

Unpaid Care Work and its Effect on Gender Equality in Northern Ghana: Evidence from the Jirapa Municipality

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DOI//<http://dx.doi.org/10.4314/gjds.v19i1.6>

Abstract

Globally, women are said to be disadvantaged in the world of paid and/or unpaid work. The study aims at examining the implications of unpaid care responsibilities on gender inequality in the Jirapa Municipality of the Upper West Region, Ghana. The mixed method approach was used for data collection and analyses. In-depth interviews using a questionnaire and an interview guide were used to collect qualitative and quantitative data. The questionnaires were analyzed descriptively using the Statistical Package for Social Sciences version 22 while the interviews were analyzed using the thematic analysis. Findings from the study revealed that inequality caused by unpaid care work is noticeable in the areas of governance, education and paid employment. For instance, whereas the informal sector employs more women, the formal sector employment is largely dominated by men who tend to have sustained jobs. In all these situations women in rural areas tend to be the most affected by gender inequalities. Interconnected variables of vulnerability and suppression including residential status (rural or urban settings) intersect with gender to make rural women worse off in terms of gender inequality. The study recommends cash remittances to unemployed 'housewives' in rural areas and massive infrastructural development of rural communities to guarantee gender responsive public service to women.

Keywords: Gender Inequality, Gender Equality, Unpaid Care Work, Reproductive Roles, Intersectional Feminist.

Introduction

Unpaid care work is an important aspect of family and social life and an essential ingredient for the wellbeing and sustenance of individuals, families and societies (Stiglitz et al., 2007). The International Labour Organization [ILO] (2018) indicated that both unpaid care work and paid work are critical for the future of decent work, growing population, ageing society and diminishing extended family systems. Globally, studies have shown that with respect to the gender division of labour, women tend to perform more unpaid care work as part of the traditional role of the woman as opposed to their male counterparts who do more paid work and less unpaid care work (United Nations [UN], 2015). Empirically, across the world women perform 76.2% of the total amount of unpaid care work, which is three times more than men (ILO, 2018). It is again estimated that women spend two to ten times more time on unpaid care work than men (Organization for Economic Co-operation and Development [OECD], 2014). Thus, all over the world, women and girls naturally spend disproportionately more of their time on unpaid care work at the expense of other work.

Underrepresentation of women in paid jobs and decision-making processes due to unpaid care responsibilities is a global concern. About 606 million women of working age decided not to seek paid jobs because of the burden of unpaid care work (ILO, 2018). The UN Human Development Report indicates:

Even though women carry more than half the burden of global work, they are disadvantaged in the world of work-in both paid and unpaid work. Women are less engaged in waged work, earn less than men, remain underrepresented in senior decision-making positions, encounter uneven barriers to entrepreneurship and, in many countries, are more likely to be in vulnerable employment (UNDP, 2015, p.108).

Within Africa, there are significant disparities between men and women in the discharge of unpaid care work. In South Africa and Mauritius, for instance, available data from UNDP (2016) indicates that women spend between two to three hours of time on unpaid care work than men. The disparity in unpaid care work burden between men and women in Africa is accentuated as we compare women and men living in urban centres with rural communities (UNDP, 2016). In rural communities in Benin and Madagascar for instance, women spend three and four times more time respectively fetching water than men (OECD, 2014). In the Urban centres women spend approximately two times more than men fetching water in Benin and Madagascar (Kes & Swaminathan, 2006). In other words, the lesser time women allocate to paid work is

more than compensated for in unpaid work contribution. Across all income groups, unpaid care work is the most widely reported reason given for women's inactivity in middle-income countries, with 46.7% of women citing it as compared with 6.3% of men (ILO, 2018). Again, unequal distribution of paid and unpaid work between men and women results in unequal earnings. Thus, while women's total workload is higher than men's, their earnings are comparatively lower than men making them poorer and vulnerable in society. In other instances the, unpaid work burden on women also limits their participation in political processes and attendance at school (Antonopoulos, 2010)

Studies from the Ghana Time Use Survey (GTUS) conducted by the Ghana Statistical Service (GSS, 2012) suggest that women dominate in the area of unpaid care work while men dominate in paid work. There is an engendered pattern of engagement in paid and unpaid work. The average time spent by men on paid work according to the report is five hours and nine minutes while that of women is four hours, six minutes. However, there is a vast difference between men and women in terms of unpaid care work or extended Systems of National Accounting (SNA) activities. Women spend an average of 3 hours, 29 minutes equivalent to three times the duration men spend (1 hour 9 minutes) on the same activity (GSS, 2012). It also indicates that women in formal employment were engaged more in unpaid care work than their male counterparts in informal employment. However, women generally were seen to do more of the care responsibility and unpaid care work than the men, especially women who were not in informal employment. The GSS (2012), also highlighted geographical disparities in gender distribution of time spent on paid and unpaid care work done by women and men.

With regards to paid work, GTUS Report (GSS, 2012) reveals that on average, men in Ghana spend more time than women on formal sector employment and on primarily subsistence productive activities: Men spend an average of 65 minutes on formal sector work compared to 23 minutes for females.

There is a vast disparity between men and women in southern and northern Ghana in the allocation of time for the performance of unpaid care work (GSS, 2012). Statistics from GSS (2012) again indicated that in the Western Region women spend over twice more on unpaid care work than men. The same can be said for the Central, Greater Accra, Volta and Eastern Regions where women spend more than twice the time on unpaid care work than men. In the Ashanti, Bono, Bono East and Ahafo Regions, women spend thrice the time on unpaid care work or extended SNA as the men do. In the North East, Savannah and Northern Region, females spend seven times more time

