Women and their Childcare Needs
Assessing Childcare Provisioning in India through a Gendered Lens
by Monika Banerjee
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Acknowledgements

In September 2018, Institute of Social Studies Trust (ISST), as part of its broad objective of understanding and highlighting barriers to women's economic empowerment, organized a two-day national workshop on ‘Women and their childcare needs’. The aim of this workshop was to collate existing evidence that support universal child care provisioning as one of the strategies to achieve women's economic empowerment and also highlight evidence required to build more support for the call for universal child care services. As an output of this workshop, it was decided that it would be useful to juxtapose the rich discussion output of the workshop with findings from recent empirical studies in form of a paper, in order to create new evidence that can re-iterate the need to look at substantial child care support as an important strategy to ease the burden of work on women.

Thus, the seed for this paper was sown. I am extremely thankful to Ratna Sudarshan, Rajib Nandi, Mirai Chatterjee and Savitri Ray for the initial discussions and brain storming sessions that not only helped in developing the format of the workshop but also the format for this paper. I am grateful to all the participants of the workshop who took out time to travel all the way to Delhi to attend this important event; enthusiastically contributed to the discussion and made the workshop a huge success. My gratitude also goes out to the Bill and Melinda Gates Foundation (BMGF) as without their generous grant it would have been impossible to hold such an important event. The discussion output of the workshop provided the framework to the paper and also helped in identifying the important recommendations for strategizing child care provisioning for all.

Apart from the workshop output, findings from two important studies (GrOW 2017, MC-ISST 2020) conducted by ISST were also used in the paper to place critical arguments. I am thankful to Shraddha Chigateri, Mubashira Zaidi and Anweshaa Ghosh for the help they extended in locating important reading material on the GrOW study and holding necessary discussions around its findings which formed a significant base for the paper.

The second study used in the paper (MC-ISST 2020) was conducted by ISST for Mobile Creches, to assess child vulnerability in relation to mother’s paid employment.
Involvement in this study helped me immensely in sharpening my understanding of the impact that care burden has on both women and their children. I am thankful to Mobile Creches for giving ISST the opportunity to conduct this research. My gratitude also goes out to the research team of ISST involved in the project for the enriching discussions that we had on emerging data from the field.

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I dedicate this paper to each one of them.

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The provision of childcare support as a mechanism to ensure an increase in female workforce participation and to provide a nurturing environment to children has been discussed and debated across the globe for years. While several countries such as those in the Nordic region as well as the Latin American countries, seeing benefits in the proposition, have shown immense commitment to it, others like India are still in the process of assessing and understanding the extent to which this provision is required and the manner in which its provision could be most impactful (Razavi and Staab 2012).

In India this provisioning is mainly informed by two distinct premises, one, to ensure holistic development and growth of the child and two, to provide support to women engaged in paid employment. While the former has received some attention in important state interventions, such as the Integrated Child Development Scheme (ICDS), provisioning of childcare support to working women has reached only a negligible percentage of women. This is because the majority of women in the country continue to work as informal workers, mostly handling hazardous, low-paying work with no social benefits or support. This has pushed the majority of women in the country to continuously work towards creating a balance between their household and childcare responsibilities as well as the need to be in paid work to earn a living. Civil society bodies have been campaigning for this for years and studies (Chigateri 2013; Desai 2013; GrOW 2017; Narayanan 2008; Palriwala and Neetha 2011, 2012; Swaminathan 1993a, 1993b, 2009) have argued for the provisioning of a more comprehensive childcare support system in the country that can ease the burden of work responsibilities for women, specifically those belonging to low-income and marginalised communities and households.

In order to re-iterate this demand, this paper collates evidence in research and studies that have been able to show the plight of women informal workers in the country in terms of managing young children and household chores along with
the need to earn a living. It also attempts to identify research gaps that need to be looked at for further evidence building.

The paper starts by discussing the conditions of work of women, specifically in terms of both unpaid work, including domestic, care and economic work as well as paid work and highlights the challenges that women have to face on a daily basis. It then assesses the limited provisioning of childcare system in the country through the Care Diamond model (Razavi 2007), which looks at the state, the market, the voluntary sector and the family and community as the main providers of childcare support. It shows that the limited reach and coverage of the childcare system provided by the state, market and voluntary sector puts the burden of caring for the child on the family and more specifically on the mother because care work is mainly seen as work that the women of the household remain responsible for. It discusses strategies that women adopt in order to balance care work along with their paid work responsibilities and highlights the impact that this double burden of work has on the woman, the child and other children as well as the overall situation of the household. Lastly, the paper discusses some of the experiences and outcomes of provisioning of full-day childcare systems from across the globe as well as examples from the country to show how this provision can create a more nurturing environment for both the mother and the child. It concludes with recommendations based on the discussions that took place in the national workshop on ‘Women’s Work and their Childcare Needs’ organized by the Institute of Social Studies Trust (ISST) on 27-28 September 2018 (ISST 2018) and highlights research areas that require immediate attention.

