Journal of Gender, Culture and Society

ISSN: 2754-3293 DOI: 10.32996/jgcs

Journal Homepage: www.al-kindipublisher.com/index.php/jgcs



| RESEARCH ARTICLE

Care Work and the Careers of Educated Women: Role of the Care Diamond in India

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ABSTRACT

The data on women's education and labour force participation in India suggests that though the gender gap in education (particularly higher education) has almost disappeared, the gender gap in employment remains significant. The paper links the burden of double responsibility (paid work plus unpaid 'care work') with the low labour force participation rates among the highly educated women in urban India. Based on primary and secondary sources, the paper analyses the lived experiences of women who had to either leave their careers or who continued by managing to balance the two sets of responsibilities. Interrogating the care diamond in India, the essay examines two recent provisions of the government of India for working mothers – an increase in Maternity Leave and the provision of Childcare Leave. It finds that though these provisions seem to be in the right direction as they bring recognition to the care burden of employees, given the prevailing social norms on gender roles, they are insufficient (in their present form) to bring gender parity in the labour market.

KEYWORDS

Care Work, Care Diamond in India, Childcare Leave, Women and Career

ARTICLE INFORMATION

ACCEPTED: 04 August 2023 **PUBLISHED:** 08 August 2023 **DOI:** 10.32996/jgcs.2023.3.2.2

1. Introduction

It's often said that "men are from Mars while women are from Venus", but following the success of the Mars mission, many dubbed India's women scientists the "women from Mars" (Pandey 2016: Ritu Karidhal)

The involvement of women scientists and women administrative staff in India's Mars Mission was celebrated widely in all media. Stories about their personal lives highlighted that most of them were nurturing mothers besides being successful in their jobs and careers. Indeed, the number of women in India participating in diverse fields, including those considered a part of the male bastion till recently, has increased manyfold. Stories such as these inspire young women as well as help create awareness for breaking gender stereotypes.

This paper deals with the impact of care responsibilities on the career trajectories of educated middle class women and interrogates the care diamond in India, particularly the role played by the state policies of leave for maternity and childcare.

Recent data on girls' education in India point out that the gender gap in education is closing, and girls' enrolment (particularly in higher education) is almost at par with that of boys (Indian Express 2021). On the other hand, macro indicators such as Female Labour Force Participation Rates (FLFPR) have been declining in India over the last couple of decades. As per the National Sample Survey Office data, the FLFPR declined from 62 percent in 1983 to 33 percent in 2011 for working-age (15-59) women (Mehrotra and Parida 2017: 363).

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Concern has been expressed about the large gender gap in LFPR. The feminist studies on women's participation in labour force point out that one of the reasons for the low level of FLFPR is that a large number of women's economic activities are not counted in the National Accounts Statistics (Folbre 2018). These activities though necessary for the 'social reproduction' of labour, remain outside the purview of 'economic production' since most of these are performed at home and are unpaid. These are generally termed as the 'Unpaid Care Work'. Care is necessary for reproducing society and for the well-being of its members. The idea of Unpaid Care work is seen by feminists as the backbone of the capitalist and patriarchal division of labour. Capitalism works on the fundamental structural separation between household work and profit-oriented work. The work done in the private sphere is seen as work performed purely out of 'love' bolstering the institution of marriage.

The paper links the burden of double responsibility (paid work plus unpaid 'care work') with the low labour force participation rates among highly educated women in urban India. Though care work is important for the wellbeing of members of society, it has not received the attention and recognition it deserves in the development literature (Chopra and Sweetman 2014). It is only in the last couple of decades that feminist scholars have managed to get it included in the global agenda of sustainable development. Based on primary and secondary sources, the paper analyses the lived experiences of women who had to either leave their careers or continue by managing to balance the two sets of responsibilities. Interrogating the care diamond in India, the essay examines two recent provisions of the government of India for working mothers – an increase in Maternity Leave and the provision of Childcare Leave.