than males undertaking unpaid care work. In the Upper West and Upper East regions, the survey observed that women spend almost five and four times respectively than males in carrying out unpaid care work, making women in the five northern regions- Upper East, Upper West, Savannah, North East and Northern Regions experience the highest burden of unpaid care work. For the productive activities such as formal sector paid jobs and the non-productive activities like entertainment, sports, culture, social events, leisure and learning, men spend more time than women (GSS, 2012). In the urban towns in the Upper West Region, 25.4% of men compared to 14.1% of women 15 years and older are engaged in public sector paid work (GSS, 2011). In the private formal sector in Upper West Region, 6.8 % of males as against 3.7% of females are engaged in paid work. In the case of private informal work, 66, 3% of males and 81.4% of females are engaged in this sector (GSS, 2011). It is common knowledge in Ghana to hear people say the woman's place is the kitchen, implying that she is responsible for food preparation and domestic chores in the house. What is of great worry is the fact that women living in deprived rural areas are more affected by the uneven distribution of unpaid care work than women residents in cities and urban centres (ILO, 2018). However, the emphasis in the literature has often been on gender equality between men and women and not inequality between women triggered by intersectional and interconnected variables of vulnerability such as place of residence, household size, employment status, level of education, and marital status, ethnicity etc. Thus, the intra comparison of women resident in rural areas and those in urban areas have often been downplayed in our discourse on gender equality on the assumption that all women are equal. The unequal distribution and participation in caring responsibilities are deeply rooted in tradition, and social institutions leading to stereotypes and gender division of labour often regarded as gender roles. This is further reinforced by the perception of a male breadwinner model and female caregiver responsibilities in society regardless of whether it is a developed or developing country (Antonopoulos, 2010). In the expression of ILO (2018, p. xxxi)

Gender inequalities in the home and in employment originate in the gendered representations of productive and reproductive roles that persist across different cultures and socio-economic contexts. With regional variations, the male breadwinner family model, overall, remains very much ingrained within the fabric of societies, and women's caring role in the family continues to be central. But this is changing.

However, if the differentials in opportunities and outcomes in paid and unpaid care work for men and women continue to persist and exacerbate inequalities, then the quest for gender equality will continue to be an illusion. The distribution of resources, obligations and power needs to be gender responsive everywhere irrespective of class, race, ethnicity, social status and geographical location as espoused by the intersectional feminist theorist (Crenshaw, 1994). Basically, this paper has been organized to put a spotlight on unpaid care work. Essentially, the paper examined the phenomenon of unpaid care work responsibilities between genders, especially among women living in rural and urban areas considering how intersectional variables of vulnerability and suppression interact with gender to promote gender inequality. It also examined the implications of unpaid care work on gender inequality in the Jirapa municipality in the Upper West Region of Ghana.

Theoretical Underpinnings

The theory of intersectional feminism is central to explaining unpaid care work and gender equality. Feminist theories emanated from perceived ideas of gender inequality in society. The feminist theories identified the sources of gender inequality and its pervasiveness and what can be done to achieve gender equality (Lorber, 1997). Thus, feminist theories are modelled on the principle of gender equality. Different types of feminist theories evolved, and each type made a specific contribution to improving women's status relative to men. However, each one had its own limitations (Lorber, 1997). Some feminist theories that evolved over time include but are not limited to Social feminist, Liberal feminist, Radical feminist, Multi-Ethnic feminist, Psychoanalytical feminist, Social construction feminist, and intersectional feminist theory. The theoretical underpinning for this study is hitched on the intersectional feminist principles because of its emphasis on other dependable variables that intersect with gender to exacerbate inequality.

Fundamentally, the unending conflict of feminist theories has often been, by what means women can be included as full members of society either on the basis of a formal 'gender-neutral' equality as sameness with men as social beings or on the basis of their difference from men resulting from biology. According to McLean and McKay (2015), this situation is described by Pateman (1988) as 'Wollstonecraft's dilemma', referring to the presence of the issue as far back as Mary Wollstonecraft's advocacy on women's rights in the 18th century. The dilemma is essentially about women wanting equality with men at the same time that they also recognize that they are different from men biologically. Feminists on one side of Wollstonecraft's dilemma perceive sameness as placing emphasis on the removal of social barriers to women's

participation in male-dominated spheres of life (authority, positions, full-time paid employment).

One missing gap from various feminist theories is the emphasis on sex or gender variance as the underlying cause of gender inequality to the detriment of other categorizations such as class, age, religion, sexual orientation, ethnicity etc. Thus intersectionality, a feminist theory was popularized by Kimberle Crenshaw in 1989 (UN, 2020). It originated from the dissatisfaction with the treatment of black women and the need to find a balance to accommodate all interconnected identities of suppression with gender. The intersection was classified as structural intersectionality highlighting the economic and social experiences of women of colour and political intersectionality which highlights conflicting political agendas (Crenshaw, 1994). Kimberle Crenshaw explained intersectional feminism as a prism for seeing the way in which various forms and categories of inequality often operate together and exacerbate each other in relation to gender (UN, 2020). Association for Women Rightsghts in Development (AWID) define intersectionality as “a tool for analysis, advocacy and policy development that addresses multiple discrimination and helps us understand how different sets of identities impact access to rights and opportunities” (AWID, 2004, p.1). Intersectional feminism explains how women’s different multiple identities integrate with gender to deepen their oppression and widen inequality. For instance, a black uneducated, disabled, rural woman would not experience the same form of inequalities as a middle class white or black woman living in the city. Women experience oppression in diverse decrees and in intensities, and these patterns of oppression are not simply interrelated but are influenced by those interrelationships. Intersectionality theory which emanated from feminism, therefore, has been celebrated as one of the most significant contributions that women’s studies have made so far (McCall, 2013) and cited in Carastathia (2014). Intersectional feminism seeks to justify that sex or gender is not the only identify for oppression, but it overlaps with other categories of oppression including social class, caste, ethnicity, ability, and race (Carastathia, 2014). These interrelated variables of gender need to be considered in the pursuit of gender equality for women. This theory can effectively aid in analysing intra and inter comparisons of genders to give a true sense of what needs to be done first, to bring all women to an equal level to advocate for gender equality with men. Hence the intersectional feminist theory is the preferred choice of the researcher in this paper as it fits with the intent of the study which is to examine other variables of vulnerability (Rural and Urban dichotomy) and their interconnectedness with gender in perpetuating inequality between men and women in society.