Apart from earlier studies, the paper has relied on presentations that were made at the ISST Workshop 2018 for information and findings. It has also taken input from a recent study that ISST conducted for Mobile Creches to map the vulnerabilities of children of informal workers living in Delhi (ISST-MC 2020).
The recent Economic Survey (2018) has highlighted that the female work participation rate has declined severely. This has led to a debate around this decline and brought forward various perspectives to assess and understand women and their work. Considering that majority of women in India continue to work in the unorganized sector, most often in hazardous conditions, with marginal or no wages and no social security benefits, several feminist economists have found fault in the very definition of work that is used by the Census and the NSS due to its inability to take into account the multi-faceted nature of woman’s work (Agarwal 2018; Hirway 2017). This limitation in the way work and worker are defined has led to a failure of social policies in acknowledging the double burden of work that women have to bear as they are pressed into unpaid care/domestic/economic work along with their paid work.
2.1 Unpaid care/domestic/economic responsibilities of women

The first (and only) national Time Use Survey (TUS) conducted in India in 1998-99 on a pilot basis, covering a total of 18,591 households in six states of Haryana, Madhya Pradesh, Tamil Nadu, Gujarat, Orissa, and Meghalaya reflected that women spend less time on paid work than men. However, the overall time spent by women on all kinds of work was much higher than men’s. Hirway (2017), in her analysis of this TUS data, highlights that women spend a substantial amount of time on household chores inside the house as well as those outside the home including collecting water, fuel wood, vegetables, fruits, leaves for meeting basic needs of the household, fodder, wood, and raw material for family business. She notes that women’s participation in these activities is almost seven times higher than that of men. Apart from this, women also are involved in doing dung work, animal grazing and chopping and storing of wood, along with other household responsibilities of cooking, cleaning, washing, shopping etc. Men participate in some of these activities but the rate of their participation is much lower than that of women.

In terms of care work related to looking after children, elderly, sick and disabled, the TUS data showed that women spend more time (4.47 hours per week) on direct care work than men (0.88 hours per week). However, it is worthy noting that the reported time that women spend on direct care work of persons, including children, was much less than the time they report being spent on household maintenance work (28 hours per week) (Hirway 2017; Palriwala and Neetha, 2011). Palriwala and Neetha (2011) argue that this could be due to lack of recognition of care work as substantial work. Also, women perform care work simultaneously with their other household duties as well as paid work and thus the time spent on care work is not accounted separately. This could explain to some extent the recalcitrant nature of malnutrition in our country since child feeding in early childhood demands time and labour.

Zaidi and Ghosh (2018), using data from India and Nepal, argue that the social organization of care is largely guided by prevailing gender norms. Their study showed that household chores done inside the house, fetching water and fuel wood and caring for children and elderly, was exclusively seen as women’s work, while looking after land and animals was shared responsibility between husband and wife. Thus, men mostly did not take part in any of the household chores. They also highlighted that work responsibilities depended on the structure of the
household. While in nuclear families more men could be found helping out in household chores, in joint families it would always be other female members of the household who share the responsibility for household chores. It also depended on the position of the woman in the household. Regarding direct care work, they point out that childcare work did not feature as an exclusive activity. Instead, it was done simultaneously along with other activities that women catered to.

The recent study by ISST for Mobile Creches (ISST-MC 2020) also reflected that the major responsibility for child care work and household work inside the house was borne by the woman (Figure 1). In both categories, husbands appeared to take on negligible responsibility. However, the older child, mainly a girl child, played an important role in terms of providing support to the mother, both in looking after younger siblings as well as in doing the household work of cooking and cleaning.

In terms of work outside the house, which includes paying bills, rent, buying groceries, etc., in the majority of households both women and their husbands played equal roles, but fetching of water was again done mostly by women with only 29 percent of respondents stating that their husbands help out in this work. The older girl child was given responsibility for fetching water in at least 11 percent of households.

Figure 1: Social Organization of Care

![Figure 1: Social Organization of Care](image)

Source: ISST-MC (2020)
Thus, the major responsibility of household work and care work is seen to lie with the woman of the house. Palriwala and Neetha (2011) attribute this to patriarchal notions of work that see man as the breadwinner and woman as his dependent and responsible for all household chores and care-related work.

### 2.2 Women’s paid work: choices, opportunities and concerns

While women’s choice of work and participation relies considerably on the kind of work opportunities available in an area and also her own socio-economic status; it cannot be denied that the unpaid care-work burden that a woman has to continuously balance along with her paid work responsibility remains an influential factor on the kind of work she chooses to do and her ability to participate in the workforce. This has been reiterated and validated by several studies.

Palriwala and Neetha (2012) highlight a rise in the percentage of unregistered workers from 89% in 1989 to 92.4% in 2004-05. Despite diversification, majority of women find employment in the primary sector within the realm of agriculture and farm work. Within the manufacturing sector, majority of women are employed in low-paying, casual, home-based ‘putting out’ work or in unpaid work within family-run enterprises. In the tertiary sector, women are seen more in retail trade and education-related work as well as paid domestic household work. The authors argue that women choose workspaces that allow them a chance to combine their personal care work responsibilities along with paid work.

Zaidi and Ghosh (2018) argue along similar lines. Their study showed that the majority of the women chose work that was closer to home, because this allowed them some flexibility to take care of their children. In Dungarpur and Udaipur they found that the majority of the women were self-employed, which meant doing farming on their own land or doing arduous work under MNREGA. In Ujjain and Indore, which are urban areas, the majority of women were involved in home-based work or domestic work.