2. Literature Review

Many explanations have been offered by economists and sociologists for the declining FLFPR in India. The majority of the economic studies are based on the macro level estimates of FLFPR and focus more on the demand and supply side factors for the low and declining FLFPR. The demand side factors include the impact of structural adjustment leading to the decreasing participation of women in agriculture due to increasing mechanisation and little increase in demand for low skilled workers in other sectors. The FLFPR in the manufacturing sector shows a cyclical trend, while that for the services sector has been rising. The growth of modern services like IT, tourism, financial and telecom sector has contributed to this growth (Mehrotra and Parida 2017). The sectors contributing the most to the employment of women are those identified with women's 'natural advantage' (Palriwala and Neetha 2009: 21) due to their links with care and ease of combining these with their unpaid care responsibilities – teaching and domestic work in private homes.

The supply-side explanations show that the participation rates for women decline as income increases from a very low level, but the participation rates tend to rise with income only after a certain level of income (U-shaped hypothesis). Since I am interested in understanding the coping strategies and the care diamond applicable to middle-class, urban educated women, I looked at the FLFPR disaggregated by education level.

The Periodic Labour Force Survey (PLFS) Annual Report data (July 2018–June 2019) reveals that the FLFPR disaggregated by education levels declines as education level increases from not literate to higher secondary for both rural and urban women (see Figure 1). However, FLFPR rises sharply for education beyond higher secondary, particularly in the case of diplomas and certificates, as well as postgraduate education.

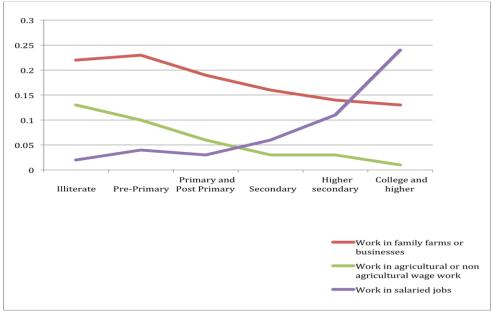
Education level wise Labour Force Participation Rate (LFPR) (in per cent) according to usual status (ps+ss) for females of age 15 years and above Rural -Urban 27.8 literate & upto middle secondary diploma/ post graduate & not literate higher graduate secondary certificate primary above course

Figure 1. Education Level-wise FLFPR.

Source: Srija and Vijay (2021: 180)

A similar picture emerges when we look at the predicted probabilities of a married woman aged 25–59 being employed for different categories of work by education level (figure 2). Participation of women declines in agricultural and non-agricultural wage work as well as work on family farms and businesses but increases sharply for salaried jobs with an increase in education at all levels of education.

Figure 2: Predicted probabilities of a married woman aged 25–59 being employed for each of the three categories of work by education levels.



Source: Chatterjee, Desai and Vanneman (2018: 16).

Worldwide studies of dual-earner couples have indicated that the double burdens of professional and domestic work limit women's career aspirations (Kodagoda 2018). Research in many parts of the world shows that 'the vast majority of care work is done free, at home; and it is widely seen as a female responsibility' (Chopra and Sweetman 2014: 409). This results in 'time poverty' as well as 'exhaustion and ill-health' for most of the women, particularly those who are engaged in paid work outside the home, along with being burdened with unpaid care work (Ibid.: 411).

The literature on the care economy has been growing during the last decade and provides the conceptual framework for this paper. These studies make important contributions to the understanding of various forms of care work and what kind of policy interventions are needed to ameliorate the condition of overworked, poor women (Folbre 2018: 3).

Feminist scholars argue that 'care is a good thing, yet its unequal distribution to women needs to be altered substantially. The goal is for care work to be divided fairly between the sexes and between the household and other social institutions, including the state (Chopra and Sweetman 2014: 410). Feminist researchers and activists have urged for linking care to women's human rights and argue for the 'Recognition, Reduction (of drudgery) and Redistribution' of the care work.

One area of concern remains – the lack of instruments to measure women's unpaid care work. We need to understand the differences between paid and unpaid as well as market and non-market activities. (Folbre 2018: 7) Methods to measure care work have slowly evolved. One of the methods used for measurement is the Time Use Survey (TUS), and despite its limitations, the evidence shows that 'women, especially mothers, devote significantly more time to care work than men do... (and) when mothers enter paid employment, they do not reduce their hours of unpaid work commensurately' (Folbre 2018: 1).

