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1. INTRODUCTION

This are the Terms of Reference for a consultant to conduct a study on the Economy of Care in Occupied Palestinian Territory and Jordan. The consultant is expected to be able to bring first hand data from both countries and reflect that on the study, as well as a desk review on the issue with special focus on the relevant locations and the MENA region.

2. BACKGROUND INFORMATION ON THE INTERVENTION

2.1 Alianza por la Solidaridad (ApS)

Alianza por la Solidaridad (ApS) is a Spanish NGO existing since more than 30 years with presence in more than 20 countries in Latin America, the Middle East and Africa. Alianza has been present in the Middle East since 1993 and in oPt. Since 1998, and has a permanent office in Jerusalem. Since 2009 it has developed a process of sectorial and geographical targeting for its interventions, which meant the prioritization of women’s rights. Alianza por la Solidaridad (ApS) gender equality in the Middle East works within three main lines of action:

• Prevention and response for Gender Based Violence, individual and community approach.
• Women’s economic empowerment.
• Women’s participation and active citizenship.

ApS maintains stable local partners with whom it works in a sustained manner and deepening not the relations and regular contacts through the office in the field, but a fluid communication and analysis of the changes caused by the humanitarian situation in Palestine. Alianza works closely with its partners and support their work in a manner that represent Alianza and the partners values. Alianza has extensive experience and expertise on women’s rights and there is a high degree of knowledge.
about the environment and only relation with the population, civil society organizations, other humanitarian actors and local public entities. Alianza por La Solidaridad is member of Action Aid since 2018.

Action Aid and Alianza share the idea that when people become aware that their future is in their hands and when they organize to challenge power structures and contribute to the betterment and changing of institutions, changes can succeed. These changes should take place on a global scale in order to generate maximum impact, and they should be rooted in the political values of solidarity and internationalism. In addition, for Action Aid and Alianza, Social justice, gender equality, and climate justice succeed through individual and collective actions that actively change inequitable and unjust power relationships, either hidden, visible, or invisible, from the home to local, national, and international spaces. The empowerment of people that live in poverty and marginalization, and of women and youth is a crucial part of creating these changes. Collective efforts and fights are stronger when they are bound together through solidarity, campaigns, and common causes between communities, organizations, and social movements and other allies to influence local and global institutions and public policy.

2.2 The Project

Alianza is the recipient of a grant from AECID for the implementation of the project “Reduce gender inequalities in the Occupied Palestinian Territory. It is intended to have an impact especially on adult women and young survivors or those at risk of GBV in Gaza and Area C.” (AECID 18-CO1-1179). As part of its work towards the project and based on its solid belief in empowering local actors and partners. The project is being implemented in the West Bank and Gaza strip with ApS partners, who along with other organizations which share common views and vision on relevant matter of Gender Based Violence (GBV), women’s rights, women empowerment, ...etc.

Alianza works against gender violence with an integrated approach to address the full cycle of violence from the personal, family, socioeconomic dimension to the public dimension on political and legislative levels. We address the issue of gender-based violence from the perspective of Sexual and Reproductive Rights because our experience demonstrated that they are intimately related. We have consolidated our
work in Latin America and in the Middle East, as much in contexts of political stability as in long-lasting conflicts¹.

To address the full cycle of violence, and applying a holistic approach in the different interventions, ApS produce information, data and knowledge on the issues related to its lines of work.

3. DESCRIPTION TERMS OF REFERENCE

3.1 Purpose of consultancy

The purpose of this consultancy is to look at the contribution that women make to the economy through the care services they provide to the household, taking into account that those services have been increased lately as the immediate result of the global pandemic. This contribution goes almost invisible to policy makers, legislators, and also researches and in many cases it is naturalized as a responsibility of women for gender issues. At the same time the load of work and time invested in care work, might be one of the main obstacles for women in the MENA region, Jordan and Occupied Palestinian Territory as the focus of this study specifically. This consultancy has also a purpose of understanding the link between the women burden unpaid care work and their low participation in the market in Jordan and Palestine. Some important elements to consider and analyze will be:
- The believes and the recognition about the care work in Mena Region.
- Policies and programs that support or invest in care work.
- Co-reponsability programs to reduce and redistribute the care work.

