition, there is a lot of stigma attached to teenagers accessing sexual and reproductive health information or services, teenage pregnancies, or termination of pregnancies:

“ *[when accessing SRHR] at the clinics they give you attitude. They judge you before they help you. They call the other nurses. They shame you. ‘So young, what are you going to do with contraceptives?’ They question you for being sexually active... because when you’re still in school, they will ask your mom for her consent. ”*

The quote above from one of the girls during an FGD shows a common concern the young women . They constantly felt out of place or discriminated against when trying to access sexual health and reproductive information or services at the clinics. Young women, particularly when they come from certain townships, felt ostracised and judged by service providers, making them afraid and unwilling to go back for information or proper care.

During the ranking exercise, one of the young women, Lesedi, explained the difficulties they, as young women, often face:

“ *Health. I chose health because that the service that we get from the people that you get when you go to the hospital... they don’t give us the services we need. [Nurses and doctors should be better] trained so they can be on the same level to be able to understand why a child comes to them and asks for contraceptives. They are not really trained on how they should treat youth or children or the services they need to provide to them. ”*

The key informants, as we saw above, also felt that personnel providing public services were stigmatising young women. This concern increased when young women were pregnant and/or thinking about getting an abortion. Many teenage mothers may not be able to finish their education, access university or find a decent job because of their children, preventing them from accessing a positive livelihood options and having to work in low-skilled and low-paid jobs.

Childcare

Childcare in South Africa did not seem to be a major barrier for the young women. The government offers childcare support of 350 rand a month, which the women often use to buy food for the children and to pay for childcare. All the women that had children mentioned the support of their family in taking care of their children, as well, either by providing food and a house or by helping the working mother pick up the children from school and take care of them in evening. For the working women who had children it was obvious that their days were busier, and

they had to stretch their daily routines to care for their children. While it was not the biggest barrier, some of the young women raised financial and time concerns they have:

“ *My child was in a crèche... for two years. Since she was two. The monthly fee was 200 rand... the registration was 50. It's 250. After that there's a list that comes through. Stationery list, [...]They want tissues, they want face cloth. They want this, they want that. Already it finishes all the 350. So sometimes the 350 is not enough. Yes, we are given it and we appreciate it. But let's not say that the 350 is enough and it can take care of the child. Some of the children can't even eat from the 350 just because they have to get into the crèche.* ”

Access to decent work

During our research in South Africa we observed that the state in the country is very active and provides basic services to the citizens; however, not all of them are accountable. As a key informant observed:

“ *I think, one of the reasons... what made us unique, in terms of South Africa, is that we have an active state. We have, pretty much a welfare-oriented state. So, if you want... to do an analysis of the role of the state... in [relation to] the target group. Look, it's not adequate, especially in the implementation level. There's a lot to be done. But from the foundation, we have a, quite a viable constitution. A foundation that underpins rights of women in particular. Then we have, in terms of orientation of the state, it is more welfare oriented. So, for instance, if we are a woman that's unemployed, and has to carry the burden of childcare, there's a child support grant for the child up to the age of 18.* ”

Despite the state's social protection policies, another overarching barrier to young women is the lack of access to decent work in South Africa, particularly for women. According to national statistical service's Quarterly Labour Force Survey (Reuters 2016), South Africa's unemployment rate increased to 26.7 per cent in the first quarter of 2016. For young people aged 15–24 years this rate raises to 65.5 per cent. In addition, women are the most disadvantaged job seekers in the labour market, especially women of colour who mainly have low-skilled jobs. Almost all of the women we interviewed and met had been looking for a job, some for up to 3–4 years.

Jobs available for young women are often as cashiers, domestic help or similar roles in the service industry. Many of them are dependent on new shopping centres opening near where they live, as transportation to the city is complicated and expensive. For example, Amahle (35 years old), who has a 10-year-old daughter, finished high school, but by the time she was ready to go to college her mother passed away and she had to stay at home to take care of her younger siblings. She found work in the past, but has been unemployed for three years:

“ *I used to work before. In a convenience shop. I started work around eight o'clock and came back around nine o'clock. My sister, she was helping me [take care of my daughter]. Then they said they don't have money to pay rent, then they fired us, then I stayed at home... I think [it was] 2013, 2014. I was working for five years. I was doing everything. I used to be a chef, cooking there, I used to be a cashier, lots of jobs, a combination of everything. If they put you there you do everything. I tried to look for something, [but they] don't have anything you can try at the moment. It's very difficult to find something.* ”