In India, as per the latest available TUS data (TUS 2019 cited in Srija and Vijay 2021: 168), 88.2 percent of urban working women participated in unpaid domestic services, spending 214 minutes in a day on an average per participant and 22.1 percent participated in unpaid caregiving services spending 102 minutes per participant. Urban women who were recorded as outside the labour force spent 343 and 148 minutes per day per participant on unpaid domestic services and unpaid caregiving services, respectively. Research in developing economies shows that poor women in rural areas have to spend a large part of their time fetching water and fuel, besides other responsibilities for direct and indirect care. Policies aimed at women's 'economic empowerment' through international donors' sponsored programmes which do not measure the cost of their double burden result in their depletion instead of empowering them (Chopra and Zembelli 2017).

The majority of the feminist scholarship on care work in developing economies concentrates on the rural and poor communities where insufficient public infrastructure leads to women spending a large amount of time on domestic activities such as fetching water and fuel from a great distance. Drawing on IDRC and GrOW research, Folbre (2018) argues that Investment in social and physical infrastructure, as well as public provisioning of care, is essential for the economic empowerment of women to be meaningful.

The impact of care work in the context of urban and middle and upper middle class Indian women has not received attention in the literature on 'Gender and Development'. The objective of this paper is to find the link between the low participation of educated urban women and the burden of care responsibilities that the gendered social norms require her to bear.

3. Methodology

This paper links the burden of double responsibility (paid work plus the unpaid 'care work') and gendered social norms with the low FLFPR by looking at the macro data as well as individual and household level studies and the author's own observations. Care work includes a variety of paid and unpaid activities ranging from direct care of the children, elderly and the sick to indirect care activities such as cooking, cleaning, provisioning and other domestic chores. It also includes supervisory care responsibilities such as being around when the child or other care recipient is resting or involved in some activities (Chopra and Sweetman 2014, Folbre 2018). The paper reviews the studies which provide evidence on the decision-making and coping strategies (relating to their career and care responsibilities) of educated women in India. An analysis of the lived experiences of women who had to either leave their careers or take long breaks and/or make compromises in their career goals is presented in Section 4. It also points out how women who have continued to pursue their careers have managed to balance the two sets of responsibilities.

Section 5 of the paper interrogates the care diamond in India. It critically examines the two recent initiatives of the government of India for working mothers – an increase in Maternity Leave and the provision of Childcare Leave. This is done based on secondary literature, the author's observations and interviews of two working women who availed child-care leave.

4. Career or Carer: The Dilemma of Educated Women

This section looks at the micro-level evidence relating to the career trajectories of urban middle-class, educated women to see whether unpaid care work plays a major role in their career decisions.

Previous studies show that direct and indirect care work remains the responsibility of the woman whether she is working outside the home for wages/salaries or is involved in home-based production or expenditure-saving activities. Besides the gendered social norms that are present in India as in most other countries, the widespread patrilocal social norms require women in India to live with the parents (and many times siblings) of their husbands. Drawing on the lived experiences of educated women in Nagpur,

Bhagyashree (2021) shows that many women had experienced career disruptions due to the lack of support from their husbands and parents-in-law.

In their new homes, they are at the lowest rung of the family hierarchy and are expected to provide direct and indirect care services to the family. Traditionally, a woman's place was considered to be at home, and it was considered socially degrading for women in the family to work for money outside home. Therefore, most families who are financially not in need are not very supportive of their daughters-in-law's careers. Having internalised the gendered social norms, many girls said they felt guilty when they joined back work after childbirth for leaving their children behind. (Bhagyashree 2021)

Deshpande and Kabeer (2019), based on research in seven (rural and urban) districts of West Bengal, India, find that 'being primarily responsible for domestic chores lowers the probability of "working" after accounting for all the conventional factors' (p. 1).

Many women who continued their jobs and combined their careers with their care responsibilities acknowledged the support that they received from their husbands and family members. "It was not easy to maintain a work-life balance, but I got the support I needed from my family, my husband and my siblings" (Ritu Karidhal, Deputy Operations Director, Mars Orbiter Mission, quoted in Pandey 2016).

In the words of Anuradha TK, the senior most woman scientist at Indian Space Research Center, "My husband and my parents-in-law were always cooperative, so I didn't have to worry much about my children... I owe my success to the arrangements I made" (quoted in Pandy 2016).