The ISST-MC 2020 study also highlighted that irrespective of the sector in which the women were employed, the majority of respondents took work close to home or worked from home itself. Figure 2 shows that the majority of respondents (55 percent) take less than 15 minutes to commute to their workplace. Only 2 percent of the respondents stated that they take more than an hour to commute to work.
Focus group discussions with respondents also revealed that irrespective of the sector of work, women preferred to work near their home. Most of them stated that it gave them the flexibility to manage their own domestic work and childcare work along with paid work. Thus clearly, unpaid care responsibilities of women figured as an important determining factor for the paid work choices they made.

For most informal women workers conditions are difficult and even hazardous (ISST-MC 2020; GrOW 2017; Narayanan 2008). They also face issues of delayed or non-payment of wages, lack of basic facilities at the workplace and harassment or discriminatory practices by contractors or co-workers. Women complained that several times they were not paid or paid less as they were not able to complete task due to their other care responsibilities. Pregnant and aged women involved in MNREGA work, also complained of harassment by co-workers due to their inability to work faster and for longer hours (GrOW 2017; Narayanan 2008).
3 Childcare Provisioning: Assessing Indian Scenario through the Care Diamond Model

The Care Diamond Model (Razavi 2007) involves four institutions– the state, market, voluntary organizations and family/community. Taking these four institutions as an entry point, this section examines the role of each of these organizations in shaping the childcare regime that we see in India today. It also shows how each of these organizations reiterates the feminized notion of care.

3.1 Childcare provisioning: State policies and laws

State provisioning of childcare in India, since independence, have mainly worked through two modalities: laws regulating childcare services provided by employers and public provisioning of childcare services. In their description below, a few points are worth noting. First, provisioning has mainly been a ‘piecemeal, haphazard and reactive
process’ (Palriwala and Neetha 2011). Second, although the laws are well-intentioned, their implementation has been less than ideal (see Chigateri 2017; Palriwala and Neetha 2011; PHRS 2014). Third, while development and care of children have been the basis of most childcare related provisions, childcare support to working women has remained limited to only women employed in the formal sector.

3.1.1 Early Interventions

Early interventions in relation to child care includes policies that directed provisioning of crèches in certain workplaces as well as laws to regulate employers. The Factories Act (1948), Plantation Act (1951) and Mines Act (1952) were the first to introduce crèches as a childcare support to women workers. While the first two laid down the statutory obligation of providing a crèche wherever 50 women were employed, the Mines Act emphasized on the need of providing crèches wherever women were employed, irrespective of their numbers. Later, the crèche facility was extended to other work spaces recognized under other acts, including the Beedi and Cigar Workers Act 1966, Contract labour Act 1970, Inter-state Migrant Workers Act 1980 and the Building and Construction Workers Act 1996. However, all of these interventions remained more in terms of laws than in practice and thus, have been highly critiqued due to their limited expansion as well as inadequate quality and poor implementation (Swaminathan 1985; Chigateri 2017).

The Central Social Welfare Board (CSWB) set up in 1953 started a small network of balwadis (childcare centres) across the country. These balwadis were further, expanded during the Third Five-Year Plan (Chigateri 2017; Palriwala and Neetha, 2011).

3.1.2 National Policy for Children 1974: The Integrated Child Development Scheme (ICDS)

It was only in the 70s with the National Policy for Children 1974, that children were recognised as an asset and the state's responsibility was defined in terms of ensuring that all children are nurtured through adequate services provided before and after birth and through the period of their growth (Desai 2013). In December 1974 the National Children's Board was constituted and soon after in 1975, the Integrated Child Development Scheme (ICDS) was launched. ICDS, aiming to target children under 6, pregnant and lactating mothers and adolescent girls, focused on the delivery of a comprehensive package of six services: supplementary nutrition and growth monitoring, immunization, health check-
ups, health and nutrition education, referral services and non-formal pre-school education. The scheme organizes these services through Anganwadi Centres (AWC), established at the village level and employs local women workers on a honorarium basis as Anganwadi workers and helpers to run its activities. ICDS moving away from the earlier interventions, made a significant impact in terms of reach and coverage. Chigateri (2017) notes that in the first fifteen years, it was able to cover 2426 blocks and has been growing further following the Supreme Court mandate of universalizing its provisions and enhancing their quality. However, Neetha N (2012) points out that even though there has been a steady increase in the number of beneficiaries of the scheme, ‘only 26 percent of the 0-6 age group children were covered under the scheme until 2005. It is also important to highlight that even though the scheme takes into consideration the health and nutritional needs of both mother and the child, it fails to recognize the need of mothers belonging to poor and marginalized sections to go back to work and earn and thus, fails to meet her requirement of childcare support. Neetha and Palriwala (2012) notes that even in Tamil Nadu and Puducherry ICDS, which are regarded as best models of childcare provisioning in the country, and have longest hours of service each day; the timings are not suitable to most working mothers. These centres are also mired with problems of poor infrastructure, overcrowding, worker absenteeism, and uninteresting teaching material and activities (also in Narayanan 2008).

