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**Sugar on the Tongue and Ice on the Head:
Anganwadi Workers Manage Paid and Unpaid Care Work**

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Disclaimer:

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List of Acronyms

AWW - Anganwadi Worker

AWH - Anganwadi Helper

AWC - Anganwadi Centre

AIFAWH - All India Federation of Anganwadi Workers and Helpers

ASHA - Accredited Social Health Activist

ANM - Auxiliary Nurse and Midwife

BJP - Bharatiya Janata Party

CDPO - Child Development Project Officer

CITU - Centre of Indian Trade Union

GSDP - Gross State Domestic Product

GNP - Gross National Product

ICDS - Integrated Child Development Scheme

ICWS - Integrated Child Welfare Services

NGO - Non-Governmental Organisation

NNM - National Nutrition Mission

MPR - Monthly Progress Report

SHG - Self Help Groups

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Abstract

In this study, I explore the interlinkages and dynamics between paid and unpaid care work taking the example of Anganwadi Workers (AWWs) in Pune, India. I examine how AWWs exercise collective and individual agency. I critically assess the feminization of care work and the simultaneous use of voluntary labour of women in welfare programmes. The study is grounded in feminist epistemological standpoint theory. It adopts an intersectional lens to show that AWWs are not a homogenous group and their experiences are shaped by their class, age, marital status and living arrangements. It deploys the concept of care economy, decent work deficit and agency and relies on in-depth interviews and participatory observation to uncover the performance of paid care work in the public sphere and unpaid care work in the household.

Findings indicate that AWWs face a decent work deficit primarily due to their status of volunteers and state's lack of investment in the infrastructure of their work environment. There is a gendered division of unpaid care work in the household as a result of which women incurred motherhood employment penalty and job quality penalty. A few of them also face time poverty. The study shows that AWWs are conscious of their marginalization as paid as well as unpaid carers. They have collectively challenged the lack of recognition of their paid work. Individually, they resort to various strategies to navigate through social norms around unpaid care work.

Relevance to Development Studies

This study rekindles the debate about feminization of care work, paid and unpaid. It comes at an opportune time, given that India relies singularly on the labour of its women to harness the demographic dividend of its young population. It takes a critical look at the role of the state in reinforcing gender roles in the public sector and in reproducing precarity for paid carers by voluntarising care work. It is the first study in India to unravel the dynamics between paid and unpaid care work. It contributes to the discourse about gender inequalities in the labour market as the country copes with the paradox of improvement in the education level of its women but falling labour force participation.

Keywords

Anganwadi workers, decent work, precarious work, care work, motherhood employment penalty, time poverty, union, agency

Prologue

While working as a development practitioner at a public-policy think tank in India, I developed an index on the early childhood development of children in all states in India. To do that, I studied public healthcare programmes such as the Integrated Child Development Scheme and National Health Mission thoroughly. That was my first brush with the world and work of Anganwadi Workers. But at that time, I was wearing the lens of child welfare so I was not able to appreciate the concerns of AWWs. When I came to ISS, I took up the Poverty, Gender and Social Protection class in Term 2. It was there that I became conscious of gender bias in welfare programmes, the theoretical underpinnings of the undervaluation of care work and the repercussions it has on the lives of women. It became my motivation to conduct this study; to produce knowledge that will get us one step closer in appreciating the labour of women.

Chapter 1 Introduction

This study is about the dynamics of paid care work and unpaid care work by Anganwadi workers in India. Anganwadi Workers (AWWs) work in the programs which are a part of the Integrated Child Development Scheme. ICDS launched in 1975, addresses malnutrition in children, young mothers and adolescent girls. As a part of ICDS, the Government of India (GoI) established childcare (and mother care) centres called Anganwadi Centres (AWC). As of 2015, there are 1.346 million Anganwadi Centres in India that provide nutrition to 102.233 million beneficiaries, and pre-school education to 36.544 million children (GoI n.d). Each AWC is managed by an AWW and Anganwadi Helper (AWH). The total number of AWWs in the country is 2.4 million (Ministry of Women and Child Development 2019). Children between the age of 0-6 years, pregnant and lactating mothers and adolescent girls receive supplementary nutrition, immunization, health check-up, referral services, nutrition and health counselling and preschool education at the AWC. AWWs supervise preparation/distribution of meals, keep records of health of children and young mothers, provide pre-school education, counsel mothers on childcare and family planning and assist in immunization of children (GoI, n.d). They play an important role in the welfare of women and children.

However, the GoI denies AWWs the status of workers and regards them as social workers or volunteers. Their work is not regarded as that of a formal, regularised state employee. So the women receive an honorarium, not salary. Their social security benefits are limited to life insurance scheme, maternity leave and scholarships for their children and a 25% reservation in the post of supervisors¹ for AWWs (GoI n.d). They do not receive a decent salary, pension or provident fund (Palriwala and Neetha 2009). The lack of proper social security benefits has made them vulnerable to precarious work and economic insecurity. Therefore, the issue of decent work is central to the lives of AWWs.

In the private sphere, due to the patriarchal context where women are expected to perform unpaid care work such as raise children, look after the elderly, clean, cook and wash (Antonopoulos 2008) and AWWs are expected to perform household chores as majority (80%) of the AWWs are married women (NIPCCD 2006). So how do AWWs manage to perform paid care work as well as their unpaid care work/reproductive labour? Earlier studies have shown that AWWs cannot purchase non-familial replacements of care in their home due to their inadequate pay. This leads to emergence of a care deficit in their homestead and consequently emergence of varied care arrangements, in the absence of the primary care-giver (Palriwala and Neetha 2009).

¹ AWWs report to the Supervisor. The Supervisor is a government employee.

As paid care workers, collective agency is one factor that has proven to be an advantage for AWWs. Unionization of AWW&Hs ²has been successful in securing them a higher pay (Chaudhary 2018). AWW&Hs actively engage in protests, strikes at the local, state and national level AWWs, individually, have contested and won elections at the local level (Krishnaprasad and Peer 2019). Therefore, despite the pressures of paid work and that of reproductive labour, they have mobilized individual and collective agency.

This study is an attempt to examine the performance of both paid care work and unpaid care work of AWWs in the city of Pune, India. I situate AWWs as women who work as paid carers in the public (government) sector and as unpaid carers in the household. I interrogate the label of ‘volunteers/social workers’ given to the AWWs by the state. I explore the performance of unpaid care work in their household and how it influences their life. I examine how AWWs have collectively and individually asserted themselves in the public and private sphere. I examine the social construction and valuation of care work by the state and society at large and how it manifests in the lives of AWWs.

1.1 Justification

To understand the issue of paid work and unpaid care work of women in India, it is important to trace the trajectory of state-funded childcare programmes in India. Prior to the AWWs, there were *balasevikas* or female nursery teachers, introduced in the post-independence India under the Integrated Child Welfare Services (ICWS) in 1954 (Sreerekha 2017). In 1975, ICWS was transformed into ICDS where the focus then shifted from child education to health of children and mothers. ICDS was further expanded and universalized only in the early 2000s (Sreerekha 2017).

The load of childcare on the work of women in the unorganized (informal economy) sector was recognised by the Committee on Status of Women in India in 1974. So the Committee recommended provision of creches, especially for women in the unorganized sector in response to the low participation of women in the market and politics (Sreerekha 2017). In 1975, the National Policy on Children introduced creches for children under 5 years for ailing mothers and women in the informal sector. This scheme was not universalised and benefited a fraction of the total population of children. Besides, the emphasis on ailing and working mothers implied that fit and non-working women should tend to their children on their own. Meanwhile, women in the organised sector were entitled to day-care under various Acts (Paliwala and Neetha 2009). In 1994 the GoI established the National Creche Fund. As per the Fund, CSOs, AWCs and *Mahila Mandals*³ could set up day-care facilities for poor children (Sreerekha 2017). The creches would be funded

² Anganwadi Helpers assist the Anganwadi Workers. Given that the role of the helper is not as fledged out as that of the worker and time constraints, the primary focus on this study is the Anganwadi Worker.

³ Women’s organizations.

by the GoI for the first five years after which they had to be self-financed (Government of Haryana n.d). Unfortunately, very little information is available about the success of this scheme. Thereafter, in 2006, another scheme, the Rajiv Gandhi National Crèche Scheme for Working Mothers was implemented. In 2012, the Steering Committee on Women's Agency and Child Rights noted that the creche fund was not successful and suggested turning the AWCs into creches (Planning Commission n.d).

From the above two paragraphs, it is apparent that the issue of childcare and women's economic empowerment fell through the cracks. It was overridden by a concern for children and women's health and as alluded to before, investment in the nation's future labour force. It indicates the gender bias in the welfare programmes in India as well as the outlook of the state regarding childcare being women's responsibility. Consequently, the lack of provision for childcare and the patriarchal nature of India ensured that childcare and other household responsibilities remained with women. This is mirrored in the labour force participation rate of women in the country. According to Deloitte (2019:13), only 26% of Indian women were employed or seeking employment which is 50% points less than men. Studies show that increased enrolment of women in higher education and lack of employment opportunities are delaying their participation in the labour market (Verick and Chaudhary 2014). But unpaid care work remains one of the principle reasons for women's absence from the labour force. About 35% of women in rural areas and 46% of women in urban areas were engaged in unpaid care work (ibid). Evidently, there is still a gendered division of labour in households in India.

As demonstrated above, state-funded provisions for childcare in India are largely absent. All this indicates that women who do paid and unpaid work have to employ various strategies to compensate for their absence in the household such as employing a domestic worker (Palriwala and Neetha 2010). This gives rise to care chains where the economic value of care falls as it is passed on from one woman to another (Parrenas 2012). It also reinforces the notion that domestic work is to be performed by women and more specifically, poor women. But not all women can afford market based options of care. Literature indicates that women who perform both, paid work and unpaid care work in the household experience a double day or double shift (Hochschild 1987; Antonopolous 2008).

The incidence of time poverty as a result of doing paid and unpaid care work is also common among women (Antonopolous 2008; Hirway 2000; ILO 2018). UNDP (1995) (in the Human Development Report) and International Labour Organization (2018) assert that if paid and unpaid work is taken into account, women shoulder more work than men all over the world. This was confirmed by the time use survey conducted in India 1998. The survey shows that if extended SNA activities and SNA activities are combined, women work for longer hours than men. As compared to men, they have 8 hours less for

self-care leisure, leisure and learning in a week (MOSPI n.d).⁴ The same finding was confirmed in Samantroy's (2015) study of women employed in education, health, IT, garment manufacturing and retail sector in Delhi, India. Despite the inclusion of women who were highly-skilled and had high income, her study revealed that the pressure of performing at paid and unpaid work resulted in limited time for leisure and self-care.

1.3 Relevance of the Study

Although research by Palriwala and Neetha (2009), Razavi (2007) have addressed the issue of AWWs as care workers, this is the first study that examines the interlinkages between paid and unpaid care work of AWWs. Research has been done on working conditions, nature of work, pays and benefits, organising conditions in the states of Delhi (Sreerekha 2017), Haryana and Tamil Nadu (Palriwala and Neetha 2009). My study adds knowledge on working conditions about AWWs in Maharashtra, which is original since the day to day functioning of AWCs, benefits to AWWs, timings of AWWs differ from state to state (GoI n.d; Press Information Bureau n.d). I build upon the earlier studies on child-care arrangements of AWWs (Palriwala and Neetha 2009) and examine other aspects of unpaid care work such as non-relational, indirect unpaid care work in the households of AWWs. I also investigate the time for self-care and leisure available to AWWs, use of labour saving devices such as washing machines and private vehicles and mobilisation of individual agency. This is the first study to investigate the performance of unpaid care work by AWWs in India in its entirety (including time poverty and labour saving devices) and its relationship with their paid care work. Therefore, I hope to make an important empirical and academic contribution to knowledge about care workers.