Women were seen to make different kinds of arrangements, including taking a break for a year or two after childbirth (sometimes without pay and sometimes by leaving their jobs and starting fresh later). Some others made compromises and sacrificed promotions by refusing transfers and travel for work. Some resigned from their full-time jobs and picked up part-time jobs or self-employment or helped their husbands in managing the family business (Author's observations).

However, many women find that the double burden leaves them with no time for rest and self-care. Nandini Harinath (another woman scientist involved in the Mars Orbiter Mission) recalls that the last few months of the launch of the mission also happened to be the time for her daughter's high school examination, and therefore, "Those few months were very demanding at work and at home. It looked like a race at the time. I'd wake up at 4 am with my daughter to give her company while she studied" (Pandey 2016).

5. The Care Diamond

Care Diamond refers to the role played by the family, state, market and community in the provision of care. The care diamond in India is imbalanced in favour of the family to the exclusion of state and not-for-profit. The market is for those with the ability to pay. Most middle-class families in Delhi where the mother of young children is working depend on hired help, private creches, grandparents (particularly paternal ones in case of joint family structure), other family members or a combination of these.

The non-recognition of care by the Indian state rests on what Palriwala and Neetha (2009) call 'familialism' - the assumption that family and community relationships would provide the security net. Palriwala and Neetha (2009: 24) identify two kinds of measures for working mothers: 'leave regulations which allow an employee to take time off for care obligations and crèche/pre-school facilities at the work-site or paid for by employers'.

Very few employers provide crèches, and there is a lack of availability of good quality crèches provided by the state as well as the not-for-profit sector. The cost of the private crèches of satisfactory quality being very high, few can afford it. Swaminathan, an activist in this field, suggests that 'the government... refuses to acknowledge the great need for day care among women working in diverse occupational situations in the unorganised sectors' (quoted in Palriwal and Neetha 2009: 29).

Maternity Leave is one of the important measures of recognition and provision of support for care work in India. Palriwala and Neetha (2009) note that in maternity leave, three elements of the care diamond, viz. the family, the state and the market, come together. The remaining part of this section analyses two recent provisions – extension of maternity leave and introduction of childcare leave brought in by the Government of India in recent years. These provisions are interrogated based on the feminist literature on the care economy, personal observations and conversations/interviews. I attempt to bring out the positive impact of these measures as well as the questions raised in relation to these.

5.1 Extension of maternity leave to 26 weeks

In 2017, maternity leave was enhanced to 26 weeks by making an amendment to the Maternity Benefits Act 1961. In the case of adoptive parents, maternity leave continues to be for 12 weeks. The extension, therefore, seems to have been made in view of the need for mothers to nurse young infants following the WHO guidelines of exclusive breastfeeding for the first 6 months. 'Childcare has been accepted as a legitimate concern of the state not in terms of the labour of care or as women's rights, but as a matter of child welfare and concerns regarding the nutrition, survival, and well-being of children (Palriwala and Neetha 2009: 24)

The provision has also been extended to the employees of the private sector. Though the extension of leave has benefitted many young working mothers, the extension of maternity leave rather than the provision of parental leave is questioned on the grounds of it reinforcing the traditional social norm where childcare is seen as the responsibility of the mother alone. Law provides for only 15 days of paternal leave for male employees.

It has also been argued that this provision has the potential to have a negative impact of increasing the already present bias against the employment of female candidates among private sector employers. The founder of a successful start-up based in Gurgaon and employing 200 white collar and some highly qualified workers candidly admitted that the financial calculations make him averse to employing young women who may go on 6 months maternity leave within a few years of joining (personal communication). Only a small proportion of the small number of women in factories, plantations, and mines made claims for maternity benefits. Palriwala and Neetha (2009) that this was managed by avoiding hiring women in the reproductive age group or by firing women workers when they married.

5.2 Child Care Leave

Child Care Leave (CCL) was introduced for central government employees in 2010. A total of 730 days of leave is allowed for each of the oldest 2 children up to the age of 18 years (22 years in the case of a disabled child). The measure has helped working mothers balance their double responsibility. However, by offering leave only to female employees, the measure maintains and strengthens the gendered norm of seeing childcare as the responsibility of women alone.