It is also important to note here that the situation of Anganwadi workers (AWWs) has further had a negative impact on the overall coverage estimate of the scheme. It is seen that the AWWs are not considered to be fulltime workers but only volunteers on stipend and are expected to take on the entire workload, without any extra monetary gain. It is also seen that from time to time AWWs and their helpers are also expected to take on other work of the government. These kind of expectations stems out of the understanding that childcare work ‘is light, easy and natural for women’ (Neetha and Palriwala 2012).

### 3.1.3 Scheme of Assistance of Crèches for Working/ Ailing Mothers 1974

Another significant outcome of the National Policy for Children 1974 was the launch of the Scheme of Assistance of Crèches for working/ailing mothers in 1974. The scheme was to provide day care services for children under the age of 6 of women who worked as daily labourers and belonged to the Below Poverty
Line (BPL) category. It was estimated, according to the need of that time, that this scheme would cater to approximately 45 million children in the age group of 0-6 years. Chigateri (2017) highlights that this scheme was an outcome of advocacy efforts of Mobile Crèches who lobbied in government offices for provisioning of crèches for poor working women. However, in the period of twenty years since its inception only 10,000 crèches were established across the country. These centres mainly concentrated in 6-7 states and were catering to only about 250,000 children of under 6 years.

### 3.1.4 Other Policy Interventions

In the 80s, the National Policy for Education 1986 recognized Early Childhood Care and Education (ECCE) as an important step towards the holistic development and well-being of children. The Plan of Action (1992) for this policy aimed to provide ECCE services to approximately 70% of children under 6 years by the year 2000 through ICDS centres.

The National Nutrition Policy that was adopted in 1993 recognised that ‘children below 6 years are nutritionally vulnerable and constitute one of the “high risk” groups, and accorded highest priority to them’ (Sinha and Bhatia 2009). This policy advocated a comprehensive, integrated and inter-sectoral strategy for tackling malnutrition and prescribed the expansion of safety nets for children through awareness building among mothers. This policy too considered ICDS as a useful mode to accomplish its objectives.

In 2007, the Working Group for Children under 6 (WGCU6) laid out a comprehensive framework for the protection of rights of children under 6 with special focus on nutrition, and for complementary interventions in ICDS such as crèches and maternity entitlements. It highlighted the need for creches at work site and maternity entitlements to ensure proximity of mother and child for the first six months after birth, and creches- cum-anganwadi centres for children up to three years. It also emphasised the need for day care centres for children up to six to support the mother and to also ensure the nutritional and educational growth of the child. While the XI th Five-Year Plan did take note of these suggestions and this effort led to maternity entitlement being included in the National Food Security Act, these support structures were not put in place (PHRS 2014).
3.1.5 Recent Interventions

In 2006, the Scheme of Assistance of Crèches 1974 for working/ailing mothers was merged with the National Crèche Fund Scheme, 1995 and became the Rajiv Gandhi National Crèche Scheme for Children of Working Mothers. Its main objective was to provide day care facility to children (0-6 years) of working mothers in rural and urban areas who were employed for a minimum of 15 days in a month or six months in a year. It aimed to provide a safe environment to children while their parents were away at work, improve their nutrition and health status and promote their physical, cognitive, social and emotional development.

The scheme was implemented by the government in partnership with private agencies/ non-government organisations and was expected to have a pan-India coverage. However, Chigateri (2017) in her study noted that till 2008-2009, only 31,718 crèches were opened and were targeting around 792,000 children.

In the initial years, the majority of its funds (90 percent) came from the Central Ministry of Women and Child Development (MWCD) and the remaining 10 percent was provided by the NGO responsible for running the creches at the local level. However, in 2017, as an overall plan to increase the state’s share in welfare programmes, the funding plan was revised. Currently the Centre provides 60 percent of the funds, while 40 percent has to be contributed by the states and NGOs running the creches continue to provide 10 percent of the running cost. This change in the funding structure has had an impact on the overall functioning of these creches in several places (Tish Sanghera 2019). These centres have been struggling with problems of poor infrastructure, poor training and working conditions and as per informal sources, several creche centre across states have been closed due to lack of resources (Sanghera 2019).

In 2005, the Mahatma Gandhi National Rural Employment Guarantee Act (MNREGA), which guarantees 100 days of waged employment to every household in rural India was launched. This Act mandated the provision of crèche facility in all worksites, where 5 or more children under 6 were found to be accompanying the women at work. It states that one of the women should be assigned the work of childcare and given the same remuneration as others (Narayanan 2008). However, Narayanan (2008) in her study, notes that almost 65% of the women that she interviewed stated that they were unaware of such provision and almost 70 % stated that there was no provision of crèches at their work sites. Resultantly, women were having to
either leave their children alone or with elder siblings or they were bringing them to their workplace, which was leading to harassment by the supervisor as well as other fellow women workers.