1.4 Research Question

What are the interlinkages and dynamics between paid care work and unpaid care work of AWWs and what implications does it have for their recognition as workers at the workplace and within the household?

1.5 Sub-Questions

- What is the nature of work, terms of employment and working conditions of AWWs?^{[1][2][3][4][5][6][7][8][9][10]}
- Do AWWs suffer from a decent work deficit at the work place and a care deficit at home?^{[1][2][3][4][5][6][7][8][9][10]}
- How do AWWs express agency individually and collectively?

⁴ This paragraph is based on my essay for Poverty, Gender Social Protection class in Term 2.

1.6 Methodology

I will make use of the concepts of care economy, decent work and agency which are elaborated in Chapter 2 to analyse the data and address the research questions. In this section, I present my epistemological perspective, research methods and the process of data collection and profile of the research participants.

Feminist standpoint epistemology captures the everyday reality of women's activities which is excluded from the mainstream academic and public discourse. It is a theory as well as way of doing research (Brooks 2007). It captures the everyday reality of women's activities which is excluded from the mainstream academic and public discourse. Some scholars that subscribe to this theory contend that this knowledge, built from the narratives of marginalised such as women, is more objective because they are more attuned to the values and interests of those in power (Brooks 2007). The question the neutrality and objectivity of scientific, statistical or experimental research methods on grounds that they reflect vested interests of the ruling class or men, as they control these knowledge producing institutions (Harding 1995). For that reason, the focus of my research is on women who are at the bottom of the hierarchy in the institution of ICDS and as women living in a patriarchal society, do not hold a position of power.

I apply the concept of intersectionality as a methodological tool. Intersectionality 'refers to interaction between gender, race and categories of differences in people's lives, social practices, and institutional arrangements and outcomes of these arrangements...' (Davis 2008: 68). Kimberle Crenshaw coined the word 'intersectionality' to show the multiple forms of oppression that Black women faced as a result of their race, class and gender. She stated that the category of women is not homogenous as it is dominated by white, middle-class women who exclude experiences of Black women in the discourse on feminism. Similarly, the category of racism is dominated by experiences of black men, and does not represent black women (Crenshaw 1989). Along the same lines, I argue that AWWs are not homogenous. Age, marital status, number of dependents, living arrangements and class differentiate them and a combination of these factors determine their experiences. Therefore, I use the intersectional lens to examine how the differences in their social locations affects the AWWs. I also explore the differences and commonalities between AWWs and another category of workers who are AWHs who work together at the centre.

Previous research on unpaid care work of AWWs was conducted in rural areas in the states of Haryana and Tamil Nadu (Palriwala and Neetha 2010) and Delhi (Sreerekha 2017). This study is conducted in the city of Pune in Maharashtra, India. The urban context matters in the study because nuclearization of families in urban areas of India (Singh 2003) has ramifications of unpaid carers since the decrease in the number of unpaid carers increases the burden of a single carer (Oxfam India). Secondly, Pune is the second largest

city in the state of Maharashtra and the 9th most populous city in India. The city has also been ranked 1st in the Ease of Living Index formulated by the Ministry of Urban and Housing Affairs, India (Times of India 2018). It has performed well on parameters such as water supply and public transportation (ibid), both of which are important to this study as they are labour-saving physical infrastructures which have an effect on care work.

Research Methods

- In-depth interview- In-depth interviews bring out ‘rich descriptions of lived experiences’ (O’Leary 2013: 150). Here, the interviewee explains his/her ‘subjective’ interpretation of reality and how it affects him/her (Hesse-Biber 2013: 189). This is especially relevant to feminist research as it allows women in marginalised positions to voice their concerns (ibid). So I chose to do semi-structured, in-depth interviews. The interviews had a conversation quality about them, allowing the interviewee to narrate her side of the story without me circumscribing what she can say. I also used a guiding questionnaire to nudge or direct the conversation so as to bring out the different themes relevant to this study.

I conducted interviews with 30 AWWs and 10 AWHs. Of the 30 AWWs in the study, 25 are currently married and had children (24), and the other 6 are either unmarried (2), divorced (2), widowed (2). Except for one widowed woman who lived independently, most of the widowed and divorced women lived with their parents and brother’s family. Most of the women were Hindu (28) and belonged to Scheduled Castes⁵ (SC) and Other Backward Castes⁶ (OBC) (26) and only 2 were upper caste Hindus. Two AWWs were Muslim and Christian each. Educational qualification of the AWWs ranged from 10th grade to a post-graduation (MA) level. A significant proportion of AWWs (56.6%) had completed undergraduate studies or are in the process of doing so. Age of the AWWs ranges from 27 to 63. About (10) 33.3% were between 40-50 years of age, 8 (26.6%) were between 30-40 years of age, 6 (20%) were over the age of 50, and 6 (20%) were under the age of 30. The women had been working at the AWCs for 15⁷ years on an average. The longest serving AWWs had worked for 41 years.

The age of AWHs ranged from 34 to 60. On an average, they had worked for 16 years. Out of the 10 AWHs, 5 were married with children, 1 was unmarried and 4 were widows. Three AWHs had completed 10th grade, the minimum level of education required to become eligible for AWW. Only one was a Christian, the rest were Hindus and belonged to the SC and OBC.

⁵ Scheduled Castes occupy the lowest rung in the caste hierarchy in India.

⁶ Other Backward Castes is a collective term used by the GoI who classify castes that are educationally or socially disadvantaged.

⁷ This figure includes the amount of time AWWs worked also in capacity of being a AWH.

I also interviewed three union leaders and activists from the All India Federation of Anganwadi Workers and Helpers to examine women’s experiences of undertaking collective action. I interviewed two union leaders who worked at the district level and as well as the State Secretary of CITU and AIFAWH.

- Participatory observation- Here the researcher acts as a participant as well as an observer in an activity. It helps in analysing ‘dynamics’ between people and to take note of ‘everyday’ and well as uncommon events (Hesse-Biber 2013: 129). On the field, I took note of the interactions between the Child Development Project Officer⁸ (CDPO), community members, AWWs and me. I took note of the activities AWWs engage in as a part of their official duties and their interaction with the physical environment.

The following two tables illustrate the profile of the AWWs and AWHs.

Table 1: Profile of Anganwadi Workers

Code Name	Age	Education	Religion	Caste	Marital Status	Working for (years)
Priyanka	28	Pursuing under-graduation	Hindu	Maratha	Married	4
Swapna	48	Undergraduate	Hindu	SC	married	16
Mangal	63	10th pass	Hindu	OBC	unmarried	41
Suman	28	Pursuing under-graduation	Hindu	OBC	married	4
Seema	48	Undergraduate	Hindu	SC	unmarried	24
Supriya	53	10th pass	Hindu	SC	married	26
Sandhya	62	10th pass	Hindu	SC	divorced	41
Kanchan	32	Undergraduate	Hindu	SC	widowed	12
Poonam	27	Undergraduate	Hindu	OBC	married	3
Sarah	28	Pursuing under-graduation	Muslim	Not Applicable	married	10
Jyoti	48	10th pass	Hindu	OBC	married	12
Sangeeta	41	Undergraduate	Hindu	OBC	married	18
Shilpa	28	10th pass	Hindu	OBC	married	12
Meenal	42	Pursuing under-graduation	Hindu	OBC	married	15
Gayatri	48	10th pass	Hindu	OBC	married	18
Usha	43	Pursuing under-graduation	Christian	Not Applicable	widowed	22
Aruna	40	Completed Masters	Hindu	SC	married	14

⁸ Functionary of ICDS to whom the Supervisors report.

Deepa	39	10th pass	Hindu	SC	married	17
Lata	52	10th pass	Hindu	SC	married	17
Varsha	51	Undergraduate	Hindu	OBC	married	17
Medha	45	10th pass	Hindu	SC	married	17
Suvarna	27	10th pass	Hindu	SC	married	4
Ranjana	50	Undergraduate	Hindu	SC	married	12
Kirti	50	Undergraduate	Hindu	SC	married	16
Alka	36	12th pass	Hindu	OBC	married	8
Vaishali	33	Completed Masters	Hindu	SC	married	4
Kalpna	35	10th pass	Hindu	SC	married	17
Neelam	36	BA	Hindu	Maratha	married	9
Jayati	55	10th pass	Hindu	SC	unmarried	29
Sheetal	39	10th pass	Hindu	OBC	married	10

Table 2: Profile of Anganwadi Helpers

Code Name	Age	Religion	Caste	Education level (grade)	Marital Status	Working for (years)
Rupali	34	Hindu	SC	10th fail	unmarried	9
Neelima	45	Hindu	SC	10th fail	widow	19
Radha	43	Hindu	SC	9th fail	widow	16
Mandakini	38	Hindu	OBC	11th std	widow	7
Damini	60	Hindu	OBC	7th pass	widow	41
Upasana	56	Hindu	OBC	8th pass	married	17
Archana	39	Hindu	SC	7th std	married	6
Vidya	55	Hindu	OBC	10th pass	married	27
Swati	36	Hindu	OBC	10th pass	married	5
Veena	55	Christian	SC	4th pass	married	20

All interviews were conducted in *Marathi*, which is the local language in Pune. I transcribed and translated the interviews myself as *Marathi* is my native language. I maintained participatory observations made at the AWC in a diary. The field work was conducted in July and August 2019. My research is also informed by studies by other scholars and institutions as well as. Secondary material such as news articles, books and policy documents related to ICDS will be studied as part of the literature review.

Research Matrix

The following table is a research matrix. It presents the links between research sub-questions, the information collected in relation to the research question and the research method.

Table 3: Research Matrix

Sub-Questions	Information Set	Methods of Data Collection
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<p>What is the nature of work, terms of employment and working conditions of AWWs?</p>	<p>Entitlements of AWWs (salary, pension, insurance, contractual agreement, leaves), reimbursement of miscellaneous expenses, working hours, distance from home to AWC, means of transportation, number of children in the AWC, drinking water and sanitation facilities, cleanliness and hygiene of AWC, provision of essential equipment (weighing scale, toys, stationary, plates, glasses</p>	<ul style="list-style-type: none"> ● Primary data: In-depth semi-structured interviews with AWWs and with union leaders ● Participatory observations at the AWC, training programmes and ● Secondary data: Guidelines of Integrated Child Development Scheme, reports, research papers and books
<p>Do AWWs suffer from a decent work deficit at the work place and a care deficit at home?</p>	<p>Sex, age and employment details of family members who participate in care work in the HH, number of : children, sick and elderly persons in the household.</p> <p>Work performed before becoming AWW, performing direct, relational activities such as feeding a child, looking after the sick and elderly and indirect care activities such as cooking, cleaning, grocery shopping.</p> <p>Usage of household appliances such as washing machines or domestic workers, access to daycare facilities or community members who assist in child minding.</p>	<ul style="list-style-type: none"> ● Primary data: In-depth semi-structured interview with AWWs and household members. ● Participatory observations at the AWC and homes of AWWs ● Secondary data: Guidelines of Integrated Child Development Scheme, reports, research papers and books

	Adequate sleep (6-8 hours), time for self care, leisure activities, participation in social activities, energy levels	
How do AWWs express agency individually and collectively?	Information of strikes, protests and activities of the union	<ul style="list-style-type: none"> ● Primary data: In-depth semi-structured interviews with leaders of unions, social activists, AWWs ● Participatory observation at the AWC ● Secondary sources: Books, online articles, research papers

1.7 Risks and Ethics of Data Collection

Feminist standpoint theory encourages analysing the relationship between the researcher and the researched, unlike traditional research methods that seek to nullify this relationship or reject it (Harding 1991). Harding emphasises on the importance of being self-reflexive to uncover ‘relations of power’ in knowledge production (Naples 2007: 1). Ergo, to produce knowledge that is strongly objective, the researcher should acknowledge his or her values and social location as it influences interpretation of the phenomenon (O’Leary 2013: 57).