06

Analysis: links between gender-responsive public services and young urban women’s economic empowerment

Table 2: Impact of lack of gender-responsive public services – synthesis from findings in South Africa and Ghana

| What public service women valued | Problems women faced | Impact of lack of gender-responsive public services |
|---|---|--|
| Water and electricity (Ghana) | <p>Accessibility: long time spent in fetching water for household consumption</p> <p>Affordability: cost of electrical pumps, additional cost of purchasing potable water</p> <p>Physical drudgery: body aching, tiredness</p> | <p>Depletion – implying negative effects on women’s bodies and minds</p> <p>Time poverty, and economic gains being eroded because of the cost of paying for basic services</p> |
| Accessible, affordable, reliable and safe transportation (Ghana and South Africa) | <p>Accessibility and affordability: time and money spent on transportation to/from work, which restricts work opportunities</p> <p>Gendered violence, unsafety: fear of travelling back home when dark due to sexual harassment in public spaces; insecurity, especially when using public transport.</p> | <p>Women’s right to bodily integrity is denied, possibly with severe consequences on their physical and/or psychological health</p> <p>Economic gains being eroded because of the cost of paying for basic services</p> <p>Constrained employability, as women might have to give up jobs and related services (e.g. training schemes), which are too far from their homes</p> |
| Community-based health facilities (Ghana) | <p>Accessibility and affordability: time and money spent accessing remote and overcrowded public health facilities</p> | <p>Time poverty, as a reflection of young urban women’s spatial marginalisation</p> <p>Economic gains being eroded because of the cost of paying for basic services</p> <p>Depletion – implying negative effects on women’s bodies and minds</p> |

| What public service women valued | Problems women faced | Impact of lack of gender-responsive public services |
|--|---|--|
| Gender-responsive sexual and reproductive health services (Ghana and South Africa) | Gendered stigma: young urban women felt discriminated against when accessing sexual and reproductive health services, and/or were denied access to services they sought | Unplanned pregnancies and/or unsafe sexual practices, which affect women's bodily integrity and their capacity to engage in paid work |
| Gender-responsive accountability systems at work (Ghana) | Gendered violence: women's vulnerability to men's economic power and demands for transactional sex; sexual harassment in the workplace | Subordination of young urban women to their employers Sexual and economic exploitation and/or discrimination at workplace, and resultant marginalisation from economic activities |

As Table 2 above shows, women in Ghana and South Africa face multiple barriers to finding and maintaining a job in the formal economy, which reflects poor or lack of access to some essential services. In part, these barriers reflect and reproduce disadvantages and challenges that the whole population faces, such as unreliable electricity provision in Ghana, and spatial marginalisation of women, men and children living in townships in South Africa. Yet they also have gender-specific impacts. In Ghana, for example, lack or poor provision of services such as water and electricity also affects the businesses where women's economic activities are concentrated, such as hair and beauty salons, tailors and grocers. In South Africa lack of access to safe transport means that women either cannot look for jobs beyond their township; or when they do, they face daily insecurities and risk being attacked.

Other barriers are also gender-specific and reflect the link between women's economic and sexual rights. Women are disproportionately engaged in unpaid care work, which exacerbates their relative economic dependency on men, whose status as breadwinners – actual or ascribed – tends to justify their persistent lack of participation in care work. In Ghana, for example, poor distribution of water to communities and households systematically emerged as a task that only women – and sometimes their children – undertake, bearing a heavy cost on their bodies and encroaching on their time and physical energy to engage in different tasks. Women also have to pay high fees for water and electricity, especially from convenient locations, which therefore increases the cost of care that

they have to bear. Care for infants is also almost uniquely ensured by women – by mothers and/or their female relatives – in the absence of decent and free-of-charge public crèches. In South Africa young women often do not have access to sexual and reproductive health information or services, resulting in high rates of teenage pregnancy.

Women also continue to be exposed to sexual violence and harassment in the streets and in the workplace,⁸ which constrain their mobility and capacity to maintain a job if this requires long journeys, as was the case for the young women we spoke to and interviewed in both countries. The gendered stigma that young single mothers experience constitutes for many young women an insurmountable challenge to finishing their education, thereby constraining even further their capacity to find a decent job.