Methodology

Study Area

The area of study is the Jirapa Municipality of the Upper West Region (see figure 1). Jirapa Municipality lies in the northwestern corner of the Upper West Region of Ghana. It lies approximately between latitudes 10.250 and 11.000 North and longitudes 20.250 and 20.400 West with a territorial size of 1,188.6 square kilometers representing 6.4 percent of the regional landmass (GSS, 2014). The District was established by legislative instrument (LI) 1902 and was carved out of the then Jirapa-Lambussie District in 2007. The Municipality is one of the eleven (11) local government authorities in the Upper West Region and one of the three elevated to a Municipal status by LI 1902 in 2018 as part of Ghana's decentralization process. It shares boundaries to the south with Nadowli-Kaleo District, to the North with the Lambussie District, to the West with Lawra Municipal, and to the East with the Sissala West District. By way of topography, the landscape of the District is generally flat and low-lying with an average height of 300 meters above sea level (Jirapa Municipal MTDP, 2018). There are a few plateau surfaces ranging between 1,000-1,150 feet. These are found in Yagha and Jirapa areas. The population of Jirapa Municipal according to the 2010 population and housing census is 88,402 representing 12.6% of the population of the Upper West Region. Males constitute 47% and females constitute 53% (GSS, 2012). The projected population is estimated at 10,899. Children under 14 years old are estimated to be 41.9% of the population.

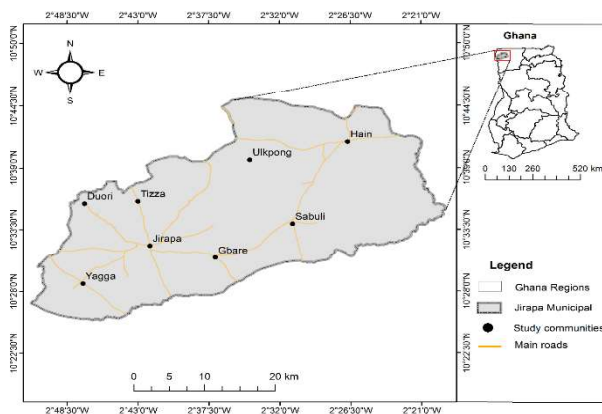


Figure 1 Map of Jirapa showing the Area and Town Councils

Source: Jirapa Municipal Assembly Medium Term Development Plan (2018-2021)

Study Design

The study used a mixed method research design. The mixed method approach is relevant for this study as it allowed the researchers to explore the strength of both quantitative and qualitative approaches to research (Creswell & Clark, 2007). Thus, the two approaches have helped build on the synergies of each other, which gave relevant and comprehensive findings on unpaid care work and gender inequality in northern Ghana. The study area consists of 13,911 households, and since all households could not be part of the sample size, an appropriate sampling determination formula by Yamane (1967) was applied to arrive at the sample size for individual face to face interviews.

$$n = \frac{N}{1 + N(e)^2}$$

Where n represents the sample size

N represents the population size

e represents a margin of error (0.05) x2

In determining the sample size, substitute the values in the equation

Where N=13,911

e = 0.05x 0.05

n=13911/1+13911(0.05x0.05)

n = 359

Table 1. Sample Size for Rural and Urban Areas

Target area	Number of Households	Households by proportional representation
Jirapa Town Council	3,753	104
Hain Area Council	1,162	24
Ullo Area Council	1,009	28
Gbare Area Council	953	21
Sabuli Area Council	1,276	32
Tizza Area Council	2,603	69
Duori Area Council	1,048	26
Yagga /Tuggo Area Council	2107	55
Total	13,911	359

Source: Field Survey 2020

Jirapa Municipality was chosen as the area of study due to a number of reasons which include: 1, The municipality is a fast-growing municipality that has both rural and urban features as part of its demographic characteristics. 2, It has a relatively higher younger population. Children under 14 years old are estimated to be 41.9% of the population. This has implications for unpaid care work. 3, It is one of the two areas where NGOs such as ActionAid Ghana and Jirapa Farmers Network (JIFAN) work with community women's groups to reduce gender inequality through the reduction, redistribution and recognition of unpaid care work. All seven Area Councils and one Town Council were part of the areas for the study.

Having determined the proportional sample size representation for each subgroup in this case each area or town council (table 1), a systematic sampling technique was applied to select households in communities from each Area or Town council as respondents since all the 13,911 households could not participate in the study. A systematic sampling technique which is also referred to as interval sampling was employed to give equal opportunities for each household to be included in the study. According to Neuman, (2012, p.157) “systematic sampling is simple random sampling with shortcuts for random selection”. In conducting systematic sampling to determine the households to be selected as respondents, the researcher first numbered each element in the sampling frame; i.e. the households. Instead of using a list of random numbers, the researcher calculated a sampling interval (36) by dividing the population of the Area/town council by the sampled proportion for the subgroup (Area/town council). The interval became a quasi-random selection method. To avoid bias in the selection of households, the first number to be selected for the start point for the interval was picked through a simple random sampling of the numbers 1, 2, 3, 4, 5, 7, 8 and 9. Whichever number was randomly picked formed the basis for the interval for selecting respondents. For instance, if the number 4 is randomly picked, it becomes the start number for the interval sampling. With the interval sampling of 36 then households with numbers 4, 40, 76, 112, 148... in that sequence would be sampled for the study.

It is important to note that in each household, people above 18 years and of sound mind were qualified to be chosen as respondents. In households where there was more than one person who qualified to be a respondent, a simple random selection was applied to pick one among the number that qualified to be part of the sample size. This was done by allowing respondents to pick randomly from a set of concealed numbers without prior knowledge of the numbers. The simple random technique guarantees the sample population an equal opportunity of being selected.

The purposive sampling technique used was meant to get respondents with the requisite competencies or who are beneficiaries of unpaid care work interventions in the Jirapa Municipality to share their perspectives on the study. Thus, the purposive sampling technique was used to sample group leaders from their respective groups who were beneficiaries of interventions provided by Jirapa Municipal Assembly, ActionAid Ghana and JIFAN organisations to reduce, redistribute and recognize unpaid care work between 2012 to 2020. Again, purposive sampling was also used to sample 2 women beneficiaries who are leaders in their respective groups in the communities and Jirapa Municipal Assembly and JIFAN as key informants due to their competencies working on unpaid care work and having collaborated with ActionAid Ghana to provide Early childhood centres, boreholes, health facilities, energy-saving, small ruminants, tricycles etc. for women living in rural communities.

Results and Discussions

Socio-Demographic and Gender inequalities

The selected Area and Town council communities included Hain, Sabuli, Gbare, Tizza Central, Ulkpong in Ullo, Duori, Yagga in Yagga/Tuggo and Jirapa town. Except for Jirapa town all the communities selected from the area councils are rural. Out of the 255 respondents from the rural areas, 51% were female and 49% male. In respect of the urban areas, there were 104 respondents with the sex distribution being 50% each. Again, out of the total of 359 respondents, 51% were female and 49% were male. There were 71% of respondents who live in rural areas and 29% in urban parts of the Jirapa Municipality. The distribution of the respondents according to rural and urban areas and sex is indicated in Table 2.