Therefore, I would like to draw attention to my positionality as a researcher. I am a young student, pursuing higher education, a Masters degree abroad, which in most cases is a privilege. My parents and grandparents are lawyers and therefore have professional degrees. I live in a modern apartment where infrastructure and recreational activities are organised thoroughly. All these factors put in the upper middle-class category in India and distinguish me from the AWW&Hs who did not have the same privilege. It implies a power relation between me, the researcher and the AWW&Hs, the researched, of which I was conscious. I tried to make the class difference less visible by wearing simple kurtis⁹, minimum accessories and no make-up so that AWWs don’t feel inhibited while conversing with me. I speak Marathi, my mother tongue and also the local language in Pune fluently. It helped in establishing a rapport with the women.

⁹ A long shirt commonly worn by females in India.

Having said that, before beginning with the fieldwork, I was apprehensive about getting women open up to me. I thought that I would have to so spend sometime in establishing a rapport with the women for them to share their lives with me. However, most of the women were comfortable while interacting with me and were forthcoming about the issues that they faced. They mentioned that students pursuing post-graduate studies in Social Work had conducted interviews with them in the past. I think this prior exposure of AWW&Hs to research reduced their concerns about the purpose of the interview and the use of information they provide. It helped in putting them at ease with me.

The AWW&Hs acknowledged me warmly when I attended events such as the protests, cooking competition and training programme. To me, this was a signal of their acceptance of me. It gave me the confidence to continuing my interactions with the women as before. They were curious about my education in the Netherlands and would ask me why and how I chose to pursue education abroad. I was aware that I asked them intimate details about their life. So I was happy to share with them my motivations and experience of living abroad.

Furthermore, as a girl growing up in a patriarchal society, I have been socialised into performing unpaid care work at home, unlike my brother who is not expected to perform chores at home simply because of his sex. My mother, despite working as a lawyer prior to my birth, gave up her career after I was born so that she could take care of me and the household. So I am acutely aware of the gendered nature of unpaid care work in India and its repercussions on the lives of women. I think my social and cultural situatedness helped me in relating to the AWWs.

Securing meetings with AWWs in their homes was a challenge due to time constraints, concerns regarding privacy and perhaps my positionality. A young (<30) AWW who had earlier permitted me to perform participatory observations at home looked visibly uncomfortable when I reached her home and expressed her desire to cut short my visit. During the interview the same women had seemed comfortable with me. She and I indulged in the same recreational activities such as watching videos on Youtube, playing games on the internet, despite our class difference. I believed that our similar age and interests encourage her to speak openly and freely with me, which in turn encouraged me to approach her for participatory observations at home. But in hindsight, I think she felt embarrassed of her home which was in a slum area. Looking at me, a young woman of similar age but different class must have made her feel uncomfortable. Therefore, despite my earlier impressions that age and technology perhaps reduce the differences among people, class and power are present. Other women approached their circumstances in a matter of fact way. They did not seem to mind the class difference and were just happy to interact with me as they mentioned, nobody takes much interest in their lives.

Names of all the research participants have been changed to protect their identity. Obtaining written consent from participants in the study was difficult as the cultural context in India gives a preference for oral consent. Therefore, the study despite the preference for written consent in research, oral consent was used. The research requires in-depth interviews, so it was not possible to collect all information in one meeting. So while obtaining consent, participants were informed of the possibility of having multiple meetings and that they have the right to not consent if they find this arrangement inconvenient. But in most cases multiple meetings were not required and phone-calls were sufficient to collect missing information. Participants of the study were informed about the purpose of the research and how the data will be analyzed. Permission to record the interviews were obtained in most interviews. However, a few participants expressed discomfort with the interview being recorded. Therefore, only written notes were taken in those interviews. Participants were also informed that they can withdraw from the research at any time but no one withdrew.

1.8 Structure of the Paper

Chapter 1 of the paper begins with a background and discussion of the relevance of the study, followed by the research questions, methodology and ethical challenges. Chapter 2 presents the conceptual framework consisting of care economy, decent work for paid and unpaid carers and agency. Chapter 3 onwards findings of the research are presented. Chapter 3 presents the nature of paid care work and decent work deficit experienced by AWWs. Chapter 4 presents the activities of AWWs in unpaid care work and how it affects their time poverty and ability to participate in the labour market. Chapter 5 discusses the collective agency exercised by AWWs to gain recognition as paid carers. Chapter 6 discusses the mobilization of individual agency by AWWs to reduce their workload and to improve their working conditions. Chapter 7 presents the conclusions.

Chapter 2 Conceptual Framework

In this chapter, I explain the three concepts: care economy, decent work, agency that I draw upon to examine the interlinkages and dynamics between paid care work and unpaid care work of AWWs. I apply the concept of care economy to show how it has an impact on women's recognition as unpaid care workers in the household and paid care workers. I apply the concept of decent work to interrogate the terms of employment and working conditions of paid care workers, that is AWWs. Lastly, I draw on conceptual understandings of agency to show how AWWs have been able to express their agency individually and collectively.

2.1 Care Economy

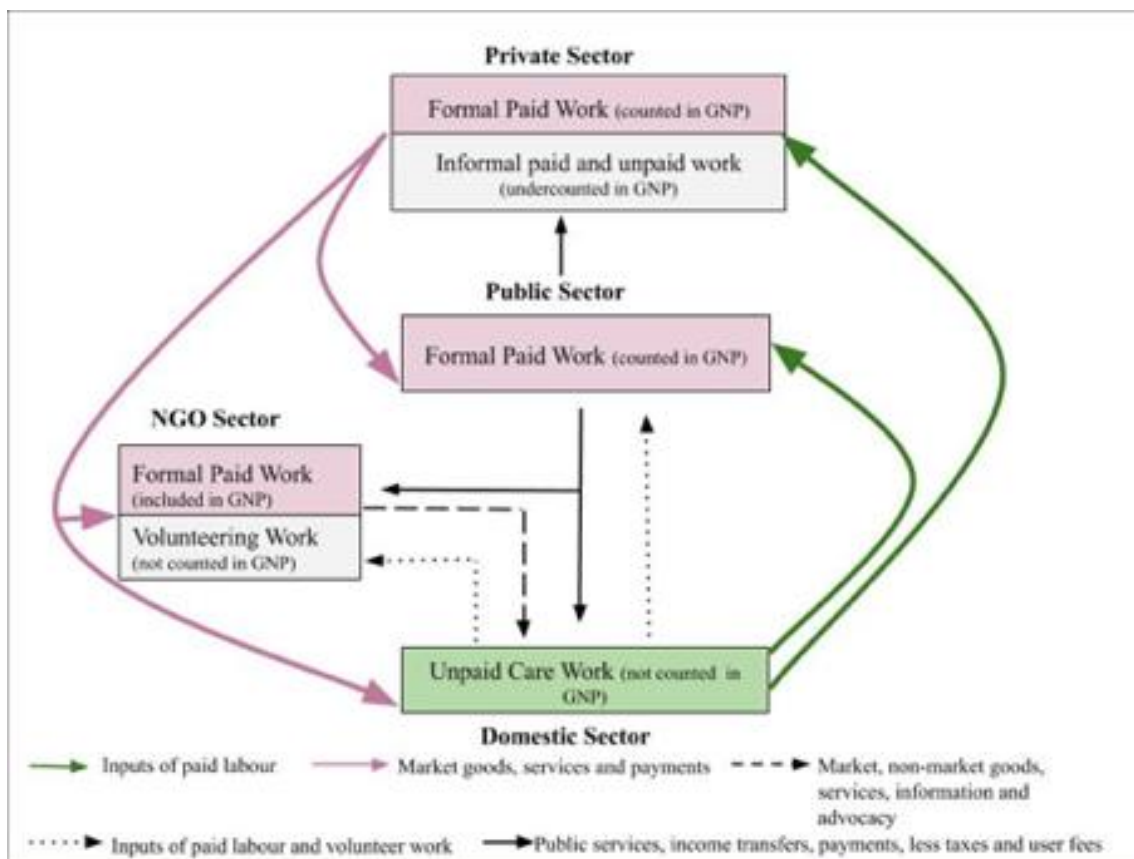
England et al. (2002: 455) define care work as 'occupations in which workers are supposed to provide a face to face service that develops the human capabilities of the recipient. By human capabilities we refer to health, skills or proclivities that are useful to oneself and others. These include physical and mental health, physical skills, cognitive skills and emotional skills such as self-discipline, empathy and care.' By that definition highly paid professionals such as university professors, dentists, doctors, moderately or underpaid professionals such as nurses, nannies, cooks, domestic workers and unpaid care workers such as family members who take care of children, elderly and sick all fall under the category of care workers (Razavi and Staab 2010: 409). As for unpaid care givers, they are often women in the household who perform activities such as cleaning, cooking, maintaining a household on the basis of familial and kinship ties. These activities are also undertaken on a volunteering basis for friends, neighbours or the larger community (ILO 2018)¹⁰. Scholars define unpaid care work as non-market work or social reproduction (Folbre 2006: 186). Paid and unpaid care work together form the care economy (ILO 2018).

The following diagram by Diane Elson (2000) demonstrates how the domestic sector underpins the private, public and NGO sector. It is the domestic sector that produces labour power required in all the sectors, however activities performed in the domestic sector are not recognised as a part of the formal economy or in the GDP. Therefore, the current economy is just the tip of the ice-berg which is supported by a large unseen domestic sector (Kabeer 2003). In the below diagram, we see supply of goods and services from the private sector to the public sector, NGO sector and the for profit NGO sector. Private sector is comprised of formal and informal sector. Informal work in the private sector does not provide social security benefits unlike its formal sector counterpart. Infact, the

¹⁰ A portion of this paragraph is based on my essay for the Poverty, Gender and Social Protection class in Term 2.

formal sector in private sector sub-contracts work to the informal sector, but output of the informal sector is undercounted in calculation of macro-economic indicators like the GNP. The domestic sector supplies labour to the private sector (paid basis), public sector (paid basis) and NGO (paid and unpaid basis) sector. The public sector offers aid employment and high social security benefits. It is financed via taxation of individuals and businesses. The output of the formal sector in the public sector, private sector and NGO sector is included in the GNP. The NGO sector engages in social provisioning in place of the public sector and provides advocacy for changes in public policies. Its income source is private and public sector. Unpaid care work is performed in the domestic sector for family, friends and on a volunteering basis.