Although in South Africa we were only able to talk to only one public officer (see Methodology), our fieldwork in Ghana suggests that the policies in place failed to consider women's specific disadvantages as part of a wider discriminatory framework. Their poor employment prospects, health and/or educational outcomes were instead blamed on individual women's behaviour (e.g. early pregnancy, failure to catch up). None of the respondents suggested the importance of redistributing responsibilities in care work across the care diamond.

We also encountered resistance amongst male officials to talking in-depth about gender-based disadvantages women face in employment, care

⁸As well as in their homes, most likely, although our research did not address domestic violence.

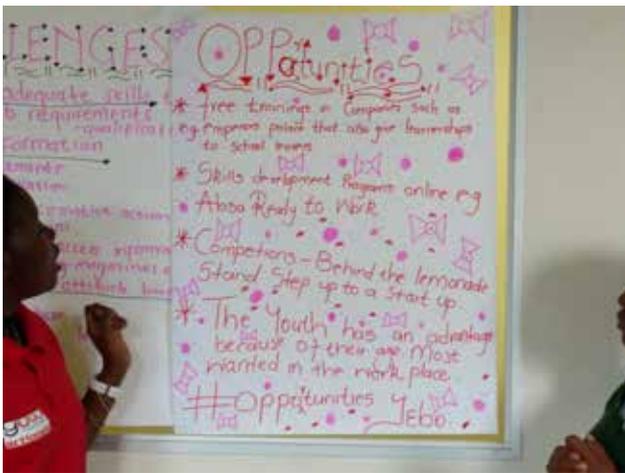


Photo 9 Looking at the school-to-work transition, Braamfontein
Photo credit: Mar Maestre

work and sexual rights. Instead, the officials stated that they knew ‘what gender is about’, which made it difficult to engage with them in substantial vs. formal (i.e. legislative) terms. In this context, we feel that a bottom-up gender budgeting exercise – perhaps beginning from the municipal/district level and moving upwards – could help officials understand and value women’s voices and needs, and incorporate them into the resource allocation decision-making processes. In the next section we outline a roadmap that could be followed in this regard. AAI’s work on women’s collective organisation, which it has been pursuing throughout the young urban women programme, is a key asset in this and similar processes, and should be sustained over time.

The challenges we have described unfold in a macroeconomic context that is characterised by stagnant if not regressive job creation, in particular of decent jobs. Unemployment was particularly significant in South Africa, where the informal sector appears to be of minor relevance compared to Ghana, and where unemployed people’s livelihoods seemed to rely on a blend of public benefits and engagement in informal or irregular trades and activities. This context is far from unique, unfortunately, and many other countries in the global South as well as in the global North share common elements, such as privatisation of essential services and the ideological emphasis on individual vs. shared responsibility. The importance of counteracting this policy trend and its fragmenting impact on society cannot be understated and will be underlined in the recommendations that conclude this report.

Gender budgeting as an advocacy tool for gender-responsive public services in the Greater Accra Region and Johannesburg: first steps

Gender budgeting can be an effective strategy for ensuring that an adequate share of public resources is allocated to services that contribute to the realisation of women’s economic rights and that such resources are effectively spent. The structure of a gender budgeting initiative, and related campaigning strategy, will vary depending on: its political location (e.g. whether it is done at national or local levels); whether it covers the whole budget or selected sectors; and whether it is carried out by civil society only, or has the government’s endorsement as well.

The optimal aim for AAI, its partners, social justice movements and others would be to convince governments to use it as a tool to draft their own national and regional budgets. Tools that can be used to carry out a gender-sensitive analysis of budgets range from analytical approaches for scrutinising implicit and explicit gender biases in the policies of different portfolios and programmes; to interviewing actual and potential beneficiaries of services; to quantitative analyses (e.g. of household surveys) to assess distribution of expenditure, taxes and time use across genders and other socio-economic characteristics (Elson 2006). Ideally these tools would be used in combination and over a series of steps.