Table 2: Rural/urban versus Male/Female

Variables	Residence					
	Rural		Urban		Total	
Sex	Frequency	%	Frequency	%	Frequency	%
Men	124	49	52	50	176	49
Women	131	51	52	50	183	51
Total	255	100	104	100	359	100

Source: Field survey 2020

Age versus Gender

One key demographic variable in this study is age. Age is a critical factor as far as work is concerned. In Ghana, the compulsory age for retirement from active service in the public sector is mostly 60 years and the employable age is 18 years. Young people (below 18) are usually excluded from public sector employment because they are children and for that matter not physically and mentally developed. The volume of paid or unpaid work one can do depends on two key variables - age and one's ability. In this study, the age of respondents would matter as adults are more likely to undertake more of the paid and unpaid responsibilities including caring for children and the aged who are usually not very active and productive due to age and failing health concerns.

Table 3 as reported by respondents indicates that the age brackets 25-35 years constituted 28% of the respondents, while 23% were between the age brackets 36-44. Also, the least respondents were those between age brackets 61-64 and 65+ with 2% and 4% respectively. Thus, 94% of the respondents were still in active working life (less than 60 years) whereas 6% have passed their active working years (more than 60 years) but still contributing or benefitting from paid and unpaid care work.

Female and male respondents between 25 and 35 years form 14% each of female and male respondents and constituted 28% of overall respondents. For respondents in the age category of 18 – 24, there were 11% female respondents compared with 6% of males. This category constitutes 17% of total respondents. There were however 3% of male respondents between the age of 65 years and above compared to 1% for females above 65 years. Respondents between 65 years and above constitute 4% of total respondents. Male respondents within the age brackets of 56-60 years were 5% compared to females who were 3%, thus constituting 8% of total respondents. Respondents between the ages age 45 and 55 years constitute 18% comprising 9% female and 9% male. Female respondents were mostly from the younger age bracket (18-44 years) compared to males who were mostly from the older age bracket (45-65 years). The average age of male respondents was thus higher than females. The study further revealed that 45% of the respondents fall within the youthful category. This group is full of energy and youthful exuberance. Existing literature on Jirapa indicates over 41% of the population of Jirapa is under 14 years and 6% are 65 years and above (Jirapa Municipal Assembly MTDP, 2018) and can barely do much work. Aside from being typical of a growing population (GSS, 2012), this kind of population structure imposes a significant burden of care on the working population between 18 and 60 years.

Table 3: Age versus Gender

Variable	Sex		Total	
	Male	Female		
Age	18-24	22 (6)	38 (11)	60 (17)
	25-35	49 (14)	50 (14)	99 (28)
	36-44	41 (11)	44 (12)	85 (23)
	45-55	33 (9)	33 (9)	66 (18)
	56-60	17 (5)	11 (3)	28 (8)
	61-64	5 (1)	5 (1)	10 (2)
	65+	9 (3)	3 (1)	12 (4)
Total	176 (49)	183 (51)	359(100)	

Chi-square test 0.266(14.571)

NB: Figures in parenthesis are in percentages and chi-square values

Source: Field Survey, December 2020

Marital Status versus Gender

In Table 4, 64% and 19% of respondents are married and single respectively. Widows constitute 8% while widowers represent 7% of respondents respectively. There were 33% of respondents from rural areas who are married compared to 31% of respondents living in urban areas. There were 9% of male respondents who were single compared to 10 female respondents. However, 2% of the respondents are divorced. Respondents in urban areas recorded as widows were 6% compared to 2% for rural areas. Thus,

there were 8% of respondents who were widows. Widowers constituted 7% of total respondents. Married people in a household are more likely to have children, and care for dependents and as a result may have the greatest burden of care responsibilities for children, sick, disabled and aged people. The burden of care may even be greater for single parents (widows, widowers and divorcees) who may have to contend with the responsibilities of a breadwinner and caregiver at the same time in the household. The data gathered basically speaks to the literature available in the municipality. At least three-quarters of females (76.7%) are married as opposed to 49.6% of males. At age 65 and above, widowed females constitute 51.9% while males account for 9.8% [GSS, 2014].

Table 4: Marital Status and Gender

Variable		Sex		Total
		Male	Female	
Marital status	Married	119 (33)	113 (31)	232 (64)
	Divorced	4 (1)	4 (1)	8 (2)
	Single	31 (9)	37 (10)	68 (19)
	Widow	0	28 (8)	28 (8)
	Widower	22 (7)	0	22 (7)
	Separated	1 (-)	1(-)	2 (-)
Total		176	183	359
Chi-square test = 0.084 (16.606)				

*NB: Figures in parenthesis are chi-square values; * represents 10 significance level.
Source: Field Survey, December 2020*

Household Size

From the data captured in Table 5, 27% of the respondents have household sizes ranging between one and three, 32% of household sizes are within the range of four to six. 25% of respondents have household size of seven to nine people and 16% have household sizes of ten and above. The average household size in the municipality is six (GSS,2012). This number is far higher than the average national household size of 3.4 for rural communities and 3.2 for urban centres.

Table 5: Household Size

Variable	Frequency	Percent	Min	Max	Mean	Std.
Household size						
1-3	98	27	1.00	4.00	2.421	1.135
4-6	115	32				
7-9	89	25				
10+	58	16				
Total	359	100				

Source: Field Survey, December 2020

Level of Education versus Gender

Table 6 captures the educational attainments of respondents. Out of the total number of respondents, 37 % have no formal education and so can neither read nor write in their native language or English. Of this total 18% were male and 19% were female with 72% coming from the rural areas and 28% of the total from urban areas. Respondents who have basic education were 22% made of 13% female and 9% male. For senior high school, there were 21% of respondents who had been to Senior High School. Out of the total number of respondents who have been to Senior High School 12% were female and 9% male. Respondents who have been to the tertiary level constitute 17% of the total respondents. Out of the number 12% were male and 5% female.