Figure 1: Revisioning the Economy Through a Woman's Eyes

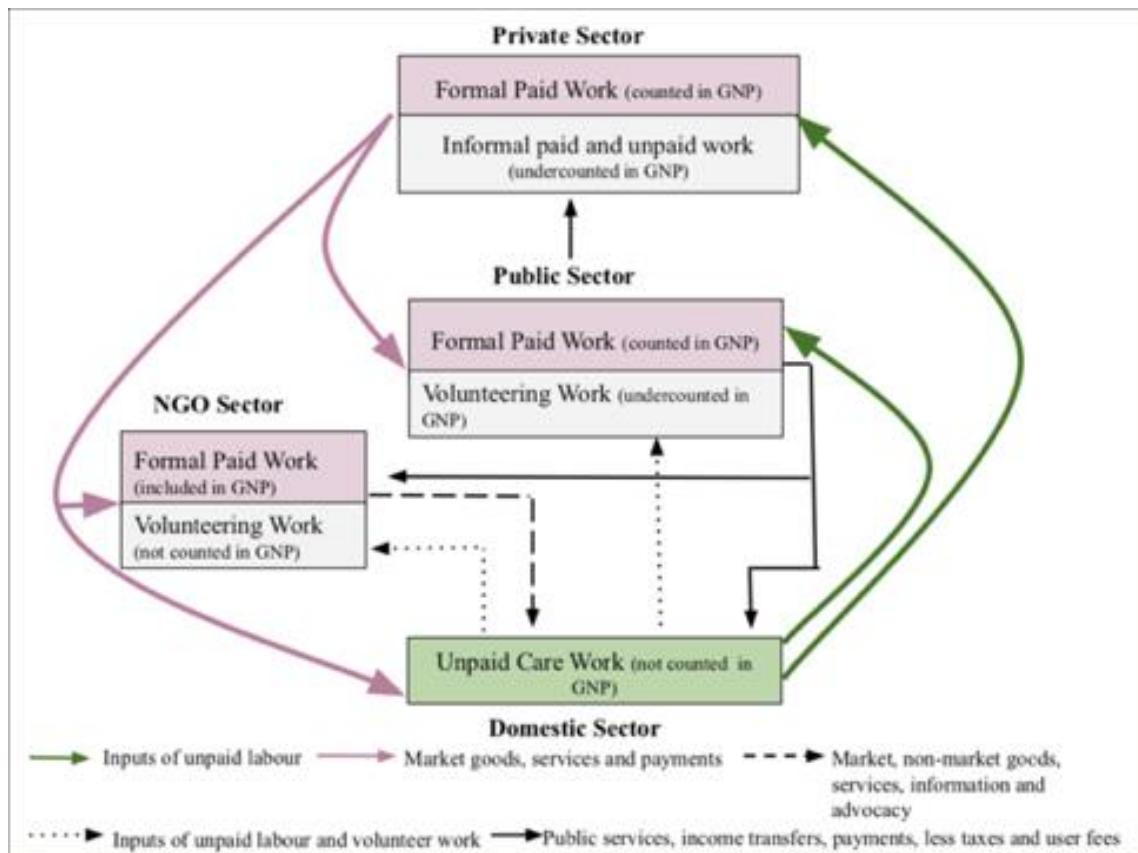


Source: Elson (2000: 26)

For the purpose of this study, and to situate the AWWs in this diagram of the economy, I would like to add another sector called the volunteering sector which is attached to the formal public sector and not just as a separate sector in the diagram. This refers specifically to the use of voluntary work in government programs. In this study the focus is on female *volunteers*, the AWWs. Apart from AWWs, female volunteers such as Mid-Day Meal Workers and ASHAs also work in welfare programmes in India. These volunteers are paid an honorarium or given incentives but are not entitled to social security benefits. They are in charge of on-ground implementation of health and education related welfare

schemes formulated by the public sector. Since they are paid an honorarium, the value of their work is underestimated and thus undercounted in the GNP. Other than India, cash transfer programmes in Latin America too rely on the voluntary labour of women. Based on the principle of ‘co-responsibility’, the welfare programmes require communities ‘take an active part in their development’ and to contribute labour to community development initiatives (Molyneux 2006: 434). The idea is to move away from handouts or paternalistic schemes that characterised previous welfare programmes. The key presupposition of these programmes is that ‘poor people do not invest in the development of human capabilities of their children, which traps them in an inter-generational cycle of poverty’ (Molyneux 2006: 433). In principle, the programmes require the community to contribute, but the design of the programmes emphasise on participation of mothers exclusively. In return for a sum of money, the mothers are required to take their children to schools, health check-ups, attend workshops which added to their burden of work (Molyneux 2006). Clearly, voluntary labour is becoming increasingly visible in the economy. Therefore, to accommodate the volunteering sector that functions parallel to the formal public sector, I am extending the diagram.

Figure 2: Revisioning the Indian Economy Through a Woman's Eyes



Source: Author's Own Based on Elson (2000: 26)

Care work is perceived to be an extension of women's role as primary care-givers. Consequently, it is considered unskilled work and therefore is undervalued in the market,

irrespective of who (man or woman) performs the work. This is called the care pay penalty (ILO 2018). United Nations System of National Accounts reasoned that since unpaid care work is performed in relative isolation, away from the markets and it is challenging to quantify it monetary terms, it is not counted amongst other financial data that is used to calculate the GDP or any other macro-economic indicator (ILO 2018: 47). Given that unpaid care work has zero economic value attached, it becomes invisible. There are two other reasons also for the under-valuation and de-commodification of care work. First, it was assumed that family will provide social protection to the woman- known as gendered familialism (Palriwala and Neetha 2011). This contributed to women becoming dependents on the male bread-winner (Lewis 1997). Second, after World War II, there was a drastic increase in the remuneration of men. There, women chose to quit paid work given that the salary of the man was enough to provide for the family. This phenomenon is called the male-breadwinner bias (Esping-Anderson 2009; Lewis 1997).¹¹

Unpaid care work rose into prominence in policy discourse as a consequence of feminist critique of structural adjustment policies (SAP) of the World Bank. SAPs which demanded cutbacks in public expenditure, unwittingly increased women's labour (Elson 1987). Diane Elson (1987: 4) points out that women's labour was assumed to be 'elastic and able to stretch to make up for shortfalls in other resources available for production and maintenance of human resources. As women became provisioners of the last resort, it depleted their energy levels.'

In recent times, participation of women in the labour market has increased drastically. Thus gender divisions in paid work have decreased though there is still gender stereotyping in jobs and differences in pay. However, unpaid care work is performed predominantly by women even now, resulting in feminisation of care work (Lewis 1997:162). This adversely impacts the ability of women to participate in the labour market. It limits the number of hours women can devote to paid work. Women then choose jobs where they are not required to work full-time, such as in the informal economy or in self-employment. In order to fulfil their unpaid care responsibilities, women compromise on their level of income, resulting in a '*job quality penalty*' (ILO 2018: xxxiv). Similarly, women with young children are less likely to participate in the labour market. Thus, young mothers incur a '*motherhood employment penalty*' (ILO 2018: xxxiii). On the other hand, women who perform both unpaid care work and paid work experience a 'double shift' or a 'feeling of being rushed' through the day (Folbre 2006: 184-185). It can lead to time poverty, where women don't have time available for rest or recreational activities (ILO 2018: 53). Elson (1987) posits that an increase in the unpaid work of women can lead to depletion of their energy levels and adversely affects their health.

¹¹ This paragraph is based on my essay for Poverty, Gender and Social Protection Class for Term 2.

In this study I will explore how AWW&Hs handle both paid and unpaid care work.

2.2 Decent Work Deficit

To assess the nature of working conditions and quality of paid care work done by AWWs the concept of decent work is relevant. The International Labour Organization (2006) conceptualizes decent work as “work that is productive and delivers a fair income; provides security in the workplace and social protection for families; and offers better prospects for personal development and social integration, freedom to express concerns, opportunities to organize and participate in decision-making, and equal opportunity and treatment for all women and men” (ILO 2018). It is a multidimensional, rights-based approach that includes working conditions income, insurance, pension, fringe benefits, occupational status and autonomy, opportunities for learning social recognition and worker satisfaction as key elements of quality work (Monteith and Giedbert 2017). This approach is applicable for paid work.

The concept has been developed further to apply specifically to paid care work. ILO (2018) in its report on *Care Work and Care Jobs For the Future of Decent Work* recently formulated a 5R approach a steps to achieve decent work for care workers, paid and unpaid. To achieve decent work for paid care workers, it suggests rewarding them ‘decent terms of employment, equal pay for equal value, a safe, representation and the right to collective bargaining’ (ILO 2018: 289). It uses Diane Elson’s 3R approach to ensure decent work for unpaid carers. According to the 3Rs approach, to bring about decent work for unpaid care workers, unpaid care work should be recognised, reduced and redistributed (Elson 2017).

‘Recognizing unpaid care and domestic work means understanding how this work underpins all economies and valuing it accordingly’ (Elson 2017: 54). Reducing refers to reducing the burden of unpaid care work on unpaid carers. Redistributing care work refers to participation of men in performance of unpaid care work thus changing the gendered division of unpaid work. Similarly, it includes increased role of the state in provision of social infrastructure such that unpaid care work is redistributed from the household to the state (ibid). For this, ILO (2018) recommends undertaking time use surveys and making macro-economic policies sensitive to unpaid care work. It recommends investment in care services and infrastructure (such as creches, schools, hospitals, water supply, drinking water and sanitation, and public transport), gender sensitive social protection systems and publicly funded leave policies, family friendly working arrangements, reintegration of unpaid carers in the labour market and promoting gender equality at the workplace and household.

2.3 Agency

The definition of agency has evolved and used in feminist theory, political economy, sociology in various contexts. For the purpose of this study, I use the two definitions of agency adopted in feminist scholarship. Elise Klein (2016) uses a cognitive dimension of agency. In her study of participation of women in informal markets in Mali, she observes that women have an internal motivation and self-belief that helps them in overcoming financial setbacks. The internal motivation and self-belief becomes a source of agency for them. Naila Kabeer (2008: 438) builds on this concept of agency and calls it 'sense of agency' that allows an individual or a group to communicate clear and concisely the needs and demands in the private and in the public. She goes on to say that there are multiple types of agency. Bargaining, negotiating, subverting and resisting the state of affairs as they are, is also agency. I draw on Kabeer's conceptualisation of agency, a consciousness and ability to bargain and negotiate individually and collectively to show the resistance of AWWs to the state and division of labour between the two sexes.

Feminist scholars have long championed the act of 'speaking up' as a token of agency (Parpart 2010). Women who do not or cannot challenge the status quo, are perceived to be disempowered. However, Parpart (2010: 1) sees silence as a more subtle form of agency. She argues that silence can be employed as a strategy to survive in a difficult situation. Bina Agarwal (1997) while developing intra-household bargaining model, speaks of agency along the same lines as Parpart. She challenges the notion that lack of resistance by family members to 'division of roles, responsibilities and resources' is absence of agency, as claimed by Sen (Agarwal 1997: 3). She argues that in such circumstances, the absence of resistance can be interpreted as a long term strategy for survival, where family members have more to benefit in accepting the status quo than challenging them. I have likened the lack of bargaining power but ability to perceive long terms interests, and consequent acceptance of status quo or social norms, as agency. In this study I have explored different forms of agency expressed by AWWs. I will use this understanding of agency to illuminate the stance of AWWs on gendered division of labour in the household.

Chapter 3 Caring in the Public Realm: Paid Care Work

This chapter presents the paid care work of AWWs. I show the various ways in which AWWs suffer a decent work deficit as a consequence of their working conditions, discrepancies in the valuing of their work in different states of India, excessive workload, inadequate funding given for miscellaneous expenses, lack of equipment and learning material, shortage of manpower, use of surveillance and the paltry honorarium and social security benefits. I conclude this chapter on paid work with the argument of AWWs being overworked, underpaid and not recognised for their efforts. I support this claim with findings from other studies and in relation to parameters of decent work for care workers set out by ILO (2018).

AWWs and AWHs are the two personnel that manage the AWC. The lower limit of the age of becoming an AWW/AWH is 18. The maximum age at one can become an AWW/AWH is 35. The retirement age for AWW&Hs is 65. Anganwadi Helpers assist the Anganwadi Worker. Women who have not graduated from the 10th grade are eligible to become AWHs. The selection process for AWH consists of an interview and document verification post which they get a training of 15 days. In this training, women are given basic literacy skills. They have to assist the AWW in conducting survey annually. Their working hours are from 10am to 1pm. AWHs received Rs.3500/44 Euros per month. Half of the AWHs also did additional jobs such as cooks, teachers, cleaners, NGO support staff or worked in the family business.