In 2017 the Maternity Benefit Act 1961 was amended to extend the period of maternity benefits from 12 to 26 weeks. However, it restricts this provision only up to two children and it only caters to women who are employed in the formal
economy. Thus, 95 percent of women who work as informal workers and those who are unpaid workers in family enterprises remain out of its purview (Banerjee 2018; Chigateri 2017). The Act also makes it mandatory for establishments with 50 or more workers to provide crèche facilities. This clearly excludes the majority of workers employed in the informal sector. Similar lacunae can be seen in the recent draft of the Labour Code on Social Security (Draft 2.1) and the Labour code on Occupational Safety and Health.

Thus, it is seen that majority of state policies and programmes catering to childcare provisioning in India have mainly concentrated on specific development goals of the child. The requirements and needs of the care giving mothers have not been given much emphasis. Wherever provisions were made, they remained inadequate in terms of coverage, reach and quality implementation. One sees an inability of early Industry Acts, which provided for crèche facility for working women, to include women employed in informal work or those who have to do unpaid work within its provisions. However, this inability also surfaces in recent Acts and laws related to labour, social security and childcare benefits. This lacuna in government provisioning in terms of catering to the childcare needs of the majority of women in this country remains puzzling. It is all the more so when one takes into consideration the fact that drawing of linkages between women's work and requirement of childcare support is not an unusual new concept. As early as in 1975, the Report of the Committee on the Status of Women in India, 'Towards Equality', as a major strategy for women's development, stressed on the need of viewing childcare service as a necessary support service to all women. Almost a decade later, Mina Swaminathan too, in her report, 'Who Cares? A Study of Childcare Facilities for Lower-Income Working Women in India', written for the Centre for Women's Development Studies, New Delhi (1985) stated that, ‘...facilities for children of working women can no longer be seen in isolation from the needs of child development and education; children's programmes can no longer be seen in isolation from the changing position of women and families. The two must converge and be placed in the large framework of social and economic change and development’. Similarly, the Shramshakti Report (1988) on informal and self-employed women workers across India also strongly recommended childcare as an essential support to women's work. The formation of FORCES (Forum for Creches and Childcare Services), a national network of organizations and individuals, in 1989 has also helped in channelizing the demands of various groups, organizations, other alliances in relation to the needs of women informal workers. However, above discussion clearly show that while numerous
interventions in terms of laws, policies, programmes, have been initiated over the years, none have been able to cater to the entire spectrum of care needs of both mother as well as that of the child.

### 3.2 Childcare Provisioning through the Voluntary Sector and the Market

The voluntary or the NGO sector in India saw a vast growth during the 80s and the 90s. However, even though several focussed on issues and concerns of women and children, not many considered childcare provisioning in terms of creches or early childhood care and education (ECCE) as their primary focus area. Mobile Creches was perhaps the first organization to specifically consider early childhood care and education (ECCE) as a major problem for informal women workers. In 1969, they started setting up crèches at construction sites where women worked (Chigateri 2013; Palriwala and Neetha, 2011) and in the mid-seventies, they started working with children in Delhi slums. It installs day care facilities at construction sites that are either entirely run by them or are facilitated by them. In the slums, through the Community-based Creches (CBC) Model, women from the local area are trained to take on the responsibility of running a day care facility in the locality.

SEWA is another organization that recognizes the need for child care support for women employed in informal work. In 1980, it initiated its first formal childcare programme for informal workers and in 1986, it registered its first childcare cooperative, Shri Sangini Mahila Bal Seva Sahkari Mandali Ltd. Around the same time it joined hands with ICDS in Gujarat. In 1989, it registered its second childcare cooperative, Shaishav. While SEWA’s partnership with ICDS ended in 2006, the childcare centres running under Sangini and Shaishav continue to run their day care centres for children of informal workers.

There are other voluntary initiatives too, which have made a significant impact in reaching out to those areas which are remote. The Phulwari programme of the Jan Swasthya Sahyog in Chattisgarh, is one such significant initiative. The Phulwaris were initiated in the year 2006 with aim to provide crèche facility in scattered forest and forest fringe areas which had its set of problems in terms of inaccessibility, poverty and malnourishment (Chigateri 2013). Public Health Resource Network (PHRN) is also running rural creches, mostly in tribal areas of Odisha for many years now. As per their website, currently they have established and are running 150 community-based crèches across five most vulnerable
districts of Odisha. These creches will eventually be scaled-up by the Government of Odisha itself.

These voluntary sector initiatives have varying degree of success, but they remain limited in terms of reach and coverage. There is also a lack of reliable data, which makes it difficult to estimate the number of children who are being covered by such initiatives (Palriwala and Neetha 2011).

Assessment of the voluntary sector, thus finds that although some of them may be having a considerable impact in terms of reducing the burden of care work on mothers and in providing necessary care for the child, their reach remains limited to a very small area and population.

Private market-run initiatives in childcare/day care differ in the way they are organized and the services that they provide. Mostly working outside the domain of public monitoring, their range includes formal, commercial ventures that cater to elite, upper middle class households and those that are run by women in their own homes and cater to middle to lower middle-class working mothers in the neighbourhood. Apart from crèches and day care centres, the range includes privately run, pre-primary education centres for the age group of 3-6 years. The sheer demand for such set-ups remains high and even though they may differ in quality, they are successful in running their business and cater to the childcare needs of different types of households (Palriwala and Neetha 2011).