Thus, more male respondents had a higher education than females even though many of the female respondents compared to males enrolled at the basic and secondary levels. There were more non-literate female respondents (19%) compared to men (18%). More of the illiterate population reside in rural areas as depicted by the responses of rural areas (72%) compared to the towns (28%). Generally, the pattern of responses indicates that there are more non-literate women and men living in rural areas compared to Jirapa town. Existing literature for instance suggests that the population of Jirapa Municipality is 44.9% literate and 55.1% illiterate (GSS, 2014) compared to the 63% of respondents who have formal education as compared to 37% without formal education. The rise in the literacy rate over time (2014-2020) could have been triggered by enrolment campaign drives, the capitation grant and the school feeding programme.

The level of education plays a significant part in the kind of employment one will get and the kind of respect one will command in society to warrant selection or nomination for leadership roles in communities. Education can offer protection against various forms of vulnerability, especially in marriage relationships.

Table 6: Level of Education and Gender

Variable	Sex		Total	Chi-square test
	Male	Female		
Education				0.037 (19.292**)
Non-literate	63 (18)	67(19)	130 (37)	
Basic	31 (9)	47(13)	78 (22)	
SHS	31(9)	44 (12)	75 (21)	
Tertiary	42 (12)	19 (5)	61(17)	
Post diploma	6 (2)	6 (2)	11 (3)	
Graduate	3 (1)	0	3 (1)	
Total	176 (49)	183 (51)	359 (100)	

Source: Field Survey, December 2020

Employment status and Gender Inequality

In Table 7, 24% of respondents work in the formal sector which includes teaching and governmental jobs. Out of this number 14% are male and 10% female. A significant percentage of respondents, constituting 66%, are in the informal sector which is dominated by agriculture, petty trading and artisanal work. This figure is made up of 33% male and 33% female respondents. With respect to domestic work and housekeeping, 10% of respondents from rural areas provided such services. According to GSS (2014) the major preoccupation of the people of the Municipality is farming. A total of 89.5% of respondents who are into agriculture are from rural communities whereas 10.5% of respondents in agriculture are from urban areas.

From the data in Table 4.6 women spend their time undertaking not only domestic work but also being actively involved in paid work such as petty trading, skills and vocational work to generate income for the sustenance of households. In urban centres, women share their time effectively between paid and unpaid domestic work. As a result, the burden of unpaid work does not fall solely on women as in the case of married women at the community level who spend most of their time doing household work. Hence, it is not surprising that the majority of the respondents who are domestic workers are married women living in rural areas. Thus, the burden of domestic work makes it challenging especially for women in rural areas to engage in paid jobs as compared to their counterparts in the urban areas and also men in general. According to the ILO (2018), 606 million women of working age decided not to seek paid jobs because of the burden of unpaid care work.

Table 7: Employment Status and Gender Inequality

Variable		Sex		Total	Chi-square test
		Male	Female		
Employment	Formal	50 (14)	35 (10)	85 (24)	0.004 (15.557***)
	Informal	118 (33)	119 (33)	237 (66)	
	Housing keeping	8 (2)	29 (8)	37 (10)	
Total		176 (49)	183 (51)	359 (100)	

NB: Figures in parenthesis are in percentages chi-square value

NB: *** represents 1 significant level

Source: Field Survey, December 2020

Effect of Unpaid Care Work on Paid Work in Rural and Urban areas in Jirapa Municipality

In figure 2, 31% of total respondents indicated that the performance of unpaid care work reduces their income earnings. This was closely followed by 25% of total respondents who agreed that doing unpaid care work reduces their time for paid work. 24% of respondents further indicated lateness to work as one of the effects of unpaid care work. Respondents who believe performing unpaid care work contributes to absenteeism were 11% of the total respondents. Nine percent did not have any response within the category as indicated below.

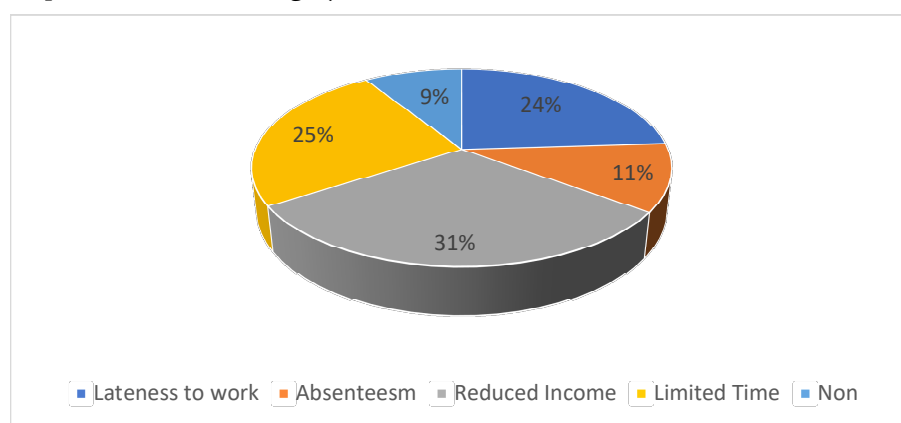


Figure 2: Effect of Unpaid Care Work on Paid Work of Respondents in Rural and Urban Areas

Source: Field Survey, December 2020

To juxtapose this with secondary data, it is documented that Women and girls' ability to escape from poverty and participate in decision making and educate themselves by going to school and engaging in productive and remunerated activities is often limited by their responsibilities for everyday unpaid household and care activities (GSS,2012). Globally it is estimated that about 606 million women of working age decided not to seek paid jobs because of the burden of unpaid care work (ILO, 2018). This is a concern to intersectional feminists seeking gender equality. Social Feminists argue that capitalism relegated women to perform low paid jobs in the industrialized era in order for the employers to maximize profit. This facilitated the creation of anti-egalitarian societies where women were impoverished with low incomes, low status and reduced to domestic and care workers (Lorber,1995). Thus, it is widely reported across various income groups that unpaid care work is one of the reasons advanced for women's inability to participate in paid employment in middle-income countries. 46.7% of women in Ghana cited unpaid care work as the reason for their low involvement in paid jobs compared to 6.3% of men (GSS, 2011). In Ghana, gender inequality in the distribution of unpaid care work between men and women increases women's work burden and therefore is a constraint to their representation and participation in paid work, high education and decision-making processes (GSS, 2011). The focus group discussions among women in the Ulkpong community in the Ullo Area Council and Jirapa town points to the fact that women are unable to do full time paid jobs due to the burden of unpaid care responsibilities. They are however able to do petty trading, menial jobs and farming to raise a little income to support the household. It was agreed in the focus group discussions held with women in Ulkpong that, they spend more time doing unpaid work as a result they cannot afford to do more of the paid jobs as their husbands would do. The women in Jirapa do a lot of household work resulting in their inability to spend more time on paid jobs. They built consensus in their discussions as captured in the below statement:

We spend about seven hours on productive activities like selling pito (local Alcoholic beverage), bean cake, vegetable production, sale of dawadawa, and shea butter/nuts in the market usually on market days, Sundays and even after returning from the farm. These are however not permanent jobs and do not earn us as much as full employment or control over the sale of farm produce. Men however spend not less than 8 hours a day doing formal and informal work such as teaching, driving, building and construction, mechanic and repair works, office work and engaging in farming as a business. They can do so because they don't mostly get involved in domestic work. Due to household

chores, women would not be effective at work as they are more likely to go to work late, or to be frequently absent hence would have reduced time to concentrate on formal paid jobs (Focus Group discussion, Jirapa Women)

The position of the discussants of focus groups was also buttressed by key informant interview with the Municipal Planning Officer for Jirapa who suggested that women need sustainable jobs to make them economically empowered. According to his statement:

The women in Jirapa do most of the domestic work and engage in informal jobs which are not sustainable. When they are provided with the requisite training, education and capital they can get employed in both the formal and informal sectors of the economy to match the men (Municipal Planning Officer, Jirapa, 2020)

A study conducted by OECD indicates that:

In countries where women shoulder most of the responsibility for unpaid care work, they are less likely to be engaged in paid employment, and those who are active in the labour market are more likely to be limited to part-time or informal employment, and earn less than their male peers. The gender inequalities in unpaid care work thus translate into higher gender gaps in labour outcomes (OECD, 2014)

Perhaps this explains why women dominate in informal paid jobs compared to men in the Jirapa Municipality as captured by the 2018 medium term development plan of the Municipality. For instance, in the urban towns in the Upper West Region 25.4% of men compared to 14.1% of women 15 years and older are engaged in public sector paid work whereas, in the private formal sector in Upper West Region, 6.8 % of males as against 3.7% of females are engaged in paid work (GSS, 2011). About 98% of respondents who are into formal jobs are residents in urban towns. In the case of the private informal work 66.3% of males and 81.4% of females are engaged in this sector (GSS, 2011).

Effect of Unpaid Care Work on Education in Rural and Urban areas in the Jirapa

Table 8 points to the likely effects of unpaid care work on education. The respondents identified lateness to school, absenteeism in school (truancy), lack of time for studies, school dropout, and inability to pursue higher education as likely effects of unpaid care work on education. There were 23% of women respondents compared to 18% of

men respondents who attributed lateness to school as one effect of unpaid care work. Of all the respondents who indicated absenteeism as an effect of unpaid care work, 11% of them were women mostly from rural areas compared to 7% of men. Out of the respondents who indicated that unpaid care work does not give them enough time for studies, 21% of them were females and 19% were males. For the inability to attain higher education 35% of males compared to 23% of females shared that view as an effect of unpaid care work. There were 21% of males compared to 22% of females who indicated school dropout as one effect of unpaid care work. From the data in table 4.6, it is clear that 100% of all respondents believe that unpaid care work affects girls' education.

Table 8: Effect of Unpaid Care Work on Education of Respondents in Rural & Urban Areas

EFFECT	SEX	RESIDENT		TOTAL	%
		Rural	Urban		
LATENESS TO SCHOOL	Male	19	13		18
	Female	33	9		23
SCHOOL ABSENTEEISM	Male	11	1		7
	Female	13	7		11
NOT ENOUGH TIME FOR STUDIES	Male	22	12		19
	Female	26	12		21
SCHOOL DROP OUT	Male	25	12		21
	Female	33	7		22
NOT ABLE TO GO FOR HIGHER EDUCATION	Male	47	14		35
	Female	26	17		23
TOTAL	Male	124	52		49
	Female	131	52		51
	Total	255	104		100

Source: Field Survey, November 2020

Available data at the office of the Jirapa Municipal Assembly corroborates the position of household respondents that unpaid care responsibility limits girls' participation in education and affects their ability to perform well in school. Basic Education Certificate of Education (BECE) results for boys and girls speak to the facts. The performance of boys in 2015, 2016 and 2017 was 39.30%, 45.70% and 53.50% respectively compared to girls whose scores were 20.50%, 22.50% and 32.10% for the same period respectively (Jirapa Municipal Assembly, 2018).

In a focus group discussion with women and men living in rural and urban areas, there was consensus that it is due to unpaid care work responsibility that most girls are not able to attain the same level of education as men. For instance, it was suggested in Ulkpong that education delays marriage and offers better prospects for people and

that girls who engage in domestic care are likely not to do well in school and may drop out to marry and concentrate on care responsibilities.

Their consensus was summed up as follows:

Most of us did not go to school because we must be at home to help with household activities and care work including babysitting and caring for sick and older family members. Even those who are privileged to go to school drop out early from school to enable them to concentrate on home activities which would also compel them to marry early. We don't have cattle again, so the boys are free to go to school to whatever level they want to. This is the reason why you see most of us females being illiterates and many of the men having education (FGD, Ulkpong women)

From the primary data gathered and analyzed compared with secondary information, there is no doubt that both women and girls are often the victims of gender inequality in educational attainments and outcomes both in urban and rural areas resulting from unpaid care work. However, rural women are more affected hence the high illiteracy rate among respondents from rural areas. For instance, out of the total of non-literates, 72% reside in rural communities and 28% live in urban areas. 52% of the non-literate respondents are women and 48% of the non-literate respondents are men. According to the intersectional feminist theory (Carastathia, 2014) illiteracy among women is a variable of suppression that when it interacts with gender places rural people at a disadvantaged position compared to their counterparts in the urban centres who are striving for equality with men. Intersectional feminist theories are interested in removing obstacles or barriers that prevent women's effective participation in public sphere on equal terms with men.