An initial beneficiary assessment

The fieldwork we undertook in selected villages of the Greater Accra Region and townships in Johannesburg offers interesting insights into what particular groups of young urban women identify as key public services that could best support them in their paid work and caring roles. In effect, the ranking exercise related to the public service mapping carried out in both communities constitutes a form of beneficiary assessment, a research technique to ask actual or potential beneficiaries the extent to which government programmes match their priorities. This is an

important first step, although ideally it would be preferable to extend the sample of interviewees to include a wider variety of women, as well as men, living in the communities concerned. This would ensure findings that are more representative and therefore add legitimacy to the budgetary 'claims' to be subsequently made.

In both countries a range of services seem to be badly lacking, but priorities are different, with women in Ghana ranking electricity (and water) highest, and women in South Africa ranking transport and safety highest. Many of women's accounts appear to suggest that the problem is mostly that services exist but are not easily accessible, either because of gender bias in their design and implementation, or because of high costs, or both. This finding illustrates how important it is for budgetary analysis to look at planned and achieved inputs and activities. In other words, it is not just about ensuring that enough money is allocated to services with high potential for promoting gender equality, but also about ensuring that whatever money is allocated is well spent. There are often important gaps between the plans as presented in budget documents and how they are carried out, as revealed in audits and evaluations.

A framework for scrutinising both the planned and the actual with regard to gender-responsive public services

A commonly used framework in budgetary analysis involves distinguishing inputs, activities, outputs and impacts and specifying, examining and monitoring each of them (Elson 2006). Inputs consist of the money allocated and spent by a particular ministry or programme; activities consist of services planned and delivered, such as 'reproductive health services' or 'transport services' – a challenge may be that it is not always clear how much money actually reaches the various activities; outputs consist of the delivered use of activities, such as 'female patients treated' or 'number of women-friendly public buses on routes to work'; impacts consist of actual achievements in relation to broader objectives such as 'reductions in maternal and child mortality' and 'lower incidence of sexual harassment when travelling'. A frequent challenge is to improve specification of the various indicators for outputs

and impacts and to identify sources of relevant information and statistics.

Moving forward

The fieldwork undertaken in Ghana and South Africa has provided initial insight into the specific sectors that should be prioritised in a hypothetical budgetary analysis. Many other steps and further investigations (including additional fieldwork) would be required to take the budgetary analysis forward. This section offers a few suggestions on the key steps to take and on the sort of evidence which would be useful to obtain:

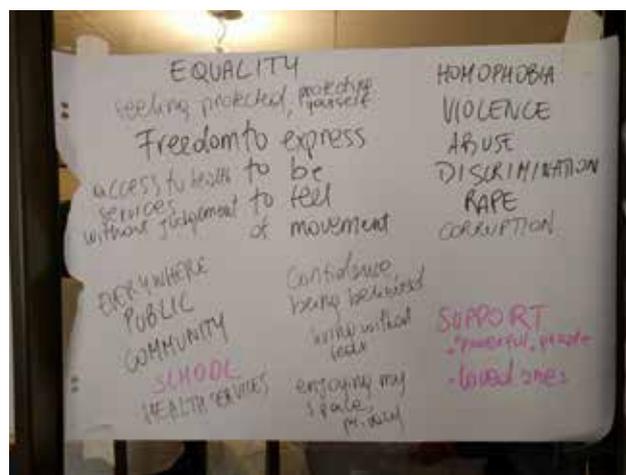


Photo 10 Mapping challenges and aspirations, Diepsloot
Photo credit: Mar Maestre

1. Interview local officials to gain a clear understanding of the departments involved in managing relevant programmes and existing accountability mechanisms (if any). It is very likely that more than one department is responsible for the effective running of particular services. For instance, responsibility for safe and women-friendly transport systems in South Africa is likely to be shared between the roads and transport department and other bodies, such as the department in charge of lighting along roadways, bodies that regulate intermediate modes of transport (e.g. rickshaws and mopeds), the department responsible for community safety and so on.
2. Map and review relevant policy documents and government reports to identify whether women's needs and claims in the particular area concerned are acknowledged and addressed, at least on paper. For example, in Ghana, it would be useful to review any official documents on electricity and water provision, to identify any

explicit government commitment to give better access to low-income populations. This review exercise would entail paying special attention to whether any existing government plan includes consideration of the implications and extra costs associated with unpaid work burdens.