AWWs are required to have completed 10th grade to be eligible for the position. The selection process consists of a written examination, interview and document verification. The decent work deficit of AWWs begins from the time of selection itself. Discussions with AWWs revealed incidences of corruption in the selection procedures for AWWs and Supervisors. They said that people have payed hefty sums upto Rs.7 lakh/ 8750 Euros or used social networks to become AWWs or Supervisors. After being selected, AWWs are given a training of one month to capacitate them with the required skills.

Each AWW&H in the study was in-charge of a population size ranging from 600 to 1500. The AWW&H have to conduct a survey of their population in the month of April on an annual basis to ascertain the number of children between 0-6 years of age, pregnant and lactating women and adolescent girls. Approximately, AWW&Hs had 40 children in the age of 0-6, 50 adolescent girls, and 20 pregnant and lactating mothers in their jurisdiction.

3.1 ‘An AWW must keep sugar in her mouth and ice on her head’

This quote made by Swapna (interview 2019) reflects the kind of attitudes the AWW has to cultivate to establish the centre and conduct her work. If the locality does not have an AWC, the appointed AWW has to search for a space to house the AWC. Some of the AWWs I interviewed had set up AWCs from the ground up as they had worked in the AWC as ICDS was taking form in the city. Majority of the AWWs I met said this was one the most challenging part of their work. They have to exert a lot of time, effort and energy in securing a space. They have to negotiate with and often appeal to parents of children, local leaders, administrative officials and politicians such as Corporators to be secure a space, be able hold on to it and maintain it. Sangeeta narrates

“Spaces for AWCs is a big problem. For 7-8 years, I conducted the AW in a house. But then, the owner got married. To get another space, I have visited the Pune Municipal Corporation and the office on Ghole road. I have spoke to different officials including the Corporator¹². I did this alone. Then I met the head of the local mandal. But because the rent was low, he was not willing to give me the space. But I convinced him that this is afterall for the kids in his locality. We work for the welfare of the children. That’s when I got this space.”

The lack of space for AWCs can be explained by the fact that the GoI began constructing infrastructure for the purpose of AWC only recently, since 2012 (GoI n.d). Moreover, the rent allowance of Rs.750/ 9 Euros per month falls short of the prevailing property tariff. AWWs reveal that owners prefer having tenants who can pay a higher amount. At times there have also been delays on the part of the government in payment of the rent allowance. On such occasions, AWWs paid rent with their own money. The lack of state-funded physical infrastructure and meagre rent led AWWs to base the AWC in community halls, premises of temples, their own homes, rented rooms in homes of families or in open spaces where they were vulnerable to rains and heat of the sun. The daily upkeep and maintenance of the physical infrastructure is also a concern. Some of the AWWs have spent their own money on painting of the premises of the AWC or on purchases of locks, fans, brooms and carpets for the AWC.

Some AWWs, even after securing a community hall for the purpose of the AWC, were told to evacuate it by local mandals¹³. Some had to endure hardships as they didn’t have exclusive access to the space. Local people used the community hall as a storeroom for food grains or any extra equipment in the house, or as a place to drink alcohol. Some AWWs have had to pick up alcohol bottles from AWCs. They also have to endure theft

¹² A Corporator is an elected representative of persons in urban areas. They represent a specific area and its issues in the Municipal Corporation.

¹³ A mandal is a youth based organisation.

of the belongings of the AWC. They do not always have the option of confronting trouble makers. Swapna narrates,

“If I confronted the people who created the mess, they would bully me. We once got a model of a woman as an exhibit of a healthy woman. She had a blouse and skirt on. People around would remove the blouse/skirt. We have witnessed strange behaviour. Our Supervisor says that an AWW must keep sugar in her mouth and ice on her head. We were told this idiom in the training.”

Most of the centres, irrespective of where they were housed, did not have facilities such as drinking water and sanitation. Children are sent back home to use the toilet or go behind trees and cars if they need to use the toilet. Some AWWs use the neighbour’s toilet, while majority wait till they go home to use the restroom or use the public restroom, notwithstanding its lack of hygiene, because they have no choice.

3.2 ‘Her duties were too large to be performed single-handedly’

AWW &Hs have to engage in multiple tasks as noted by the Planning Commission already at the start of the ICDS program in 1982. Before the AWC is opened, the AWW&H have to sign the muster¹⁴. The AWC operates from 10 am to 1pm. The AWH goes house to house to call the children to the AWC. Then she brings a pot of drinking water for the children from the neighbours or the public tap. Once the children arrive, AWWs conduct activities for the children as given in the timetable: 5 mins for morning prayers and greetings, 20 minutes warm up, 20 mins drawing, 20 minutes alphabets etc as given in the time table. About 10-15 children attend the AWC. To engage the children, the AWW are trained in preparing toys out of recyclable material, stones, leaves, seeds by the GoI. To facilitate AWWs in their role as educators and child carers, ICDS also provides them pre-school education kits, medicine kits, flexi fund of Rs. Rs.1000 (12.5 Euros) for miscellaneous expenses. But many states have not utilised the funds available under these components (Ministry of Women and Child Development 2011). Most of the AWWs I met did not get toys or learning material from the government. Some women bring old toys of their children and grandchildren or asked parents in the community to donate old toys. Some of the AWWs toys and other learning material from CSOs. A few others collect leaves and stones of the road as learning material for the AWC, as suggested to them in the training programme. Many AWWs purchase toys, story books and stationery for the children using their own funds.

The children have to be given lunch or supplementary at noon. The food is supplied by government determined SHGs to the AWC. If the food is delivered prior to the opening

¹⁴ Muster is a register that maintains the attendance of AWW&Hs. In a group of 25 AWWs, one AWW is in charge of keeping it.

of the AWC, the AWW has to request the neighbours to pick it up. The AWH picks up the food from the neighbour and serves it to children. She also weighs the food to keep a check on the quantity of food and tastes it to see if there are any irregularities, before serving the food to the children. The AWH then washes the plate, spoons and other utensils at the neighbours house or at the public tap or in the bathroom of the AWC (if available). Many AWWs had not been given spoons, plates and glasses by the government. So they request parents of the children to send empty tiffins and water bottles in which the food can be served. She arranges a bucket of water for the children to wash their hands. The GoI has recently given all AWWs a smartphone as a part of the NNM. On the smartphone, there is an app installed called ICDS-CAS on which the AWWs have to update all the information about the growth statistics of children, vaccination reports of women and children, the attendance of children etc. As of now, the government has instructed the AWWs to maintain the registers (11 of them) along with the app for 6 months, until the app is completely brought into use. So they perform the same work twice. As the children eat, the AWW has to click a picture of the children, AWH and herself on the mobile and send it to the government via the app. This has to be done daily.

Between 1pm to 3pm, AWWs have to keep a track of the weight, height and nutrition status of children between 0-6 years of age, vaccinations and health checkups of pregnant and lactating women. To do that, AWWs weigh all the children under age of 6, make 2-5 house visits to pregnant and lactating mothers and the mobile-app registers with the appropriate information. However, most of the AWWs I met said that the government did not provide them weighing scales and scales to measure height and that they purchased the weighing scales themselves. Those of whom who received the weighing scales, said that they were old and had become defunct over the years. Vaishali, one the of AWWs, reports '*I was not given a scale to measure heights of children. So I bought a long scale myself, and drew one on the wall*'.

3.3 Workload: Additional tasks

AWWs have been given a yearly and day-to-day timetable according to which they have to conduct programmes. They, along with local government hospital organise monthly vaccination programmes for pregnant women and children between 0-3 years of age. They also facilitate vaccinations of diseases that emerge such as Ribola. They act as intermediaries between government departments, hospitals and the community to ensure smooth running of health check-ups. They have to keep contact details of local rickshaw drivers in case a pregnant woman requires urgent help. They conduct games, activities as well as counselling sessions on menstrual hygiene, puberty, life skills for adolescent girls. As per the National Nutrition Mission, AWWs have to conducted one or two events every month wherein they disseminate information about government programmes that mothers and children can take benefit of and to counsel mothers as well as other family members on nutrition and child-care practices. Accordingly, AWWs organize skits, dramas,

culinary competitions to send messages on nutrition, sanitation and hygiene. They have to submit a one page report to the Supervisor after each event. A sum of Rs.250/ 3 Euros is allocated to every AWW for each event organised under NNM. Discussions with AWWs revealed that this sum is grossly inadequate for they incur expenses on gifts to children and mothers, snacks, decorations. Besides, AWWs have to print pictures of the event and submit them along with the report the Supervisor. To make up for the inadequate allowance, AWWs spend their own money.

During house visits, the AWWs play out videos relevant to the needs of mother or child and update information about vaccinations, health appointments and other indicators of health of the mother and children (0-3 years) on the mobile app. They co-ordinate between state officials and the community to distribute the Take Home Ration(THR) every two months which is among the beneficiaries. In the beginning of the THR programme, AWWs conducted an event to showcase food items that can be made using the THR. AWWs have to write Monthly Progress Report (MPR) at the end of each month which is to be submitted to the Supervisor. The Supervisor, who overlooks the work of 25 AWWs and 25 AWHs, discusses this report in a meeting of AWWs at the end of every month.

They themselves have to attend training programmes and workshops on how to reach out to the community, how to make toys using recyclable material and child caring practice organised by the Supervisor and CDPO. Every two years, a refresher training programme is conducted for the AWWs. Currently, AWWs are regularly being trained in 21 modules as per the NNM. Expenses incurred by the AWWs in traveling for the trainings are borne by the AWWs themselves. Officially, they are supposed to be reimbursed for those expenses, AWWs did not receive the reimbursements. Some of the AWWs also said that the food given to the AWWs at the time of training would be stale and the training room would be dirty. They expressed frustration over this sub-standard treatment and lack of appreciation of their work .

Pressure of work due to vacancies as some of the AWWs did not have a helper. In the absence of the helper, the AWW performed her own duties as well as that of her own. Despite performing the responsibilities of both, the AWW did not receive additional benefits or a pay raise. Two of the AWHs had been working in the capacity of AWWs despite not being formally promoted. These women were assured by state officials that they would receive the commensurate pay however at the time of the study, they had not received the benefits.

The enormous amount of work allocated to AWWs was noticed by the Committee on Empowerment of Women set up by the GoI. The Committee (2011:34) in their report on Working Conditions of Anganwadi workers, remarked about the workload of AWWs 'it is humanely impossible to perform the expected jobs within the stipulated time of 4-5

hours a day'. As mentioned above not long after the inception of ICDS, the Planning Commission of India (1982) had observed that the workload of AWWs was far too large for one person. Delays in filling the vacancies of AWHs become additions to their duties. Therefore, excessive work becomes another aspect of their decent work deficit.

3.4 Watch of the Big Brother: Surveillance and control

Many AWWs resented the surprise visits by CDPOs, Supervisors and other authorities where they had to account for minute things. The level of surveillance was such that AWWs would give even me, a student researcher, a detailed justification of their whereabouts and intentions if they were not at the centre at the time when I reached or if they were interacting with someone in a particular way. Field observations reveal that seniors such as the CDPO hold AWWs accountable for not wearing uniforms, the number of children attending the AWC, the allocation of the Take Home Ration, recording of data in the registers and anything else pertaining to the functioning of the AWC. AWWs expressed outrage with the GPS tracking that the mobile and ICDS-CAS has brought in their lives, given the underpaid nature of their work. The mobile application ICDS-CAS tracks their location during working hours in the day. So AWWs cannot leave the AWC before 3 and neither can they be late to the AWC. One AWW expressed frustration with this kind of surveillance. She says,

“Today, government servants get paid Rs.1-1.5 lakh/ 13000 Euros per month. They are not disciplined as much as we are. They are not tracked. But we are.”