Apart from privately-run day care centres, crèches and pre-primary schools, upper middle class and elite parents in urban areas are also likely to hire domestic workers for their childcare needs (Neetha and Palriwala 2011, 2012). These helpers are hired for multiple domestic tasks, with childcare being one of them. These domestic workers are not only hired by families where the mother goes out to work but also in families where mothers do not have paid employment. The bulk of these workers are live-out and part-time workers, who live in the same or nearby locality. This enables these workers to give time to the domestic and care work responsibilities of their own households. However, there has also been an upsurge in the number of unregulated placement agencies in major cities. These agencies work as middlemen to supply migrant, full time, live-in domestic workers through networks of agents in the tribal areas of Jharkhand, Orissa, West Bengal and Chhattisgarh. These women migrate in search of work, leaving their own family and children in the care of their kin.
Thus, one sees that while women of higher socio-economic strata have a better bargaining position in seeking support to meet their domestic and childcare responsibilities, those who are poor and marginalized suffer the most in terms of striking a balance between paid and unpaid work responsibilities. It is also worthy to note that within all forms of market and private initiatives, it is women who are pre-dominantly found as helpers and service providers. This highlights the gendered notion of care within care work market spaces.

The market agencies therefore, remain mostly unregulated and only cater to those segments of population who hold purchasing and bargaining powers.

### 3.3 Childcare provisioning through Family and Community

While research shows that the primary care-giver could be any person with whom the child forms a relationship of love and trust and does not need to be restricted to one caregiver (Desai 2013), the ideological framework within which childcare activities are framed emphasizes care work as a private responsibility embedded in familial relations (Chigateri 2017; Palriwala and Neetha 2011). The gender aspect of this familial notion sees men as the primary breadwinner of a family while women are expected to take on household responsibilities as well as care work. In terms of childcare support at home, women carry the main burden. While men are found to provide some support in childcare, specifically in nuclear families; in households where there is at least one older child, the father tends to take a back seat while the older sibling takes on care responsibilities in the absence of the mother. Also, women in a high expenditure class are able to pay for childcare; however, the women who are hired by these high expenditure households continue to struggle with the burden of their own reproductive work, their care work as well as the need to be in paid work.

As a result, women not only have to look into numerous household activities for household maintenance, provisioning of water, fuel, fodder, and care work responsibilities, but they are also expected to provide unpaid support to family enterprises and agriculture work as and when required. This leads to the invisibility of women from spaces of formal employment and paid work, which reinforces the notion that women’s identity is not defined by her paid work but more by her marital relation, children and her household.

The nature of work available to most women, mainly informal employment, characterized by long hours, low and irregular wages and zero benefits, further
weakens their position in terms of bargaining support or help in catering to their care work.

Neetha and Palriwala (2011, 2012) argue that the state provisions of childcare in India remain limited in their reach and coverage in terms of providing support to women, because they are embedded within this notion of ‘gendered familialism’ which basically assumes ‘goodness’ of family in terms of providing a safe, loving and nurturing environment to the child; and turns away from any inequalities and power dynamics that may be reflected in familial relationships as ordinary aspects of any social unit. This leads to lack of affordable and accessible quality childcare infrastructure which makes it even more difficult for women belonging to marginalized sections to look after and fulfil their care responsibilities along with the urgency of being in paid work.

Women are therefore pressed to adopt extreme measures in order to cope with the situation.

The ISST-MC study 2020 highlighted that while some women chose to stop working for a few years after childbirth, the majority continued by adopting various strategies to manage their young children along with paid work. Figure 3 highlights some of the strategies that women respondents of this study adopted for managing their children.

The study highlighted that self-employed women, such as street vendors, preferred to carry their children with them when they went for their work, whereas domestic workers and rag pickers usually left their children alone at home or under the supervision of an older sibling who could be as young as 6 years old as mostly they were not allowed to bring child to workplaces by their employers. It also shows that women get negligible support from spouse, grandparents or other relatives and neighbours in terms of childcare, because everyone needs to go to work.

Even when women carried their children to workplaces, as in the case of construction workers and street vendors, the safety and security of the children remained a vital issue. The street vendors said that several children had been hit by scooters or cycles or had accidently fallen into drains because they play on the road while the mothers are engrossed in their paid work. The construction workers stated that if there were around 8-10 young children, sometimes the contractors paid one of the women to look after the children, while other women
worked. Other times young children were left at construction sites, mostly only in care of slightly older children. This not only puts the children at risk, but also makes it difficult for the mother to focus on her work (Desai 2013; Narayanan 2008; Palriwala and Neetha, 2011).

Zaidi and Ghosh (2018) note that the absence of childcare provisions make things more complicated for women. Although MNREGA stipulates that there has to be a crèche facility at the work site, in most sites that they visited there was no childcare facility. Officials explained that since women did not use the creches, they had stopped providing them, but women in their interviews said that the crèche facility was of low quality.

Anganwadis are the only public childcare centre available in most localities. However, mothers mostly do not use them because of their poor quality, lack of drinking water and toilets and irregular timings (ISST Workshop 2018). The centres were not equipped to manage very young children and children were expected to come and leave the centre on their own, which made mothers worry about their security.