The consultancy will examine experiences of women and will draw relevant case studies.

3.2 Background and Justification


AECID 19-CO1-1179: “Reduce gender inequalities in the Occupied Palestinian Territory. It is intended to have an impact especially on adult women and young survivors or those at risk of GBV in Gaza and Area C.” Page 4 | 19
The issue of Economy of Care is an old-new issue that has re-emerged strongly again, during the present eruption of the COVID19 pandemic. Presently, with the lockdown it has shown that issues such as Care Economy, Masculinities, gender roles and so on need to be analyzed again, and during this period of the pandemic, it might be a good opportunity to intervene and change, provided we look at the pandemic as a new gate\(^2\) on which we decide to walk through, heading to a more just and humane world.

The Economy of Care has been having more attention lately by feminist economists and others, but still, it is an issue that needs not only more research in regions such as the MENA region, but also it needs to be adopted in agendas of action, for Feminist, Women's and Human Rights movements.

Feminist economists have proposed a radical conceptualization of the economy that puts human and ecological needs and well-being at the center against the background of their analysis of care economy\(^3\).

In addition, as well said by the Organization for Economic Cooperation and Development (OECD) "women’s unequal share of unpaid care work can prevent their full participation in the economies of developing countries; however, care needs are growing globally. How can governments and development partners meet the needs of families and communities, while ensuring that all citizens benefit from economic opportunities and fair remuneration"?\(^4\)

Generally, economists do not pay enough attention, or don’t pay attention at all to the economics of care. This gap is very important, as it might be essentially the main reason why women; who are the majority doing this kind of work, are excluded from the market, as care work and care economy are not considered in the financial accounts of the states. Care economy is undervalued despite it impacts the high contribution it makes to the households, communities and Gross Domestic Product.

\(^2\) https://www.ft.com/content/10d8f5e8-74eb-11ea-95fe-fcd274e920ca
\(^4\) https://www.oecd-ilibrary.org/social-issues-migration-health/enabling-women-s-economic empowerment_EC90D1B1-EN

AECID 19-CO1-1179: “Reduce gender inequalities in the Occupied Palestinian Territory. It is intended to have an impact especially on adult women and young survivors or those at risk of GBV in Gaza and Area C.”
(GDP), it is not taken into account. Some argue that it is undervalued simply because it has been historically provided by women at low or no cost. Largely, the responsibility of care is disproportionately placed upon women, and this might be one of the reasons when women voluntarily refuse to take on full time jobs or even parttime jobs which will add to their already heavy load and maintains an unequal system that does not guarantee women's right to decent work, excludes them from social protection systems, widens the gender gap in the economy. Redistribution of care’s responsibilities, reduce the women burden and the recognition of care work as a value is needed to contribute to a fair economic system. In conclusion, what is needed, is not only that women enter the markets, but also to have an egalitarian distribution of care work, as well as models of markets that recognize the burden of women, and reduce those burdens. A Model of market that take into account the whole component of care work which is necessary and vital for the households and gives value to it.

All this, devaluates and under-estimates the contribution that women provide to the economy when they provide care services which usually are not provided in the market and are of high price when they are. If we look at the devaluation theory, we find that it seeks to explain the low-wages that are typical of care work by focusing on the fact that many care workers are women and that gender-based biases remain in societies. Devaluation theory asserts that decision makers under-estimate the contribution of female dominated jobs to organizational goals, including profits, and therefore underpay these workers.