Clearly, surveillance and control is a common phenomenon for AWWs. I argue that this kind of excessive scrutiny of the activities of the AWWs is demeaning. It reinforces their lower status in the hierarchy of the ICDS functionaries. A safe and stimulating working environment is one the prerequisites set by ILO to achieve decent work for care workers. This kind of surveillance was also noted by Gupta in his study of AWWs in the state of Uttar Pradesh who observed that AWWs encounter ‘a level of monitoring that exceeded even that exerted on regular employees by the state’ (Gupta 2001:135).

3.5 Benefits: ‘We do a lot of work. But we do not reap the fruits of it’

Medha (interview 2019) expresses above the fact that the amount of benefits that AWWs are entitled to are not commensurate with the number of responsibilities. AWWs who had completed 10 years of service received Rs.7000 (87.5 Euros) per month. AWWs who had completed less than 10 years of service receive Rs.6800 (85 Euros) per month. Other than honorarium, AWWs are entitled to 15 days of leave in the month of May, 16 days of casual leave, holiday during selected festivals, a maternity leave of 180 days and a life insurance. Children of AWWs and AWHs studying in 9th-12th grade are eligible to a scholarship of Rs.300/ 3.5 Euros per quarter. AWWs and AWWs in Maharashtra are also

entitled of Rs.1000/ 25 Euros during the festival of Diwali, as declared by the government of Maharashtra in 2018.

There are many irregularities in the receipt of benefits to AWWs. They had not been paid for the months of June, July and August 2019. Nearly all of the AWW&Hs whose children were eligible for the scholarship did not benefit from it despite applying for it. AWWs are aware of the life insurance cover and being made of all AWWs, but are not fully aware of its benefits, status and coverage of the insurance. They told me that their insurance was discussed only once by their seniors, after which it was not mentioned again. The only monetary benefit received by AWW&Hs is the *bhaubeej*¹⁵ in the form of Rs.1000 (12.5 Euros), which also they received only after collective agitation. AWWs received the paid maternity leave, however, the duration (40 days, 3 months, 6 months) of the maternity leave depended on regulations that prevailed at that particular point of time. This year AWWs underwent training programme of 15 days for using the mobile application ICDS-CAS. Despite promising that AWWs who are supposed to be on leave but have attended the training programme would be compensated for the loss of leave, AWWs did not receive the compensatory holiday.

Clearly, the benefits that AWWs receive are not in tandem to their workload. Most of these women had been working in the program for a long time. The oldest serving AWW in the study had worked for 41 years. She would be retiring in another 3 years, with nothing to fall back on.

3.6 Budgetary allocations for AWWs: Same work for unequal value

The state and central government together contribute towards the honorarium of AWWs. The central government contributes a fixed sum (Rs.3000/37.5 Euros to AWWs and Rs.1500/ 18.75 Euros to AWHs) whereas states have the autonomy to decide the amount that they will contribute to the honorarium as well as other benefits (Ministry of Women and Child Development 2019). The state of Maharashtra contributes Rs.4000/ 50 Euros to the honorarium of AWWs and Rs.1500/18.75 Euros to the honorarium of AWHs.

Data reveals large differentials in the amount of money contributed by each state to the honorarium. The state of Karnataka contributes Rs.4000/50 Euros to the honorarium of AWWs and Rs.2500/ 31 Euros to the honorarium of AWHs. Apart from honorarium, Karnataka also provides AWW&Hs several benefits such as a death relieve fund of Rs.50,000/625 Euros, medical reimbursement of Rs.50,000/625 Euros, a relief fund of

¹⁵ *Bhaubeej* refers to the gift given by brothers to sisters during the festival of Diwali (in India). In 2017, a strike of 26 days by AWWs in Maharashtra compelled the government of Maharashtra to give them *bhaubeej* in the form of an allowance of Rs.1000 (12.5 Euros) during the festival of Diwali (Waghmode 2018).

Rs.20,000/250 Euros in case of medical issues (Government of Karnataka n.d). Other states Tamil Nadu give AWWs opportunities for career advancement, along with an honorarium (Government of Tamil Nadu n.d). AWWs in the study were aware of the difference in benefits provided by each state and called this system unfair. AWW&Hs across different states in India perform the same functions, but receive varying remuneration. Clearly, the autonomy gives to states to provide honorarium and extra benefits over and what the central government provides has made AWW&Hs vulnerable. It in contravention with the ILO's standards of 'equal pay for equal value for all care workers' (ILO 2018: 289), resulting in decent work deficit for AWWs.

3.7 Multiple livelihoods: Second paid work

To keep their heads afloat, almost half of the AWWs in the study have taken up a second job. Sreerekha (2017: 127)) in her study of AWWs too notes that they engage in other forms of paid work such as tailoring or adult education. AWWs in Pune sell cosmetic products, insurance, took tuitions for children, mentored adolescent girls, tailored clothes, worked as community health workers in NGOs and helped in family business. Some of those who were not engaged in another job, wished to work elsewhere as they could not afford all expenditures with their meager salary. But they could not do so because the domestic chores for the household and their work in the AWC would take up all their time.

The scant payment brought greater insecurity in the lives of divorced, widowed or unmarried women. Marriage in the cultural context of India is a way to secure the financial well-being of women. It is through marriage that most women acquire a permanent home for themselves as well as homes. Except for one, all of the women who did not have a spouse lived in the homes of their brother or mother. But due to patrilocal norms, even if the daughter is permitted to live in her maternal home, it is the son who inherits the house. She lives in the maternal home on the sympathy of her family or due to a sense of obligation the family feels toward the daughter or sister. This means that the daughter holds a subordinate position in the household and has to live with the uncertainty about her future. Herein, it becomes all the more important for the woman be financially secure. As for the widowed woman who had children, she lived independently after the death of her husband. Her husband's family distances themselves from her after the death of her husband. To support herself and her children, she worked three jobs; she worked as an AWW, as a mentor to adolescent girls and worked as an agent of insurance schemes. She started working for the insurance company within 3 months of her husband's death as there was no one else who could provide for them. She (name: Usha) remarked '*The payment of the AWC was inadequate to run a household.*' When I asked her how did you get by after the death of your husband, she tearfully recalled to that there were days when she and her children slept on an empty stomach.

3.8 Conclusion of chapter 3

AWWs in other states such as Delhi, Haryana and Tamil Nadu suffer similar working conditions. Apart from their regular duties as described above, the AWWs in Delhi, are given extra work, over and above their responsibilities as per ICDS, such as conducting census, performing an animal survey (counting dogs, cows, goats) or election duties. They too suffer from the lack of physical infrastructure and low rent allowance (Sreerekha 2017). AWWs in Tamil Nadu and Haryana report incidences of harassment, corruption by government officials while trying to access funds required to run the centre (Palriwala and Neetha 2009). Delay in payment of honorarium and reimbursement of travel expenses were some of the other problems they faced (ibid).

The GoI, in the 36 years since ICDS had been implemented, made 7 revisions to the honorarium of AWWs and yet the honorarium of the women remains low. This was noted by a Committee on Empowerment of Women (2011) set up by the GoI. The Committee (2011:34) in their report on *Working Conditions of Anganwadiworkers*, remarked about the work excessive workload of AWWs.

Despite the designation of a social worker to the AWWs, the women worked as much as for themselves as they do for the welfare of the people. They sought employment out of necessity. This is especially true for women whose husbands worked in the informal sector and were not lucratively employed. Women whose husbands worked for the government or had a moderately paying job, saw their income as supplementary, but still necessary. They were all working to make ends meet.

Evidently, AWWs suffer decent work deficit in their everyday lives and in their access to a decent work salary and social security benefits. The lack of proper physical infrastructure creates a difficult working environment and creates drudgery.

The AWWs subsidize work by spending their own money on learning material, toys, photos and equipment such as weighing scales as well as on traveling to training programmes for which they are not reimbursed. They spend money on upkeep of the AWC (eg. procuring locks, keys, broom, painting of the premises) for which the state does not compensate them. Kapoor et al. (2016) also reveal that AWWs spend own money for activities in the AWC. This under-funding of learning material, equipment and overhead expenses results in depletion of the finance resources of the AWWs. They are actually subsidising ICDS as the government is not providing the essentials and neither is it reimbursing the AWWs.

The work that AWWs perform requires skills. They network and negotiate with community members, and employ creativity and ingenuity when preparing toys and games for children within a limited budget. They invest time, energy and effort in securing for a

space for the AWC is not taken into account by the government. It takes skill, commitment and resourcefulness in negotiating with various stakeholders, a fact that the state does not acknowledge. They have adapted to the use of new technology such as smartphones and mobile apps indicates that the women possess skill. They are therefore performing skilled work, which is not reflected in their remuneration. They even invest time exceeding their working hours when securing a space or during training programmes. The undervaluation of their work results in meagre pay and in turn subsidizes ICDS as the full cost of its functionaries is not taken into account. Besides, in light of their status of volunteers, this workload is not valid. Therefore, the AWWs being short-changed as they are given a meagre pay for the amount of work they do. Decent terms of employment and working conditions, equal pay for equal value which are the indicators for decent work for care workers (ILO: 2018), are clearly being violated.

Chapter 4 Caring in the Private Realm: Unpaid Carework

In this chapter, I will uncover the performance of relational care work (childcare) as well as indirect care activities (cooking, washing, cleaning) by AWW&Hs in the household. First, I explain the participation of other household members such as adult females, husband and children in the unpaid care activities. Second, I illustrate how they incur a penalty as a consequence of motherhood and unpaid care work and how different social locations in terms of age, class, marital status etc affects their time poverty. Fourth, I elaborate on the unpaid care work of AWHs and the effect of their marital status, income on their position in the household. The last section presents the conclusions. Here, I argue that AWW&Hs experience gendered division of unpaid care work. I examine how the absence of state-funded care services, physical infrastructure, their ability to access labour saving devices affects them.

The official working day of the AWW begins at 10, however as a women, her working day begins at 6am when she wakes up. All the AWWs wake up before their husbands and children. The first thing they do in the morning is to draw water (if there is no piped water connection which was in most cases) and heat it so that all the family members can bathe. Then they prepare food for tiffins for their husband and children. If the children are young, the women would get them ready for school. A few women received the help of husbands in childcare. The husband would bathe children, iron school-uniforms, feed them breakfast, drop children to school and help them with homework. This finding departs from Palriwala and Neetha's (2009) study which stated that men or husbands were not involved in childcare nor in indirect care activities.

Women who had children young children (<6) would drop them off at their mother's house before leaving for the AWC, or if the mother-in-law was present in the house, she would look after the child. AWWs who worked within close proximity of their house would take breaks to keep a lookout for their children. A few AWWs brought their children to the AWC with them. These childcare arrangements of AWWs concur with those elaborated by Palriwala and Neetha (2009) in their study on AWWs in Haryana and Tamil Nadu. Some of the AWWs who lived in nuclear families enrolled their children in another AWC where the AWW was known to them. Women who had school-going children would be at home before the children went to school and after they got back. Most AWWs, except for one, did not enlist the help of neighbours to take care of children. Some women who lived in nuclear families or had migrated from rural to urban areas, called their mother, sister or the mother-in-law from the village to help them in looking after the child.

The washing of clothes and utensils is also done in the morning, unless the water supply has been cut off. Otherwise they wash clothes and utensils in the evening when the water supply resumes. Before leaving the house, the AWWs have breakfast. All these things have to be done by 9:30am so that they can reach the AWC at 10am. A few women take the bus to the AWC, some of them are dropped off by their husbands while some have a moped so they drive to work. But majority of the women walk to the AWC as they live close by.