3. With regard to South Africa, brief inspection of a key budget document, Estimates of provincial revenues and expenditure for 2014 (Gauteng Provincial Government 2014), suggests that the provincial government does indeed take into account gender equality objectives and outcome indicators on paper. Gender mainstreaming seems to be mostly understood in terms of: promoting business opportunities for women, employment equity targets, increasing the number of women in senior management government positions, antenatal care and supporting women as well as other vulnerable people who have been victims of violence. In other words, the emphasis of this budget document, as is often the case in other budgets that claim to be gender aware, is on specifically identified gender-based expenditures rather than on general budget expenditure by government department analysed for its gender impact. The latter would be much more needed and significant. Specifically identified gender-based expenditures tend to be a small fraction of total budgets – usually no more than 5 per cent (Sharp and Broomhill 1990; Budlender and Brathaug 2004). With particular reference to the chapter on ‘Roads and Transport’, the only mention of gender equality relates to ensuring that an adequate number of women are hired in road construction work – it seems that currently women constitute about one-third of the total workforce employed in special road construction programmes in the province (p.346). The report mentions a seemingly useful Women’s Parliament initiative aimed at ensuring greater participation of women in budgetary decisions and attended by some 1,300 women from the province. Less useful perhaps is the plan to build a ‘Women’s Monument’, which is also mentioned in the chapter on ‘Arts, Sports and Culture’. Further investigation is needed of how much public money is made available at various levels of the relevant budget (provincial level? district level? other?) for the specific areas that young urban women have identified as priorities. Collect information on the total government budget, ideally over a few years, to be able to calculate financial resources allocated to electricity services (Ghana) or transport (South Africa), both as share of the total budget and in relation to the share of other budget items (e.g. share of total local budget going to agriculture and rural development vs. sports and recreation vs. roads and transport infrastructure).
4. Conduct audits of existing programmes to establish who can access them and the extent to which they are implemented in gender-sensitive ways.
5. In addition to evaluating existing programmes for their ‘gender-sensitivity’, collect more detailed information on what sort of additional programmes and resources are actually needed in the community concerned, including estimates of costs for specific infrastructure and staff required to meet young urban women’s needs. In the case of Accra, for instance, this additional programme could take the form of a pilot project to extend and improve the electricity grid in specific regions and subsidise the cost of connecting poor households to the grid. These costs will be then compared with the actual funds that are allocated to electricity services in current budgets. If the claim is for a project or activity that does not currently exist, one campaigning strategy could be to pick a few items in the existing budget that do not appear to be especially beneficial for women’s wellbeing, and calculate how many gender-sensitive services could be provided instead with the money that is currently ‘diverted’ (e.g. money currently spent on new highways and rapid rail links would be sufficient to cover the annual electricity and water expenses of 10,000 currently poor households in the Accra region).
6. Decide a list of outcome indicators to use for monitoring, ideally to be chosen in agreement with community members. In other words, do not stop at the point of checking whether sufficient money has been allocated to programmes that, for example, improve electricity infrastructure or safe transport, but find out whether the resources allocated translate into desired outcomes (e.g. an increased number of households that can afford electricity and piped water on their own premises; a reduction in the amount of time women and girls spend on housework; increased female earning from self-employment attributable to better electricity and water infrastructure, etc.).

Recommendations and conclusions

This report has presented the findings and analysis of how public services affect the economic empowerment of young urban women in Ghana and South Africa. While previous AAI research focused on the links between bodily integrity and economic empowerment (ActionAid 2015a) this research has focused on how public services affect young women's bodily integrity, their unpaid care work responsibilities and their access to economic opportunities. The study has privileged the voices of young urban women themselves, highlighting their priorities and needs in relation to public service provision and the constraints that they face when these services are not provided.

Our findings reiterate that South Africa 'remains a dual economy with one of the highest inequality rates in the world, perpetuating inequality and exclusion' (World Bank 2017). In Johannesburg, the majority of the women we met or interviewed had been looking for a job for the last 1–3 years, or had just started a unpaid internship with hopes of getting full-time employment afterwards. Almost all of them had completed high school. The context is one in which public services are available, but it poor access and quality mean that they are not always accessible to young urban women, or sufficient accessible for young urban women to fully address the gendered barriers they face in achieving their full economic potential. In Johannesburg, issues of safety – which affect women's mobility within their communities, in particular after dark, and when using public transportation – were the core barrier to women's ability to access a decent job. The realities of Johannesburg thus highlight how offering a safe, cheap and reliable transport service would directly improve women's capacity to engage in remunerated activities and ensure economic gains from this participation in paid work.