Care is a unique form of work because it is "intrinsically motivated," in that not just money motivates people to care. Folbre, for example, argues that care work has been historically undervalued because it has been historically provided by women at low or no cost, and goes far to explain why women earn less than men. To this end, Folbre

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5 Folbre (N.2)

6 Devaluation theory’s basic assumption is that women are culturally devalued in society. As a consequence, female occupations and tasks are assumed to be less valued than are male tasks. Previous empirical research has found that the proportion females in an occupation has a net negative effect on wages.

questions why women would even take care jobs and argues that only by working collectively to ensure a greater supply and quality of care, independent of the market, can we ensure that the responsibility of care is equitably distributed and not disproportionately placed upon women. She adds, that women have provided this care historically, whether as non-market work or low-paying market work.

At the same time, many women relate "work" to what is done outside the house, and when asked do you work, she answers, no\(^8\), meaning paid work and not counting all the efforts and "work" done inside the household for the sake and benefits of the entire family and the society as a whole. In addition to that, care and caring activities are seen as the full responsibility of female members of the family, and it is perceived as if they are naturally created for this and as if they are born with it. This is perpetuated by the laws, culture, religion and so on. This might be the results of a Patriarchal ideology which makes a solid division between private and public spheres, on which the private is controlled and headed by male members. In some countries, specifically, the Arab countries Personal Status Laws, or what is called sometimes Family Laws perpetuates the inferiority of female members of the society, and legally allows for males' members to control mobility and rights of female members. This get worse by the inability of unwillingness of the state to observe the implementation of laws that might contain even some minor provisions that protect women such as labour laws.

It is important to pay attention to the political history of being colonized and what it means in the terms of relations, legal frames and analysis. This is important so the analysis gets distanced to the reduced notion of "Arab-Islamic customs", and gives space to the political context to be part of the analysis. Therefore, capitalist economies, global dynamics, ...etc. colonization and occupation (in the Palestinian case) and also social class, have a direct impact on the structure of the household and should be taken into consideration\(^9\).

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\(^8\) See for example past work of Hasso, Frances on the matter

Borrowing from Abu Habib’s article\textsuperscript{10}, it is also important to look at the four sources of care provisions: the family, the market, the state and the non-government and non-state actors. This is called the "care diamond initiative which proposes the redistribution of care among these four different actors, a matter that would require financial investment in the private service market or public investment by both the government and the community. This model is based on the recognition that the benefits derived from care work exceed the circle of the direct and indirect receivers of care. Thus, a public, private and/or community investment in care work is an investment in the quality and durability of the overall social infrastructure".

3.3 The importance of the study

This study is an added value for the region and will be a breakthrough one, as there is a large lack of enough study and research in the area of care economy in the region. In her article, Lina Abu Ha\textsuperscript{11}bib describes the lack of such studies and the importance of embarking on such efforts. In addition to that, many activists and researchers have asserted the need for such studies, and the necessity to start studying and searching and analyzing more the Care Economy in the MENA region\textsuperscript{12}. There is a scarcity of sound studies on care work in the MENA region. Nevertheless, we all know that care activities, care efforts and economy are essential to the wellbeing of the whole society, in all societies, especially in the Arab region as there is a lack of enough social protection systems and schemes regulated by the state. Add to that, the lack of segregated statistics in most of the states, which makes the issue more difficult to study and analyze.

\textsuperscript{10} Ibid
\textsuperscript{11} https://www.fes-mena.org/publications/e/feminist-perspectives-on-care-work-in-the-mena-region/
\textsuperscript{12} Look at the webinar conducted by Fredrich Ebert Association in Beirut with researchers and activists on July 27, 2020 on the issue of Care Economy in relation to the Informal Economy in the MENA region such as Amal Naser from Yemen, Mufideh Misawi from Tunis, Nadia Shamrukh from Jordan and Mona Izzat from Egypt. See https://www.fes-mena.org/topics/political-feminism/feminist-visions-of-the-future-of-work/

AECID 19-CO1-1179: “Reduce gender inequalities in the Occupied Palestinian Territory. It is intended to have an impact especially on adult women and young survivors or those at risk of GBV in Gaza and Area C.”
The study will be conducted in Jordan and Palestine. These two countries have one of the least levels of women's participation in the labour market. While there is no gender gap (Palestine) or minimal gender gap (Jordan) in education, still the number of women in the market is low, as the Arab region have internationally, the lowest rates of women's participation in the market.