AWWs get back home from work around 3pm. They have lunch and rest for a little while. Women having young children, have to get children to eat lunch and then drop them off to tuitions. After 4pm, they mop and sweep the floor, fold clothes and start making preparations such as buying groceries, sorting vegetables for the evening meal. AWWs who lived in nuclear families (with husband and children) performed all chores in the household themselves with some assistance from the children and husband. In fact, a significant proportion of women, majority of them living in nuclear households, said that men participated in maintaining the household, sweeping, mopping, washing utensils, buying groceries, cleaning and sorting vegetables. Sarah says,

‘After getting married, my husband helped me in housework. He would kneed the dough, sort vegetables and he helps me even now. He will help me in washing utensils, sweep the floor, garlic sorting. He does the prepping, I do the cooking. We run the house together. He says none of us should be burdened with work’.

But not all women received help from their husbands. Some of them bore the entire load of unpaid care work by themselves. Priyanka says,

‘although my brother-in-law, father-in-law helped in the house, my husband never does. I draw water and heat it in the morning for him. I even have to pour his bath water in the heater.’ In a similar vein, Alka remarks, ‘The attitude of men is such that they let the wife do all the work for as long as she can.’

Once the evening meal is over, clear the eating area and the kitchen. Then, if required, they update records of the AWC if required. Most of them sleep at 12pm. Majority of them slept after their husbands had gone to sleep. Before sleeping, most women said they watch television for half an hour or so.

AWWs whose daughters were older (>14) received help in cooking, washing and mopping from their daughters. The male child is expected to make purchases for the household from the market of perform pooja¹⁶ but he is not expected to contribute to chores

¹⁶ A prayer ritual performed by Hindus.

performed by the daughter is. The same was observed by another study conducted in the four states in North India. Women did not delegate household chores to sons (Oxfam India 2019). Thus there is an intergenerational transfer of the gendered division of labour. AWWs who lived with their extended family (with sister-in-law), said that their household chores are divided amongst all adult females. Another study reports the same, household chores are divided among adult females in the household (Oxfam India: 2019).

4.1 Experiencing the job quality penalty and motherhood employment penalty

This section of the chapter presents the effect of gendered nature of unpaid care work on the employment opportunities AWWs have. I argue that AWWs suffer a job quality penalty and motherhood employment penalty due to feminisation of unpaid care work and absence of affordable childcare services. Another factor emerged in my fieldwork that affected the employment opportunities for women: social norms.

As demonstrated above, unpaid care work in the homes of AWWs is feminised. My conversations with AWWs revealed that men did not organise their working hours around the household chores. So even when husbands participate in the unpaid care activities, they do so as when they get free time. As a result, women were compelled to undertake a form of employment that allowed them to perform reproductive labour at home without any hindrances. AWWs explicitly stated that unpaid care work at home motivated them to undertake part-time employment, even if that meant undertaking underpaid work. Therefore, I argue that the AWWs experience a job quality penalty due to the gendered division of unpaid care work.

Another kind of penalty that AWWs suffer is the motherhood pay penalty. Some of the AWWs I interviewed chose a part-time job after the birth of their children. Most of these women were young (<35). They had educational qualifications and skills that could secure them a better paying job or had worked in full-time jobs prior to the birth of children. They were fully aware of the choices they were making in terms of forgone income to be able to raise their children. A significant proportion of women said that the work of AWC was their first job and they only took this up after their children were old enough to take care of themselves.

I alluded to the inadequacy of state-funded childcare services in the introduction. I mentioned the income-poverty of AWWs in the earlier chapter. The combined effect of the two resulted in AWW&Hs incurring a motherhood employment penalty. A few women also reported that their husbands or father wanted them to work in an environment where the presence of men was the least. That's why they chose to work at the AWC. Therefore we see social norms too constrained the livelihood sources available to women.

4.2 The Dynamics of Paid and Unpaid Care Work : Time Poverty

This section shows the combined effect of paid and unpaid care work on the time poverty of women. I use an intersectional lens to examine the time poverty of AWWs. My interactions with AWWs show that time available for leisure is contingent upon age of the AWW, class, the participation of husband or other adult females in the unpaid care work, presence of children who are in school, college or working and social norms.

It is in their day-to-day living, that women experience a deficit of time to rest, sleep and eat. At the same time they did engage in social activities as in the Indian context, men and women are expected to participate in social activities such as weddings, pilgrimages and celebration of festivals. A majority of the women participated in religious gatherings, weddings, family gatherings and events associated with the AWC.

There were however differences between the women depending on their marital status and in nuclear families. AWWs who did not have childcare responsibilities such as unmarried, divorced or widowed women have the most amount of time to themselves. These women meet friends, socialise with their extended family, watch movies go out for evening walks during leisure time. Similarly AWWs who lived with their daughters-in-law also had a lot of free time. This is because cultural norms in India consider the daughter-in-law as the primary care-giver. This means that if there is another female present in the house, such as the mother-in-law or a daughter of the mother-in-law, the daughter-in-law is still expected perform majority of the household chores. For instance, in the case of another AWW, Priyanka, who is the only daughter-in-law in the household and lives with her mother-in-law, father-in-law, husband and brother-in-law and a 5 year old son, she did not get time for herself at all. She says, *'sometimes I don't even get the time to wash my hair.'*

Young married women and unmarried women who lived with their brother-in-law, sister-in-law or lived close to their parents, too have greater time for leisure activities as chores were shared responsibilities of all the females in the household. AWWs (married) who were young (<30), and were helped by their husbands in unpaid care activities too had some leisure time. They meet friends, go out for movies or a picnic on weekends. One AWH who lived with the extended family, found it difficult to watch tv or videos in presence of other family members as she was afraid of what her family members might say to her. During my field work, I observed that males that greater access to television (it is major recreational activity most AWWs) than women. Although men and women together could watch tv, priority was given to the male.

Oxfam India (2019) states that nuclearisation of the household has increased pressure of household work on women. I encountered in my study that nuclearization was a result of

migration from rural to urban areas. AWWs who lived in nuclear families, whose children were in school/college/working performed almost all the household chores by themselves as everyone else in the house was busy. Frequently, they experience a feeling of always being in a hurry. This finding was confirmed in another study of 1000 households in four North Indian states. They sought relaxation by listening to a music or watching tv while performing chores that didn't require full concentration. But largely, on an everyday basis, they did not have time to themselves. AWWs who had school/college/working children and worked two jobs experienced a '*feeling of always working.*' They experienced fatigue from time to time. The son of one such AWW, Alka, said to me when I visited their home '*I want my mother to come to the park with me. But she is never available.*' Thus, in relative terms, these women experience the most acute form of time poverty where they don't have time for rest or emotional and familial interactions.

Another factor that affected women's experience of time poverty was altruism. Although AWWs who had daughters expected them to participate in the unpaid care work, they ensure that the education and career of the daughters did not get affected. During field work, I observed that even women who performed two jobs ensured that they themselves completed the most time consuming chores and accepted help from their daughters as and when the schedule of the daughter permits.

4.3 Unpaid Care Work of Anganwadi Helpers

This section presents a brief overview of the unpaid care work of AWHs. The most important observation of this section is the marginalization of the widowed women in the household.

Out of the 10 AWWs, 5 were married with children, 1 was unmarried and 4 were widows. The childcare arrangements of the AWHs were similar to those of the AWWs. Their children were cared for by their mother-in-law, father or because they lived close to the AWC, they could keep a watch on their children even while working. Like the AWWs, the AWHs too experienced the motherhood employment penalty and job quality. They started working only after their children could look after themselves and chose part time jobs as it allowed them to perform household chores.

All the women, wash clothes, utensils, cook food, sweep and mop in the house. Women who had daughters receive help in household chores. But women who had sons did everything by themselves. So there is an intergenerational transfer of gender roles here. Two of the AWHs lived with their extended family. So they received help from other adult females. The conditions of the married AWHs are much like those of the AWWs in these aspects. However, none of the AWHs received help from their husbands. So the gendered nature of unpaid care work is stronger here.

All in all, it is the widowed and the unmarried AWHs who were most vulnerable overall. The unmarried woman lived with her parents and brother's family. She expressed insecurity about her future as her brother was unlikely to support her after the death of their parents. Among the widows, two were living independently, two were supported by their marital family and one lived with her maternal family. The women who were supported by their marital family, did more unpaid care work as compared to other adult females in the household. This can be explained by the fact that the pay of the AWHs is very low and is not considered to be a high enough contribution in their households, for them to receive the same treatment as other adult females, especially, in absence of the husband. There was an unsaid agreement in exchange for the financial and social support to the widow and her children, it was expected that she would shoulder more household responsibilities. Besides, the fact that these AWHs lived in their marital home and not the maternal too seemed to affect their status in the household.

To conclude, as compared to the widowed/unmarried AWHs who had a higher pay and lived in their maternal home, the widowed and unmarried AWHs seemed to living in greater insecurity. The widow who lived independently worked double jobs to make ends meet. She was not supported by her maternal nor marital family. Much like the widowed AWH who lived independently, she had experienced great hardships in life. Despite the insecure life the widowed AWHs led, each of these women was successful in giving their children a college education, a fact that they were proud of.

4.4 Conclusion of chapter 4

I demonstrated in the introduction that the state-funded care services are not available in India. In absence of state-funded care facilities, I showed the diverse care arrangements employed by AWHs, to substitute for their absence. My conversations with AWHs reveal that other adult females in the household, the husband or children help the AWH in performance of relational care work (childcare) as well as indirect care activities (cooking, washing, cleaning. Very few AWHs could afford labour saving devices such as washing machines (3) or employ a domestic worker (2). Findings of Palriwala and Neetha (2009: 38) indicate the same; AWHs could not afford 'market based options of care'. I showed how in-efficient infrastructure such as irregular water supply affects the performance of chores and adds to their workload. I argue that unpaid care work in the homes of AWHs is largely feminised. It is performed by adult females in the household. The gendered nature of this work is also transferred intergenerationally as AWHs themselves allocate responsibilities to their children based on his or her gender. However, men (husbands) are increasingly participating in unpaid care work especially in absence of adult females, such as the mother-in-law and sister-in-law.

To sum up, the gendered division of unpaid care work, social norms (to some extent) resulted in AWHs incurring a job quality penalty, as they undertook a job that is part-

time and underpaid. The presence of young children delayed their participation in the labour market, so the women incurred a motherhood employment penalty. In all, the AWWs incurred a penalty in the form of forgone earnings for the time they were unemployed and the earnings of full-time work. Consequently, in the long term, the lifetime earnings of the women suffer.

The gendered division of unpaid care work, performance of two jobs/class, social norms about duties of a daughter-in-law and altruism has reduced the amount of time AWWs have to rest, sleep and for recreational activities. Meanwhile, help from adult females and husband in unpaid care work reduces time poverty of women.

The above two chapters about paid and unpaid care work demonstrate the paid care work official duties and household responsibilities of AWWs have left them time and income poor though the degree varies according to marital status, age and nature of the family . But has the lack of time and income taken away from them their voice and agency? Not quite. The following chapter presents how AWWs have successfully mobilised collective agency to demand better terms of employment and individual agency to reduce the amount of unpaid care work, and improve their working environment and employment prospects.

Chapter 5 ‘If not a flower, the union manages to give us at least a petal,’ Alka (personal interview)

This statement by Alka is a strong expression of the importance of the union and collective action for AWWs. This chapter presents the collective agency mobilised by AWWs to negotiate their terms of employment with the state. The lives of AWWs are characterised by unionisation. Majority of the increments in their honorarium and other benefits that the state has endowed upon them have been a result of their collective resistance (Sreerekha 2017).