Effect of Unpaid Care Work on Participation in Decision-making and Leadership in Rural and Urban areas in Jirapa Municipality

Table 9 captures participants' responses regarding their perception of the effect of unpaid care work on women's participation in decision-making processes and leadership roles. Some of the effects identified and responded to include lateness to meetings, no time for community politics, and less time for participation in decision making at meetings. Out of the total 359 respondents, 53% of males and females identified a lack of time for community politics as an effect of unpaid care responsibilities. Also, 26% of males and 27% of all females mostly from rural areas did indicate that unpaid care work gives them less time for effective participation in decision making and leadership

roles. Also, 20% of male and 17% of female respondents indicated that lateness to meetings as a result of unpaid care work is one of the possible reasons why women shun participation in decision making and leadership roles. Only 1% of female and male respondents identified the prevention of people from travelling for needed exposure to engage in decision-making processes as one effect of unpaid care work with just 1% of respondents having no idea about the effect of unpaid care work on participation in decision-making and leadership roles. About 99% of total respondents agree to a very large extent that unpaid care responsibilities contribute to the low participation of women in decision-making processes and governance at all levels.

A study conducted by Ghana Statistical Service revealed among other things that women's participation in decision making roles and higher education is hampered by the burden of unpaid care responsibilities (GSS, 2012). Data available at the Jirapa Municipal Assembly indicates that only 11% of women are Assembly members due to cultural and unpaid care responsibilities (Jirapa Municipal Assembly, 2018). According to Moser's (1993) triple role framework, as cited by Oxfam (2010), Community management work is usually done by women whereas community politics is undertaken by men. The exclusion from participation in governance and decision-making processes affects the status of people in society. Thus, according to intersectional feminists (Carastathia, 2014) the low status of women when it intersects with gender worsens women's status compared to men. Table 4.7 captures data from male and female respondents living in rural and urban areas on the effect of unpaid care work on participation in decision-making processes.

Table 9: Effect of Unpaid Care Work on Participation in Decision-Making and Leadership in Rural and Urban Areas

EFFECT	SEX	RESIDENT		TOTAL	%
		Rural	Urban		
LATENESS TO MEETINGS	Male	24	12	36	20
	Female	21	11	32	17
NO TIME FOR COMMUNITY POLITICS	Male	66	25	91	52
	Female	80	19	99	54
LESS TIME FOR PARTICIPATING IN DECISION MAKING	Male	31	15	46	26
	Female	29	21	50	27
PREVENT TRAVELLING FOR EXPOSURE	Male	2	0	2	1
	Female	1	0	1	1
NON	Male	1	1	1	1
	Female	0	1	1	1
TOTAL	Male	124	52	176	
	Female	131	52	183	

Source: Field Survey, December 2020

In focus group discussions it was indicated that women are hardly involved in decision-making processes and leadership roles due to gender division of labour which traditionally keeps the woman in the 'kitchen'. This according to discussants is the major source of the powerlessness of women and for that matter a serious area of gender inequality in the Municipality. It was reported in all the FGDs that, the unit committees are dominated by males and the traditional rulers or Chiefs, who are all men. The concept of Queen mothers, according to them, is alien to the areas. They intimated that the concept is yet to be fully appreciated and integrated into the traditional systems. According to Longwe's (1994) Gender Equality and Women's Empowerment Framework, participation especially in decision-making processes is one of the strategic needs that is essential for women's empowerment leading to gender equality. Low participation in decision making contributes to women's subordinate positions in society. At the heart of gender inequality lies the culture and traditions of families and communities which over the years have contributed to perpetuating patriarchy which according to radical feminists has contributed to gender inequality between men and women. Radical Feminists are of the opinion that gender equality is possible by breaking these barriers to women's participation which include gender division of labour imbedded in patriarchy (Lorber, 1997)

Effect of Unpaid Care Work on Leisure in Rural and Urban areas in Jirapa Municipal

In Table 10 respondents comprising 68% of males and 79% of females identified not having enough rest as the leading effect of doing unpaid care work. This figure represents 73% of total respondents. About 2% of male respondents and 1% of female respondents cited limited time with children as an effect of unpaid care work while 1% of male and female respondents cited low socialization and inability to participate in funerals and weddings as effects of unpaid care work. By implication therefore low socialization and the inability to attend funerals are not perceived by respondents as a major effect and therefore not widespread. Interestingly enough, 29% of male and 19% of female respondents were indifferent to the above effect and could not identify themselves with any effect unpaid care work has on their leisure time.

Secondary data tells us that leisure is a need which has become a luxury for certain groups, with health implications. The equal division of unpaid work between the genders is going to lead to an overall improvement in people's health through leisure (European Parliament, 2016).

Data gathered from groups (Time use Diaries kept by women) in Jirapa indicates that women have less than 2.5 hours for leisure against men who have about six hours of rest. Data from a time use survey by Ghana Statistical Service (2012) indicates that

males spent an average of 121 minutes socializing compared to 104 minutes by females.

Table 10: Effect of Unpaid Care Work on Leisure of Respondents in Rural and Urban Areas in Jirapa

EFFECT	SEX	RESIDENT		TOTAL	%
		Rural	Urban		
NOT HAVING ENOUGH REST	Male	78	41	119	68
	Female	97	48	145	79
LIMITED TIME WITH CHILDREN	Male	4		4	2
	Female	1		1	1
LOW SOCIALIZATION	Male	0	1	1	1
	Female	1	0	1	1
INABILITY TO ATTEND FUNERALS AND WEDDINGS	Male	1		1	1
	Female	1		1	1
NO KNOWN EFFECT	Male	41	10	51	29
	Female	31	4	35	19
	Total	255	104	360	

Source: Field Survey, December 2020

In a key informant interview with Madam Vida, a women's group leader in Gbare and a beneficiary of ActionAid and Jirapa Farmers Network (JIFAN), intervention on unpaid care work stated among other things that "Women work so much in the rural communities to the extent that they have very little time for rest and leisure activities. Working without rest and play can affect your health..."

Effects of Unpaid Care Work on Gender inequality in Rural and Urban areas in Jirapa Municipality

Education is key to achieving gender equality. Data available at the Jirapa Municipal Assembly indicates that out of the total literate rate of 44.9% of the population of the Municipality, 45% are women and 55% are men as indicated in figure 3. Performance in education at the Basic Education Certificate Examination (BECE) level has been very abysmal for the girls as compared to the boys. According to the Jirapa Municipal Assembly (2018), the pass rate for girls at the 2017 BECE stood at 32.1% for girls and 53.5% for boys. It was observed that unpaid care work contributes to low educational attainments and outcomes for females in Jirapa Municipality with the worse affected being females in rural areas where progression from basic to tertiary is challenging.