One of the reasons why, might be found in the notion and meaning of "work" which is inherently linked to the financial need of the woman or her family, in opposite to consider it as a fundamental right. The idea is that if there is no financial need, and she is being provided by others, specially males, she doesn’t need to go out of her house and look for a paid job. Also, the lack of legal and social support for women reaching out to the market. There are other reasons that the study can and will be looking at.

3.4 What is Care Economy, definition for the purpose of the study

There are many definitions for care economy. We will cite some definitions, to be later on discussed and decide on one or more that will guide the study.

Care economy is:

- The care of people, housework and other forms of voluntary work that serve the greater community
- It is a kind of economy that must be conceptualized beyond the capitalist accumulation
• It is work that involves connecting to other people, trying to help people meet their needs, things like the work of caring for children, caring for the elderly, caring for sick people or teaching is a form of caring labor,”¹³

• It is the care of people, housework and other forms of voluntary work that serve the greater community”¹⁴

3.5 Audience and use

The audience of the study are varied. It will be addressing policy makers, research makers, women’s rights organizations and movements, governments. The study will be used as proof and evidence for any upcoming advocacy in the matter. It will be used to produce advocacy materials. It will also provide information and breakthrough knowledge in the matter. Also, as it will be one of the few studies in the region, it can be used as a model to conduct such studies in other countries than Jordan and Palestine.

4. METHODOLOGY AND WORKPLAN

4.1 Research Objective (s)

The main objective of the study is to explore and understand better how care work is understood and perceived the OPT¹⁵ and Jordan and its implications for the formal economy. The study will look at the different gender roles (females and males) within the households before and during COVID19 so as to compare how they were impacted by the pandemic and what are the consequences for the families, and women in particular, in accessing to stable incomes generation sources.

Specific Objectives:
- Raise evidences about the women burden in care work and to make proposals to reduce and redistribute it.

¹³ https://transversal.at/transversal/0805/folbre/en

¹⁴ https://www.fes-mena.org/publications/e/feminist-perspectives-on-care-work-in-the-mena-region/¹⁵ The Palestinian Occupied Territory for the purposes of the study are meant to be the West Bank (which means also Jerusalem) and Gaza.

AECID 19-CO1-1179: “Reduce gender inequalities in the Occupied Palestinian Territory. It is intended to have an impact especially on adult women and young survivors or those at risk of GBV in Gaza and Area C.”
- To know policy proposals and laws in the frame of care work or access to women decent work.
- To identified proposals and recommendations to improve the women access to decent work.

4.2 Research methodology

The study aims to seek evidence-based information, provide qualitative and quantitative data, and to illustrate and explain the impact of COVID19 to informal economy through analyzing the care economy and how it also impacts the formal economy. To ensure that the study will gather enough data to be analyzed, and will provide good information for analysis the study will employ mixed data collection tools, and will be using qualitative and quantitative data.

The consultant will resort to use mixed and varied collection tools such as:

- **Desk review**

  The consultant will undertake a non-exhaustive, but critical literature review, not only regionally, but also internationally. The study will illustrate that care work, paid and unpaid is often ignored in research and data collection on labour universally, and this is adding to the value of this study since there is a clear lack of research and studies in the MENA region about the issue.

- **Focus groups**

  The consultant will conduct 20 focus groups, 10 in Jordan and 10 in the oPt. As for the exact places in each one, will be decided jointly with ApS after conducting quick consultations. In each focus group an average of 12-15 women and men will be participating, so as to reach a total of 300 women and men participants in the focus groups. The consultant will prepare a draft guideline for the questions of the focus groups, present it to ApS to finalize prior to using it.