In the peri-urban communities of Ghana where the women we met and interviewed lived, unaffordability of electricity and lack of easily accessible piped water were the major challenges they faced in managing their dual responsibilities of care and paid work. Both these services are central in the undertaking of the household chores women are mostly responsible for (bathing babies, cleaning the

house, doing laundry, etc.), but also in many small businesses in which women's self-employment and small entrepreneurial activities are concentrated (e.g. beauty services, tailoring and petty trading of cooked items and fresh drinks). Distance from the city centre, where formal jobs opportunities tend to concentrate, compounded by lack of affordable, reliable and safe public transportation, affects women's capacity to seek and maintain a formal job, and all the more so in contexts where much of their time is absorbed by unpaid care work. In fact, gendered mobility constraints and women's fear of travelling home when it is dark constrains the geographical range within which they can look for paid work, overall diminishing the likelihood they will find it. Spatial marginalisation also similarly affects the financial and time burden on women, who are generally responsible for caring for sick household members, including by accompanying them to distant health care facilities. Women also reported that men's economic privilege often translated into instances of sexual harassment at work or early pregnancies, which, compounded by a gendered stigma towards teenage and/or single mothers, dramatically curtails their educational and job opportunities.

Unlike from other essential services (e.g. water, electricity, health, transportation), women we interviewed managed childcare through non-monetary exchanges and did not raise lack of public childcare as an issue of concern. This lack of expectation from the state for childcare as a public service suggests that in a context of scarce financial resources, women prioritise interventions in services that they are already paying for and/or will rely on throughout their lives rather than for just a few years, and which they will not be able to cater for through non-monetary arrangements – thereby also highlighting women's perceptions of being the primary care-providers.

Our research findings align with the literature reviewed and confirm that for young urban women to be able to fully enjoy their economic opportunities, public services need to be gender responsive. This means investing more money in specific services for women, to ensure their safety, health and sexual, reproductive and economic rights. It also implies that personnel at all levels of government must be made fully aware of the

issues and challenges young urban women face, avoiding stigmatising them and creating targeted programmes that suit their needs and aspirations.

In terms of recommendations, it is clear that the government needs to:

- Invest in gender-responsive infrastructure and basic services to make them accessible and affordable to young urban women, focusing in particular on water and sanitation facilities, and on reducing the cost of electricity that is so crucial to their economic activities;
- Improve the reliability and affordability of public transportation (e.g. decongest roads and create incentives for use of public transportation), as it affects young women's capacity to travel to/from paid work;
- Create and support initiatives to eradicate any form of gender-based violence at home, in the workplace, and in public spaces. This includes making streets and transportation safer, and holding police and law enforcement officers accountable for reducing sexual and gender-based violence; and
- Build up sexual and reproductive health services and promote their use by (a) eradicating the stigmatisation of teenage and/or single mothers, which contributes to exacerbating women's vulnerabilities; and (b) supporting safe sex initiatives that are tailored to the needs of young urban women.

Non-state actors (e.g. non-governmental and community-based organisations) also have a role to play in ensuring that young urban women can access GRPS and achieve their economic rights. More specifically, they can:

- Continue supporting initiatives that contribute to public officials' awareness of the linkages between economic empowerment of young urban women and the allocation and use of public resources. Specifically, they can build the capacity of public officials to carry out gender-sensitive budgeting – not only at national level, but also in districts where budgetary allocations impact on young urban women's everyday lives and affect the challenges that they face;
- Support young urban women in coming together to participate in formal decision-making processes, such as gender budgeting

at local levels; in addition to lobbying the government for public services. Such women's collectives can also act as peer support groups for young urban women, supporting their rights-awareness helping them contribute to changing discriminatory gender norms that hamper their opportunities at all levels, and which they might themselves hold, in addition to their families and communities;

- Advocate for, create and support initiatives that contribute to reducing and redistributing women's care work, including by holding the state to account for providing basic, affordable and accessible gender-sensitive public services for young urban women, including water, electricity, safe transport, sexual and reproductive health services and childcare services; and
- Support women and women's groups and organisations in their struggle for rights, dignity and justice, including by advocating for GRPS, gender budgeting at local levels and changes in gender norms.