Recently, the provision has been extended to single (bachelor, widowed or divorced) male employees. However, being available only for single males implies that if the mother is present, she is the one who is supposed to provide childcare. In many families, there is a gendered division of labour where the women decide to take on the domestic responsibilities full-time, and the husbands are supposed to take on the role of the breadwinners. In these cases, there will be no need for the government to pay the salary for childcare or in other words, the childcare is subsidised by the individual households.

In order to understand how CCL worked and impacted individuals, I interviewed a senior doctor and nurse working in a hospital in Delhi which is owned and managed by the central government and who had availed of CCL. Both of them said that the provision was very helpful, especially if the child was sick or was having examinations. Both of them had children above 10 years old when the CCL provision came into force, so they availed of the leave mainly for children's education. In the case of Assistant and Associate Professors teaching at colleges in the University of Delhi with whom I interacted, a similar pattern was noted where faculty having older children availed of the CCL at the time of children's Board examinations. However, younger staff, both at the government hospital and colleges, seem to have availed CCL either by combining it with Maternity Leave or when the child was young.

During the interviews, I enquired if the leave was available to either of the parents, would their husbands have taken it assuming they were entitled to it. Dr. X said no because she felt that the children were more comfortable with her, and her husband was less effective at handling them. Nurse Y said yes, her husband would have taken leave sometimes in order to drop the children to the examination center etc. She said both parents have different 'roles' to play.

Both Dr. X and Nurse Y said that they used the CCL for the purpose of their domestic work responsibilities, too, e.g., when the hired help went on annual leave to her village. They felt that when mothers avail CCL, they do multi-tasking combining childcare with other domestic responsibilities, which would not be the case if their husbands availed the leave.

Sister Y informed that there were so many young staff who wanted to avail of the CCL that the leave had to be (informally) rationed – only 15 days of CCL was sanctioned during a quarter unless the staff had very young children and no childcare support at home. Therefore, she could avail of only about 200 days of CCL in total for her first two children before they turned 18 years old. Her third child is younger than 18, but as per the rules, CCL is available only for the first two children. Dr. X informed that she availed of about 300 days of CCL in total for her two children.

The central government employees represent the group which enjoys the maximum social security and the most extensive leave benefits among the organised sector workers. Before the provision of childcare leave mentioned above, and even now in the case of women employed in the private sector, mothers of young children have been taking various kinds of leaves accumulated in the past, including leave without pay as well as a break from their careers. Some join back the profession/job while many find it difficult due to the labour market conditions and either start something part-time or home-based or may decide to stay out of the labour market. (Bhagyashree 2021)

Also, there is no provision for leave for other direct care (care of elderly and the sick) or indirect care work (domestic duties). Deshpande and Kabeer (2019) find that marriage (and domestic work) and not child care is responsible for the LFPR being low. TUS 2019 data presented in section 2 also show that women spent on unpaid domestic work more than twice the amount of time they spent on childcare.

6 Conclusion

This paper made an attempt to understand the role played by the care responsibilities of educated middle-class urban Indian women in their career decisions. It analyses the literature on the disturbing phenomenon of rising education but declining Labour Force Participation Rates in India in recent years and the possible reasons for it. The study finds that the gendered social norms relating to domestic work and childcare and the practice of patrilocality negatively affect the career trajectories of middle class educated women. Many try to balance the two sets of responsibilities while the careers of quite a few are disrupted. Many women feel the double burden left them with almost no time for self-care and/or sufficient rest.

The paper also looked at the role played by the family, market, state and community in the provision of care work in India. It finds that the state and market have left the majority of the burden of providing care to individual families. The study interrogated the policies of increasing maternity leave and provision of childcare leave for women employees. It finds that both have a positive impact on the women toiling under the double burden society has put them under and bring recognition to the carework performed by women employees. However, given the prevailing social norms on gender roles, they are insufficient (in their present form) to bring gender parity in families and in the labour market. It is, therefore, suggested that parental rather than maternal leave will help by creating awareness about changing the gendered norm of childcare. Public provisioning of carework, as well as changes in social norms on gender roles and employment policies, are needed for redistributing the care burden among the state, market, civil society and families.

Funding: This research received no external funding.

Conflicts of Interest: The authors declare no conflict of interest.

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