AECID 19-CO1-1179: “Reduce gender inequalities in the Occupied Palestinian Territory. It is intended to have an impact especially on adult women and young survivors or those at risk of GBV in Gaza and Area C.”
• **In-depth interviews**

The consultant will make sure to conduct 20 in-depth interviews in Jordan and 20 in the oPt. It is expected that each in-depth interview will last for two hours each. Of the 20 interviews, ten will be conducted with men and five with women. The rationale for this number is that the focus groups will be composed only by women. In addition, the consultant will conduct one interview with relevant staff of the Ministry of Labour in each of Jordan and oPt, preferably, the person in charge of monitoring the right to work. Add to that, in-depth interviews will be also taken with relevant persons in the Unions / syndicates, five in Jordan and five in oPt. As for the private sector, the consultant will conduct ten in-depth interviews for actors of the private sector, five in Jordan and five in oPt. Organizations such as SALAH and alike will be also participating in the interviews, as well as the Chamber of Commerce in both countries. In addition, local initiatives that exists and are known will be also approached.

The consultant will prepare the questions of the in-depth interviews to be finalized after discussion with ApS.

• **Case studies**

The consultant will write six case studies. Three on Jordan and three on the oPt. The case studies will illustrate the variety of conditions, situations, circumstances and dynamics that reflects the findings of the study. Each case study will be able to show in a more detailed way, and clarify many of the elements that the study uncovers. It will be necessary to discuss with the consultant the need to have or not to have case studies written on male participants.

• **List of daily activities**

The consultant will design a form on which the participants can fill out their daily activities of an ordinary day. The form will be filled by both female and male members of the same family. The form will serve as a sample to show how males and females' members of the family participating in the study spent their days during lockdown. It is expected that 15 families in Jordan, and 15 families in the oPt participate in the filling out of the form, which means 60 forms filled out in total.

• **Profiles:**

AECID 19-CO1-1179: “Reduce gender inequalities in the Occupied Palestinian Territory. It is intended to have an impact especially on adult women and young survivors or those at risk of GBV in Gaza and Area C.”
The research participants will be women who already hold a job and still have it, also women who had a job and lost it when the pandemic started. In addition, women who didn’t have a job and don’t have a job at the time of the research, thus, they were already spending most if not all their time inside the households. The research will look at how these women's professional and personal life were impacted. As it seeks to understand how the lockdown impacted women's different roles, to bring the voices of women themselves, their feelings and their views and experiences into the study.

The social status of the women participating in the study will not be necessarily married, and it is important to check who is or are the main care givers in the family, so they are the ones to participate. The female participants will be aged between 13 to 60, as long as they are the ones care givers, provide the daily services for all family members (food, cleaning, teaching if needed, organizing and tidying the house...etc.)

The research will also look at the role of men, and see how masculinities were impacted during the lockdown as well as amid the pandemic. Male participants in the study will be preferably the one considered to be the main personality/character of the household. In addition, male members of the family, who are aged from 13 to 60 will be also be considered apt to be participating in the study.

Participants will be coming from urban and rural areas, as well as refugee camps. As for the size of the families it will be on average of at least 5-6 members on each family, and in cases where the extended families share the household it is also appropriate to include them. For nuclear families, it will be also important to include a sample so as to validate whether the size of the family affects the results.
Organizations that work with women to empower them economically, and/or to lend financial support for their projects. As well as Chambers of Commerce in the different locations (to be decided) in both countries.

4.3 Research Questions
The research aims to address two main questions. The following sub questions are to guide the interviews and the focus groups. It will be finally agreed upon which are

AECID 19-CO1-1179: “Reduce gender inequalities in the Occupied Palestinian Territory. It is intended to have an impact especially on adult women and young survivors or those at risk of GBV in Gaza and Area C.”
the questions, and as a general guide we propose them as follows, to be reviewed and finalized by the consultant and ApS:

<table>
<thead>
<tr>
<th>1st.</th>
<th>Main question: How did COVID19 impacted the care activities in the households</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>What does care work means to you? (to be asked by both female and males' members of the family)</td>
</tr>
<tr>
<td>1.2</td>
<td>What does work means to you? (to be asked by both female and males' members of the family), do you work?</td>
</tr>
<tr>
<td>1.3</td>
<td>What changes have occurred in the family's life and women's responsibilities during the lockdown period that were not before it. Can you start by telling us how it was before the crisis?</td>
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<tr>
<td>1.4</td>
<td>How men acted in the household during the lockdown and what roles did they had</td>
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<tr>
<td>1.5</td>
<td>Did the lockdown has affected your economic activities such as access to employment, reduction of working hours...?</td>
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<tr>
<td>1.6</td>
<td>How do you see the state institutions look at the care work?</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>2nd.</th>
<th>Main question: the place and importance given to the Care Economy in Jordan and OPT</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1</td>
<td>What is the perception of females and males' members of the society and households on care economy?</td>
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<tr>
<td>2.2</td>
<td>Is social class playing a role and impacting women's care work, if yes, how</td>
</tr>
<tr>
<td>2.3</td>
<td>Is care economy supported or not supported culturally and socially? and if yes what are these structures that perpetuated women being the main actor?</td>
</tr>
<tr>
<td>2.4</td>
<td>What is the perception of policy makers and economic actors about care work in Jordan and Palestine?</td>
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<tr>
<td>2.5</td>
<td>What policies and practices are in place that promote balance between care and paid work?</td>
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<tr>
<td>2.6</td>
<td>The unbalance of care and paid work: how did the lockdown impacted the paid work of women?</td>
</tr>
</tbody>
</table>
2.7 What would you propose/recommend to change the present unequal distribution of care work

4.4 Research products / deliverables

The consultant is responsible for assuring the following deliverables:

- Research proposal: Suggested outline / with detailed and explained methodology / suggested sources / numbers and so on, for ApS comments and approval
- Plan of action with dates
- First and final draft of study in Arabic and English

4.5 Work plan

<table>
<thead>
<tr>
<th>#</th>
<th>OUT PUT/ DELIVERABLE</th>
<th>DATE DUE</th>
<th>NOTES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Presentation of the first draft of the outline to be reviewed</td>
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<td></td>
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<tr>
<td>2</td>
<td>Make the necessary changes and present a new version</td>
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<tr>
<td>3</td>
<td>Present a detailed plan of action for the research</td>
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<tr>
<td>4</td>
<td>Presentation of first draft of research</td>
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<tr>
<td>5</td>
<td>Workshop to present first draft and discuss reviews and comments</td>
<td></td>
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<tr>
<td>6</td>
<td>Presentation of final version after entering all reviews and comments in Arabic and English</td>
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</tbody>
</table>

4.6 Ethics and risks

AECID 19-CO1-1179: “Reduce gender inequalities in the Occupied Palestinian Territory. It is intended to have an impact especially on adult women and young survivors or those at risk of GBV in Gaza and Area C.”
The theme of this study is considered a sensitive one, in the meaning that it will ask respondents who agree to take part in the study to talk about their daily live, they might describe dynamics and relations. Therefore, confidentiality should be secured and assured for each participant, data should be used and kept with high confidential. The consultant is expected to present a proposal on the matter.

4.7 Research management
The research will be managed by the Gender and Advocacy Specialist and the Regional Head of Mission. They both will be responsible for following up with the consultant, providing necessary support and maintaining a vivid professional relation as needed all the way through the process.

5 REQUIREMENTS OF THE CONSULTANT AND ECONOMIC OFFER

5.4 Qualifications and competencies
Alianza por La Solidaridad seeks to work with professionals who share our vision and have high integrity and proven professionalism. for this task ApS is willing to work with a person who has a feminist approach and has experience in conducting gender-based research and related work.