This research has shown a strong link between providing GRPS and young urban women's achievement of their economic rights and empowerment. Affordable and accessible water and electricity, and good-quality health care and childcare facilities are an important step towards reducing the disproportionate financial and time costs that young urban women spend on their care responsibilities. Water and electricity provision at accessible locations and affordable rates, as well as unsecured loans, will also help to make setting up businesses affordable and feasible for women. Safe and reliable transportation will reduce women's gendered, class-based and spatial marginalisation, while norms, laws and practices will help move towards the eradication of gender-based violence. Overall, if young urban women are to achieve economic empowerment, it is critical that the macroeconomic framework is transformed to provide decent jobs for them, specifically by eradicating gender biases in state and market policies relating to economic opportunities. However, as this research has shown, access to these jobs and economic opportunities will necessarily require support through provision of GRPS if economic empowerment of young urban women is to be optimised.

07

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Annex I

List of young women interviewed

| Name (anonymised) | Country | Status | Gender | Age | P/NP |
|-------------------|--------------|---------------------------------|--------|-----|------|
| Aisha | Ghana | Self-entrepreneur: tailor | F | 24 | |
| Lisa | Ghana | Employee | F | 26 | |
| Shade | Ghana | Self-entrepreneur: petty trader | F | 28 | |
| Ndidi | Ghana | Social worker | F | 25 | |
| Mudiwa | Ghana | Self-entrepreneur: hairdresser | F | 27 | |
| Jayde | Ghana | Social worker | F | 19 | |
| Ayodele | Ghana | Self-entrepreneur: shop owner | F | 26 | |
| Gbemisola | Ghana | Intern | F | 22 | NP |
| Abiosseh | Ghana | Self-entrepreneur: seamstress | F | 32 | NP |
| Amahle | South Africa | Unemployed | F | 35 | |
| Iminathi | South Africa | Employee | F | 22 | |
| Boreng | South Africa | Nurse | F | 30 | |
| Kagiso | South Africa | Unemployed | F | 23 | |
| Melokuhle | South Africa | Unemployed | F | 33 | NP |
| Thandolwethu | South Africa | Unemployed | F | 29 | |
| Lebohang | South Africa | Unemployed | F | 28 | |
| Karabo | South Africa | Unemployed | F | 21 | |

List of key informants interviewed

| Country | Organisation | Role |
|--------------|--|--|
| Ghana | AAI | Project officer |
| Ghana | AAI | National projects manager |
| Ghana | Abantu (local partner of AAI) | Programme officer |
| Ghana | Department of Gender | Employee |
| Ghana | Department of Labour | Employee |
| Ghana | Department of Labour | Employee |
| Ghana | Department of Labour | Employee |
| Ghana | Department of Social Welfare | Employee |
| Ghana | Department of Environment | Employee |
| South Africa | AAI | Head of programme |
| South Africa | AAI | Women's rights programme assistant |
| South Africa | AAI | Baseline consultant |
| South Africa | Africa Tikkun | General manager at Uthando Center |
| South Africa | Africa Tikkun | Coordinator of ActionAid's Young Urban Women's project |
| South Africa | Gauteng Department of Social Development | Employee |

List of young women who participated in focus group discussions

| Country | Age | Status |
|--------------|-----|-------------------------------|
| Ghana | 23 | Petty trader |
| Ghana | 19 | Teacher |
| Ghana | 25 | Petty trader |
| Ghana | 25 | Volunteer |
| Ghana | 24 | Petty trader |
| Ghana | 25 | Petty trader |
| Ghana | 23 | Unemployed |
| Ghana | 24 | Apprentice: tiler |
| Ghana | 24 | Petty trader |
| Ghana | 19 | Unemployed |
| Ghana | 22 | Apprentice: sewer |
| Ghana | 25 | Petty trader |
| Ghana | 27 | Beautician/volunteer |
| Ghana | 20 | Teacher |
| Ghana | 22 | Petty trader |
| Ghana | 24 | Volunteer |
| Ghana | 22 | Unemployed |
| Ghana | 24 | Teacher |
| Ghana | 24 | Volunteer |
| Ghana | 25 | Teacher |
| Ghana | 25 | Self-entrepreneur: Beautician |
| Ghana | 24 | Volunteer |
| Ghana | 24 | Volunteer |
| Ghana | 25 | Beautician |
| Ghana | 25 | Petty trader |
| Ghana | 25 | Factory worker |
| Ghana | 25 | Petty trader |
| South Africa | 17 | Unemployed |
| South Africa | 18 | Unemployed |
| South Africa | 17 | Unemployed |
| South Africa | 18 | Unemployed |
| South Africa | 17 | Unemployed |
| South Africa | 16 | Unemployed |
| South Africa | 15 | Unemployed |
| South Africa | 16 | Unemployed |
| South Africa | 15 | Unemployed |