Further, lack of or difficult access to public services such as regular water supply, drainage and waste management and toilet facility also appear to have had a

Figure 3: Managing Children with Paid work

Source: Data collected for ISST-MC Study 2020
negative impact on how women organize their unpaid care work and the time that is consumed in completing the tasks.

In terms of class variations in childcare, Neetha and Palriwala (2011) show that time spent on direct childcare work is marginally higher amongst middle expenditure households than those which are low expenditure. In these households majority of women do not pursue paid employment and are not educated beyond high school. In some cases grandparents are found to chip in and give time to childcare work. On the other hand, time spent on direct childcare amongst high expenditure households turns out to be lower than the other two groups. This is due to their ability to purchase services of other women as domestic workers/Helpers as support to their own care work.
With no support structure in place and also negligible help at home, women are found to be over-worked and stressed while trying to manage paid work responsibilities along with numerous household chores and childcare work (GrOW 2017, ISST-MC 2020). This double burden of work on women not only has a negative impact on the health and well-being of the woman but also impacts the child and older siblings. It limits woman’s paid work opportunities and affects the socio-economic situation of the family.

This dual burden has both physical and mental effects on women. Zaidi and Ghosh (2018) through the findings of their study, emphasize the need to acknowledge the aspect of stress (thakaan) as well as physical pain that women have to endure.

**Figure 4: Activities done during Rest time**

![Figure 4: Activities done during Rest time](Source: Data collected for ISST-MC Study 2020)
on an everyday basis. Women believe that they can stretch time and would stay up late or wake up early to ensure that they finish all their tasks. This led to lack of sleep, mental stress, frustration and anger, as well as cases of uterine collapse caused by carrying heavy loads on their backs. The ISST-MC study (2020) suggests similar issues around stress and lack of rest. Figure 4 shows that the majority of the women surveyed stated that during their time of rest, they either looked after their young children or completed other household chores. Only 10 percent of women reported that they actually took some rest during the day.

The health and development of the child also gets impacted. When the child is left in the care of an older sibling, other relatives or on its own for long hours, it can lead health problems such as stunting. Ghosh (2018) in her study on childcare in Delhi found that 47 percent of the children were underweight, only 67 percent of them had received age-appropriate vaccinations and only 39 percent had access to an ICDS centre. In Delhi 82.3 percent women worked until the time of delivery, 57.8 percent joined work within one month of delivery and 27 percent of women opted for home delivery rather than institutional delivery.

Older siblings are also affected in this situation. Zaidi and Ghosh (2018) report that young children, usually girls, were expected to take on the unpaid care responsibilities of mothers while she was away doing her paid work. This included not only sibling care but in some cases also household chores, fetching water and disposal of garbage. Sometimes, they also share the burden of paid work done by mothers. In the field, the study found small girls doing physically strenuous work under MNREGA in place of their mothers. This situation can also affect the education of older siblings. The ISST-MC study (2020) revealed that in several field study areas older siblings attended school on alternate days so that they could share the responsibility of care work among themselves. During FGDs children and women said that schools were aware that the children were unable to attend school due to their care work responsibilities but they did not create a fuss.

Lastly, the safety and security of children came across as a major area of concern for most mothers. As already discussed, children, even when they accompany their mother to work sites, remain vulnerable as the work sites have high probability of accidents as children mostly remain uncared for in such locations. Children who were left at home in sibling care or on their own were even more vulnerable. Discussions and debates at the national workshop (ISST Workshop 2018) highlighted this as a
major area of concern. The ISST-MC study 2020 also highlighted that mothers were extremely worried for the wellbeing and safety of their children.

From the above it is clear that the invisibility of women in paid work or their choice of work options is not only linked to the kind of work opportunities that are available to them but also the care work and unpaid work responsibilities as per the social structure and patriarchal norms within which they function. Women have to juggle numerous tasks throughout the day and while childcare is perceived as an important and an exclusive core work of women, women are rarely able to devote exclusive time to it and are usually found doing several other activities along with looking after their children. This has a negative impact not only on the physical and mental well-being of the mother but also compromises the health, nutrition, safety and growth of the child as well as the health and education of older children. Participants at the ISST Workshop 2018 unanimously agreed that provision of full day childcare support system, subsidized by the state, could go a long way in easing the burden on women and having a positive impact on the health and well-being of both the mother and children.
Several examples from within India as well as other countries show that full-day comprehensive childcare provisioning has a positive impact on the health and well-being of both mother and child.

Mahajan (2018) discusses the case of Sangini, a full-day childcare centre run as a cooperative by SEWA. Children who came to Sangini spent more time at the centre (9 am to 5 pm) and this had a positive impact not only on the mother’s income and her mental health but also the education levels and nutrition habits of the children (Figure 5). In comparison to children going to ICDS, children in Sangini were talking and expressing themselves more. They also had developed better nutrition habits and were keen to try different kind of food. In terms of vaccinations too, 96 percent of Sangini mothers reported completion of age-appropriate vaccination of their children in comparison to only 88 percent of ICDS mothers.
Chigateri (2017) examines two cases of quality childcare provisioning in India: Mobile Creches and the Tamil Nadu Integrated Child Development Services (TN ICDS). Though these organisations are distinct in terms of management and reach, they have been able to make a mark for two reasons: first, they are committed to providing childcare of decent quality and, second, they take into account the need to be gender-responsive and recognise the importance of flexible provisioning of services in terms of location, timings and extent of staff involvement.