At the national level, the All India Federation of Anganwadi Workers and Helpers (AIFAWH), All India Central Council of Trade Unions, All India Trade Union Congress, Hindu Mazdoor Sabha, India National Trade Union Congress and Bharatiya Mazdoor Sangh lead AWW&Hs in their struggle to become regularised/formal workers (Sindhu 2016; Economic Times 2017). Together, they have led numerous protests and strikes at the national, state as well as local level. Apart from strikes and protests, the unions have engaged in tripartite dialogue with the GoI at the 45th Indian Labour Conference (CITU n.d).

In the 2014, AIFAWH along with All India Agricultural Workers Union collected 40 million signatures and submitted them to the Prime Minister while presenting to him their demands (AIFAWH n.d). The union mobilised social media such as Twitter and Facebook to campaign for their rights. It questioned the BJP’s (current ruling political party) commitment to the promises they made to AWW&Hs regarding increasing their pay which was mentioned in BJP election manifesto. As the Prime Minister celebrated the third year of his party’s rule in the state of Assam, India, 20,000 AWW&Hs in Assam wore black clothing and came out on the street to protest. In the country, the AWW&Hs burned effigies of the PM and his party’s manifesto and declared the day as ‘*dhoka diwas*¹⁷’ (CITU n.d). In response to the unfulfilled promises, they campaigned against the BJP in the 2019 elections (Aifawh CITU 2019). They protested against the cutbacks in the budget of ICDS as well as against the governments efforts to privatise ICDS (Sreerekha 2017). Thus, the women have been able to mobilise themselves even politically. My interviews with union activists reveal that AIFAWH has collaborated with other women workers such as the Mid-Day-Meal workers and ASHAs. They have taken the support of left-leaning political parties such as Communist Party of India to achieve their goals.

In the state of Maharashtra, seven unions of AWWs based in different cities formed an umbrella organization called the ‘Maharashtra Rajya Anganwadi Karmachari Kruti Samiti’ in 2010 (Karangutkar 2018; Sundar 2019) whereas the All India Federation of

¹⁷ Literally translated as betrayal day.

Anganwadi Workers and Helpers (AIFAWH) operates at the state as well as national level. Although there are multiple unions, at the time of strikes and protests all unions come together. In 2018, the Maharashtra government invoked the Maharashtra Essential Services and Maintenance¹⁸ on AWWs to prevent them from going on strike (Firstpost 2019). However, the union leaders successfully collaborated with opposition political parties to stay the implementation of the Act (Malik 2018).

During my fieldwork in Pune, I witnessed a strike by the AWW&Hs as their salary had been delayed for 3 months. AWW&Hs from the neighbouring as well as far off villages had participated in the strike. The unions mobilized AWW&Hs from all over Maharashtra. They organised cars and jeeps so that women from other districts could participate in the strike. As for the women, they came well prepared for the strike. Many of them carried their lunch-boxes along. The union leaders themselves negotiated with the administrative body and placed in front of them their demands. They also negotiated with other stakeholders such as the police who had encircled the women to ensure that the protest do not escalate into riots.

Except for one woman, all AWWs I interviewed were members of the union. They regularly participated in the strikes and protests of the union. Both the union activists and AWWs said that whatever extra benefits the state has awarded AWW&Hs, it is due to the mass agitations that the unions co-ordinated. They appreciate the role of the union in their struggle for regularisation and better pay.

My discussions with AWWs show that the AWWs are adept at articulating themselves. They conveyed to me what makes them happy and what bothers them. They were happy to be working among children and for children. Many proudly narrated the respect they get from the community. They derive happiness knowing that they can improve the life of people. But just as much they enjoy their work, each of them is fully conscious of the importance of the role they play as workers in the welfare scheme and the negligence they face at the hands of the state. As Shilpa pithily said, *'No government official works at the grassroots level the way we do. But still our work is not valued. The state is blind towards our needs'*. Almost all AWWs in the study uninhibitedly expressed a demand for better salary and social security benefits in the interviews. They questioned the state's expectation of the range of responsibilities that AWWs should perform given the amount of honorarium they receive. A union leader (name: Devaki), who is also an AWW said, *'We are fighting for our rights. We are fighting for the money that we have earned through hard work.'* Thus, in the way that AWWs show consciousness, self-worth and voice, the manifest various forms of agency (Gammage et al 2016).

¹⁸ This Act is in reference to provision of essential services such as public transport and hospitals. Any disruption in delivery of these services will affect the routine life of people.

Their understanding of their position of being underpaid workers and sensitivity to teach other's needs helped them in undertaking collective action. Both, in my interviews with the state secretary of CITU and my conversations with AWW&Hs indicated the solidarity among the women.

The repeated strikes and protests have led elected leaders to raise concerns of the AWW&Hs in the parliament (Sreerekha 2017). On two occasions, private members bill was introduced in the *Lok Sabha*¹⁹ in 2009 and 2018. AWW&Hs as well as unions have petitioned High Courts and the Supreme Court to demand a fairer selection procedure, minimum wage, right to contest elections (ibid). AWW&Hs, through collective agency, have been successful in creating a debate about voluntarisation of scheme workers as well as in securing benefits (to some extent) for themselves.

5.1 Individual agency in the private and public sphere

This section presents the mobilisation of individual agency to gain recognition as unpaid carers in the household. It includes agency exercised by AWWs at the workplace to improve their working conditions and to procure supplies necessary for the children.

5.1.1 Agency in the household

To the extent of women recognising their status as unpaid care workers, the women showed consciousness there as well. They were aware of the gendered nature of unpaid care work. But most of them did not challenge this norm openly as they did with their status as underpaid care givers. They seem to have accepted the status quo, albeit reluctantly. For instance, when I asked one of the AWWs, Poonam (27), if family members help in the housework, she said, *'I don't expect them to help'*. I have received similar responses from other AWWs, where I detected resentment and dissatisfaction in their tone as they spoke of their husband's involvement in household chores. I believe that the social norms around household chores constrained the ability of women to contest them. To illustrate the visibility and pervasiveness of social norms in the lives of AWWs, I quote the following statement by one of the AWWs. She told me that her brother-in-law often says to her, *'We got you into our family with so much pomp and ceremony for this purpose only. Household work is your responsibility.'* But she did resist this arrangement covertly. Poonam says, *'When I am upset with something, I don't do any work in the house. Everyone else automatically does their bit then.'* One woman (Aruna, 40) was able to directly bargain with her family members. When her mother-in-law wanted her to do all the household chores, she negotiated with her husband that if she is to continue working outside, he must help. Otherwise, she will give up her job. Thus, there are different forms of agency that women deploy in their private life as they navigate the burden of unpaid care work and paid care work.

¹⁹ Lower House of the Indian Parliament.

5.1.2 Initiatives to improve work and careers

Most of the AWWs told me that they obtained story books, toys, stationery and cupboards required at the AWC using their own money or from community members, parents of children and children in their own families. They mobilised the assistance of neighbours to get drinking water and to make use of their private toilet. They also negotiated and bargained with community leaders to secure a space for the AWC in the given rent allowance. I argue that these efforts of the AWWs to improve the AWC and to ensure the children have access to the required learning material in light of the state's lack of initiative, is also a form of agency. Besides, many AWWs I interviewed were earlier AWHs and did not have the educational qualification to become AWWs. As demonstrated above, the time of AWWs had competing interests. Yet, they successfully pursued education while working as AWHs to become eligible for the position of an AWW. This is also an act of agency.

Chapter 6 Conclusions

Care work is closely related to the concept of social reproduction. Reproductive labour or care work is essential to nurture the future labour force and to maintain those who cannot work. It is essential to maintain life daily and generationally (Elson 2012). In this study, I attempt to explore the interlinkages and dynamics between paid and unpaid care work of AWWs in India and reflect on the recognition of AWWs as paid and unpaid carers. To do this, I engaged the concepts of decent work deficit for care workers, care economy and agency.

I drew on the feminist epistemological standpoint theory to understand the lived experience of AWWs with respect to performing paid and unpaid care work. The lack of systematic government data on AWWs (Palriwala and Neetha 2009) as well as lack of scholarly literature on their role as unpaid carers in the household indicates the need for this kind of research. I adopt qualitative research methods such as in-depth semi-structured interviews and participatory observations to garner information. I use intersectionality as methodological tool to bring out the heterogeneity in experiences of AWWs.

I demonstrate the excessive workload and multiple tasks that AWWs are involved in paid care work and the various ways in which they are not recognised as workers (delay in reimbursements, excessive work, surveillance and meagre benefits) and how they face decent work deficit as paid carers. Their status of volunteers or social workers has therefore reproduced economic insecurity and financial instability in their lives.

In the household the AWWs experienced a gendered division of unpaid care work so they prefer part-time work. Meanwhile, motherhood delays their participation in paid work. This adversely affects the lifetime earnings of AWWs. Their inability to afford labour saving devices such as washing machines, electric geysers adds to their workload. In a lot of cases, the women have experienced time poverty. All in all, measures that could have reduced their workload are not available to them. AWWs are aware of the importance of their work as well as their exploitation. Collectively, they have resisted the state and compelled it to give them better benefits.

At an individual level as unpaid carers, women are conscious of their unequal division of labour in the household. Some of them chose to contest it overtly and some covertly, while some did not. They bore the responsibilities without resistance. In all cases, I would like to argue that the women show agency in the form of bargaining, subverting or even in recognising the fact that resistance is going to damage their position in the long term, hence accepting dominant social norms. This is a form of agency that operates within structures of constraint.

However as this study shows there is still a lot that needs to be done. Non recognition as workers entitled to all labour rights violates the measures for decent work deficit for paid carers set out by ILO (2018). There is a need for greater investment in care services which will in turn result in decent work for paid carers as they work in that environment. The state has to recognise paid care work as a form of work deserving of all status and benefits that other forms of paid work get.

The all women personnel of AWWs indicates feminization of paid care work and reinforcing of gender roles by the state. The state has based the ICDS programme on normative assumptions about women as caretakers of children. The reinforcement of gender roles in development programmes has also been in cash transfer scheme in Latin America (Molyneux 2006). The developmental programmes rely on norms about gender roles and in turn reinforce gender roles to achieve success. Thus there is a gender bias in these programmes. They utilize the labour of women without taking into account women's needs and the resulting cost borne by women.

Unpaid care work is often linked to the altruistic nature of women. The state harnessed this feeling of altruism related to care work among women, to get them to perform paid care work in exchange for a paltry sum (Sreerekha 2017). The state counts on the altruistic and maternalistic nature of women to go out of their way (in context of investing time and money in making toys, securing physical space for the AWC) in making ICDS successful and to subsidise the welfare programme. Thus, we see a feminization of obligation in the public sphere. The AWWs, by performing paid work and unpaid care work are already working harder to sustain the household. Thus, there is a feminization of responsibility/obligation in the household as well (Molyneux 2006).

In relation to unpaid care work in the household the 3R framework of reducing, redistributing and recognizing the unpaid work of women provides a useful template for change. Although I observed redistribution of unpaid care work to some extent, for it to become a norm will take a long time. But development of care related infrastructure such as child-care services and water supply is plausible. This will redistribute care work between the state and family, and reduce in the unpaid work of women.

For future research on this topic, it would be useful to conduct a time use study of Anganwadi Workers to examine the amount of time devoted by the AWWs at the workplace, at home for unpaid care work and to themselves for personal well-being. This time use study should be conducted in both, rural and urban areas of India to examine the differences in paid and unpaid care work of AWWs as well the difference physical infrastructure makes in the lives of women. Another topic for research is agency of AWWs in intrahousehold bargaining. It would be interesting to see if paid work has enhanced the status of AWWs in the household or because they are deemed to be doing work that is perceived to be naturally women's, it is still undervalued.

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