• Master or PhD. degree in social studies, Gender studies, gender and economic studies or related discipline. The consultant will have
• Documented experience in conducting social sciences / feminist research
• Able to develop and enhanced the proposed research questions
• The necessary networks in both Jordan and Occupied Palestinian Territory
• Able to manage qualitative and quantitative data
• Ability to make it to deadlines
• Good knowledge on gender issues/gender and economy / Women's Rights ...etc.
• Excellent writing skills

5.5 Economic offer / Budget
The consultant will provide a technical and financial proposal, as well as provide samples of past work, preferably research that has been published, along with your CV, or CV’s if the intention is to form a team.

AECID 19-CO1-1179: “Reduce gender inequalities in the Occupied Palestinian Territory. It is intended to have an impact especially on adult women and young survivors or those at risk of GBV in Gaza and Area C.”
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<table>
<thead>
<tr>
<th>#</th>
<th>TASK</th>
<th>BUDGET</th>
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<tbody>
<tr>
<td>1</td>
<td>Preparing the outline of the research</td>
<td></td>
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<tr>
<td>2</td>
<td>Outline the details of each methodology</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Present first draft to ApS of research and get comments</td>
<td></td>
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<tr>
<td>4</td>
<td>Incorporate changes and modifications based on review</td>
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<tr>
<td>5</td>
<td>Conduct a regional workshop to present modified version</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Present final version in Arabic and English</td>
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<tr>
<td></td>
<td>TOTAL <em>(Please note that a detailed breakdown of the budget will be highly appreciated, so please add as many as detailed tasks, as needed and seen necessary)</em></td>
<td></td>
</tr>
</tbody>
</table>

For those interested, please send your offer to the following e-mails no later than September 10, 2020 and not after 4:00pm: eanadon@aporsolidaridad.org and shussein@aporsolidaridad.org

Please write on the subject of your e-mail: **Offer – Study/Economy of Care in Jordan and oPt.**

**ANNEX 1.**

**A note on terminology:** Unpaid work, care work and unpaid care work.
The terms “unpaid work”, “care work” and “unpaid care work” are sometimes used interchangeably. This is wrong and misleading, even though there are some overlapping areas among them.

**Unpaid work** includes a diverse range of activities that take place outside the cash nexus. It includes: (i) unpaid work on the household plot or in the family business; (ii) activities such as the collection of water and firewood for self-consumption; and (iii) unpaid care of one’s child, elderly parent or friend affected by a chronic illness.

- Some elements of unpaid work—for example, unpaid work in a family business—are included in the SNA production boundary and should be included in calculations of GDP. • Other elements of unpaid work—for example, collection of firewood and water—are (since the 1993 revision of the SNA) included in the SNA production boundary and should be included in GDP calculations, although relatively few countries do this.

- Unpaid services such as shopping, meal preparation, washing clothes and so on and unpaid care provided for one’s child, elderly parent or neighbor are excluded from the SNA and GDP calculations.

**Care work** involves direct care of persons; it can be paid or unpaid. Those with intense care needs include young children, the frail elderly and people with various illnesses and disabilities, but able-bodied adults also require and receive care. Paid carers include nannies, childminders, nurses and care workers in homes for the elderly and other institutional settings; they can work in a variety of institutions (public, market, not-for-profit). Direct care of persons (bathing them, feeding them, accompanying them to the doctor, taking them for walks, talking to them and so on) is often seen as separate from the other necessary activities that provide the preconditions for personal caregiving such as preparing meals, shopping and cleaning sheets and clothes. But such boundaries are arbitrary, especially since the persons needing intensive care are often also unable to do such tasks themselves.

- Domestic workers often undertake some forms of care work (for example,
childminding) even though they are not defined as “paid carers”.

- Parents caring for their own children while on paid “parental leave” are not, strictly speaking, doing unpaid care work nor can they be classified as paid carers.

**Unpaid care work** is care of persons for no explicit monetary reward. The largest amount of unpaid care work in nearly all societies takes place within households/families, but individuals also perform unpaid care across households and across families—for other kin, friends, neighbours and community members—and also within a variety of institutions (public, market, not-for-profit, community) on an unpaid or voluntary basis. Unpaid care constitutes the overlapping area across the three categories.