Other studies argue that childcare provisioning should be handled by the state. Chaturvedi (2018) draws on examples from Nordic countries, Latin America and the Caribbean where the provision of childcare had a significant positive impact.
on women’s access to work places. This impact was specifically found more in households that were socio-economically marginalized. Chaturvedi draws attention to two aspects of these programs. First, the government actively involved researchers, and together they formulated research questions that would help them scale-up the programs. In the Nordic countries, they kept correcting the implementation and after 2015 they actually announced childcare for women as a right. In Chile, the state is very cognizant of its responsibility in taking care of children and in supporting mothers. They have lawyers who look into child protection and they are supported by municipal-level governing bodies. Parental engagement is not optional but is institutionalized. Chaturvedi also points out that duration of childcare is a significant aspect of childcare provision in these countries. A minimum of 8 hours of childcare service is seen across the world but not in India. Other countries not only had 8 hours of provision of childcare, but also if the parents wanted to leave the child for longer than 8 hours they could make an arrangement with the care giver where they pay on hourly basis. They also have various forms of home visitation programs specifically for nutrition but the childcare provision only focuses on the expenses of the care giver to stay at the centre. There is no expectation that she should go outside and do outreach work in terms of nutrition and health counselling. Human resources is seen as an important contributor to the quality of childcare. The Nordic countries have one teaching staff, one care staff and one administrator, while Chile has introduced a 2-year training program to improve child development outcomes. Chaturvedi argues that there is need to introduce strong components of intensive training, supervision and monitoring within the anganwadi system for it to be able to improve the quality of childcare provided by the centres.

Chakraborty (2018) also spoke highly of the childcare reforms that have taken place in Nordic countries, specifically Sweden. She emphasized that in India too, there is a need to move away from seeing childcare only as the mother’s responsibility. She stressed the need to convince the state that provisioning of quality, full-day childcare could lead to fastest economic growth of the country.

Havnes and Mogstad (2011) in their study of the large-scale expansion of subsidized childcare provision in Norway also highlight the strong positive effect of childcare provision on children’s educational attainment as well as on labour market participation. Children of mothers with less education belonging to low socio-economic backgrounds benefitted most from the childcare facility
Early childcare and education is considered to be an essential intervention in terms of ensuring appropriate growth and development of children. While an important aspect of this is the provision of resources and services, the process of delivering these is of as much importance for the overall impact and effectiveness of such a provisioning. Desai (2013) calls it ‘the dimension of ‘care’ and sees it to be as central to the success of early childhood care activities as the resources provided for it. Provisioning of appropriate care not only requires the consistent presence of a significant care-giver but also puts emphasis on the relationship that the child shares with his/her care-giver and the sense of trust, confidence and security that the relationship emanates. Childcare activity in India is embedded within the notion of gendered familialism, which puts the entire burden of childcare on the mother and close family and fails to ‘recognize childcare as a public responsibility’. This notion also guides the laws, policies and programs linked to childcare in the country and makes them incapable of comprehending the burden that it puts on women, specifically those whose need to work and earn a living constantly forces them to strike a balance between paid and unpaid responsibilities. This has a grave impact not only on the quality of care that the burdened woman is able to provide to her child but also on her own physical and mental health quality and that of her older children, especially if they are girls (Palriwala and Neetha 2011).

Though a strong body of civil society organisations has been trying to draw the state’s attention to the significant need of providing childcare support to all women, the question of public provisioning of crèches and childcare is not yet part of public consciousness. There is, therefore, a need to highlight the issues of childcare as both a social as well as a state responsibility. Here it is important to emphasise that even breast-feeding, which only a mother can do, also requires social and state support to ensure that women have safe spaces outside their home and in their workplaces where they can feed their child without inhibitions.
The paper highlights that while there are some existing entitlements for public provisioning of childcare, such as those under MNREGA or ICDS, lack of awareness and demand lead to under utilisation of these services. There is, therefore, a need to build awareness and demand for existing entitlements of public provisioning of childcare and to strengthen the existing infrastructure under ICDS to address some of the crucial problems faced by families from marginalized sections who have young children.

In terms of demand for full-day childcare support to all women, the paper concludes that it is evident that women, especially the most marginalised, are burdened with both paid as well as unpaid work. Their necessity to earn often pushes them to adopt strategies that either result in them suffering huge pay cuts or loss of job, or put their child in vulnerable and unsafe situations. It also has a significant impact on the education, health and overall well-being of her older children. However, there is a need to build strong research-based evidence to show that childcare is an important component of social support to families for child rearing, with special implications for women’s empowerment; and that provisioning of day-long childcare support could lead to women experiencing better livelihood opportunities, ease in mental and physical stress and, to some extent, social and economic empowerment.

Finally, it is important to recognise that the demand for provisioning of a state-funded system of universal full-day quality child care is embedded in the understanding that all women require support for their own mental and physical well-being as well as for facilitating nurturing care for their children.
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