| Country | Age | Status |
|--------------|-----|--------------------|
| South Africa | 15 | Unemployed |
| South Africa | 16 | Unemployed |
| South Africa | 16 | Unemployed |
| South Africa | 17 | Unemployed |
| South Africa | 23 | Internship/student |
| South Africa | 19 | Internship/student |
| South Africa | 21 | Internship/student |
| South Africa | 24 | Facilitator |
| South Africa | 28 | Internship/student |
| South Africa | 19 | Student |
| South Africa | 23 | Employee |
| South Africa | 22 | Unemployed |
| South Africa | 28 | Unemployed |
| South Africa | 30 | Student |
| South Africa | 23 | Student |
| South Africa | 25 | Social worker |
| South Africa | 24 | Unemployed |
| South Africa | 23 | Unemployed |
| South Africa | 25 | Unemployed |
| South Africa | 33 | Unemployed |
| South Africa | 22 | Employee |
| South Africa | 21 | Unemployed |
| South Africa | 21 | Unemployed |
| South Africa | 22 | Employee |
| South Africa | 22 | Unemployed |
| South Africa | 21 | Student |
| South Africa | 26 | Unemployed |
| South Africa | 34 | Unemployed |
| South Africa | 21 | Unemployed |
| South Africa | 21 | Unemployed |
| South Africa | 24 | Intern |
| South Africa | 28 | Intern |
| South Africa | 30 | Unemployed |
| South Africa | 25 | Unemployed |
| South Africa | 29 | Student |
| South Africa | 22 | Student |
| South Africa | 21 | Unemployed |

Annex II

Consent and ethics form

Consent form

You are being invited to take part in a research study. The study is titled, 'Gender-Responsive Public Services (GRPS), poverty and the lives of Young Urban Women – Inception Report.' The purpose of the study is to identify how and in what ways GRPS can lead to young urban women's fully enjoying their economic rights and access to the labour market, and to generate evidence around women's economic empowerment to ensure that the structural barriers to WEE are recognised and addressed.

You are invited to participate in an interview with us to share your experiences and knowledge in this field and enrich our research. Your participation is voluntary, and you can choose not to participate in the study in part or in whole. You may also refuse to answer any questions you do not wish to answer.

The interview will take more or less one hour and a half of your time. The interview will be tape recorded

unless otherwise stated by you. The tape recorded interviews will be subsequently transcribed.

All information that you share for this study will be kept confidential and anonymous. However, you may indicate if you would not wish to remain anonymous. The information provided by you will be included in the research report and subsequent publications based on the study.

If you have any questions and concerns you may contact any of the following:

Name, Institution and email/phone number

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Institute of Development Studies (IDS)

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ActionAid

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INFORMED CONSENT FORM

Title of the Research: Gender-Responsive Public Services (GRPS), poverty and the lives of Young Urban Women.

Name, Position, Address of the Interviewer:

**Institute of Development Studies (IDS)
Library Road, BN1 9RE
Brighton, UK**

Name of the Interviewee:

Address of the Interviewee:

Please circle the appropriate –

- I understand the information described above in a language known to me. My questions have been answered to my satisfaction, and I agree to participate in this study.
- I understand that my participation in this interview is voluntary and that I am free to withdraw at any time, without giving any reason.
- You may/ may not audio record the interview
- I am willing/not willing to give written/thumb imprint consent. If unwilling to give written/thumb imprint consent, I give verbal consent which you may/may not record
- I have been given a signed copy of this form.

Signature of the Interviewee:

Date:

Signature of the Interviewer:

Date:

act!onaid

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