Key to gender equality is participation in decision-making processes and leadership roles. About 98% of women respondents interviewed indicated that unpaid care work affects their ability to participate in decision-making processes in the communities. According to Doris, the leader of Gbare Sunta women’s group “Decision making and leadership in the governance structure continues to be dominated by men who take decisions that affect our lives on daily bases”. All traditional leaders in the 137 communities in the Municipality are male. As indicated earlier, out of the 55 Assembly members only 6 are women representing 11% of women’s representation in local governance in the Municipality (Jirapa Municipal Assembly, 2018). In focus group discussions among women’s groups in UIKpong and Jirapa, unpaid care work, high illiteracy among women and lack of paid jobs have been attributed as the reasons for women’s low participation in decision making in Jirapa Municipal. As a result, the primary and secondary data point to the fact that unpaid care responsibilities have contributed to gender inequality in participation in governance processes between men and women. The rural areas appear to be hard hit resulting in low representation of women in governance.

Inequalities equally exist between men and women in paid jobs. Employment statistics of the Municipality show that though the employed female population is 19,323, representing 55% of the total working population of 35,069, 62% are engaged in the agricultural sector which is 19,323 of the total employed population of 35,069 representing 55% of the working population, 62.0% are engaged in the agriculture sector which is basically subsistence ((Jirapa Municipal Assembly MTDP, 2018). Thus, there are more women employed in the informal sector compared to the formal sector. According to OECD (2014) the gender inequalities in unpaid care work translate into higher gender gaps in labour outcomes between men and women.

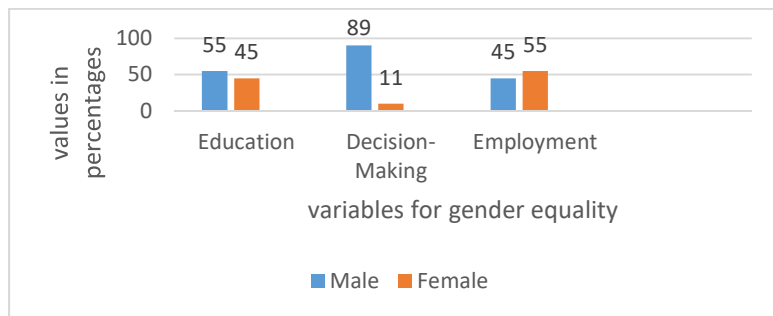


Figure 3: Levels of equalities Between Men and Women Living in Rural and Urban areas

Source: Jirapa Municipal Assembly, 2018

From the primary and secondary data analysed, there is gender inequality between men and women in educational outcomes, participation in decision-making and paid employment in the Jirapa Municipality with unpaid care work responsibilities being a contributing factor. Thus, at the root cause of inequality lies unpaid care work which is mostly undertaken by women, especially in the rural areas who also suffer from various variables of suppression and oppression due to their gender and social status. This has been well captured and explained in the Medium-Term Development Plan of the Jirapa Municipal Assembly as:

Women's economic situation worsens due to the high burden of unpaid care work at various homes which is not accounted for and makes it difficult for women to engage in other economic activities. They, therefore, become perpetually dependent on their spouses for everything and hence further weakening their status in society (Jirapa Municipal Assembly, 2018.p 89)

The dichotomy between rural and urban women in the execution of unpaid care work is a critical area to address in our quest to achieve gender equality as emphasised by intersectional feminist theorists ((UN, 2020 and AWID, 2004). This study revealed that rural women are disproportionately affected by unpaid care work more than their colleagues in Jirapa town. Their plight is exacerbated by interconnected variables of vulnerability such as geographical location, marital status, household size, education and employment status as espoused by Kimberle Crenshaw (1989). In Jirapa rural women are more likely to receive little or no education, to be relegated to the background in decision-making processes, and to have little opportunity for formal employment even though they dominate in the informal sector which offers mostly unsustainable jobs.

Conclusions

As a result of unpaid care work responsibilities, there exist gender inequalities in educational attainments and outcomes not only between males and females but also between rural and urban dwellers in the Municipality. Thus, many rural women are illiterates with little or no formal education compared to their counterparts living in Jirapa town. The burden of unpaid care falls disproportionately on rural women compared to urban women due to poor infrastructure development to provide the needed social services that can reduce the burden of unpaid care work in the rural areas or, in some cases, due to the total lack of such infrastructure. These include early childhood centres, transportation, schools, health care centres and utility services. Other variables of suppression intersecting with gender and widening

gender inequality include unemployment, illiteracy, marriage and large household sizes. Generally, unpaid care work was identified as a contributing factor hindering women's participation in paid work. Data available at the Jirapa Municipal Assembly indicates that even though there are more women engaged in employment and paid jobs compared to men, they are mainly informal jobs which are not only largely subsistence in nature but also unsustainable. There is a much wider gender inequality gap between men and women in decision-making roles in the Municipality. Due to domestic responsibilities of unpaid care work, a very significant proportion of women compared to men are missing in local governance processes (Unit committees, Area Councils and District Assembly) and therefore are not actively participating in decision-making processes. The concept of Queen mothers still remains alien to most communities and hence not much appreciated by traditional rulers and community members.

Recommendations

The study recommends the following to improve rural and urban women's status relative to men. The state needs to expand the LEAP as a social policy intervention to specifically target and include domestic workers (housewives) and vulnerable people living in mostly rural areas for cash transfers in the form of monthly stipends, or grants matched with skills training and capacity building to enable them venture and undertake sustainable paid jobs. Stipends could assist them to engage services of third parties to provide services thereby freeing some of the time they spend on unpaid care responsibility to be used for paid jobs. The state should embark on rural infrastructural development in the area of gender-responsive public services such as water supply, an extension of electricity, schools, hospital, clinics, and childcare centres to reduce the burden of care, especially on rural women. In order to effectively redistribute gender roles, parents must educate boys and girls on the need for shared responsibility in the performance of household tasks such that when they grow, they would not depart from it. In doing so males and females would appreciate and respect unpaid care work as important as paid care work. This is expected to reduce the burden of unpaid care work on women, especially those living in rural areas to have free time to attend and complete school and to participate in paid jobs and leadership and decision-making processes.

Conflict of interest statement

The authors declared no conflict of interest.

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