**Worker, Mother or Both: Maternity and Child Care Services for Women in the Unorganised Sector**

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The recognition that women simultaneously perform multiple roles in society—as workers (economically productive role); as home-makers (consumer role); and as child-bearers and – rearers (Reproductive role)- has been late and slow in coming. It is also undeniable that the reproductive a workers, and most under pressure as home-makers. Hence, young women with young children are those who most need support, especially in their roles as mothers and home-makers, to enable them to fulfil their economic roles adequately, and also to enable them to participate in training and in civic and political life.

The concept that such support should be provided in the form of services, since society has some obligation to provide such support, is also a relatively new one, and still unpopular among those who regard child rearing as private responsibility to be carried out as best it can by each family. Unfortunately, in this context, the word ‘family’ refers only to the woman, who is traditionally seen as being responsible for child-rearing. This concept has been deeply ingrained in women as well as men, so much so that it is still relatively rare for working women to expect, let alone demand, support services as their right. Widespread social acceptance of the need for support services is yet to emerge.

While a few efforts have been made to provide maternity and child care support, these have been largely unrelated to each other and have shown modest growth since Independence. Further, they have been confined almost entirely to the organized sector, though in India over 90 percent of the female workforce is found in the unorganized sector. The Report of the Committee on Women in the Informal Sector (Shram Shakti, 1988) was the first to articulate the idea of the Continuum of Maternity and Child Care, as the two are closely linked, and together refer to the woman’s reproductive role. The Report made a powerful plea for a comprehensive policy of support for women working in the unorganized sector.

Within the continuum, two broad divisions can be made. The first is the period before and after childbirth, till the child is about 2 years old, which could be described as maternity and infancy. During this period, close proximity of the mother and child and child and constant access are the major needs of the child, both for breastfeeding and psycho-social development. This period is probably best dealt with through entitlements to the mother, that is, various supportive arrangements directed at the woman which enable her to carry out her reproductive and productive roles. The second period, starting from when the child is about 2 years old, and with a flexible upper limit till the child is 4,5 or 6 or can be enrolled in primary school, is probably best handled through services, which reach out directly to the child.

At brief survey of the position with regard to each of these aspects is given in two sections, the first dealing with entitlements for maternity and the second with child care services. In conclusion, some suggestions for policy and programmes are made.

MATERNITY ENTILTLEMENTS

What kind of entitlements are available to women for childbirth, breastfeeding and ;child care for the first two years of the child’s life?

There are several laws which directly or indirectly affect lactating women and children below 2 years (Table 9.1). Of these, only two, the Employees’ State Insurance Act (1948) and the Maternity Benefit Act (1961), directly address the question of maternity.

Both these Acts provide three months of paid maternity leave to women working in establishments employing 10 (sometimes 20) workers, that is, for the organized sector. They also provide three months of paid maternity leave to women working in establishments employing 10 (sometimes 20) workers, that is, for the organized sector. They also provide protection against dismissal and against arduous or hazardous work during pregnancy and for nursing breaks during lactation.

**Table 9.1**

**Laws affecting Lactating Women, and Children of 0-2 years**

|  |  |
| --- | --- |
| Employees’ State Insurance Act | 1948 |
| Factories Act\* | 1948 |
| Mines Act\* | 1950 |
| Plantations Act\* | 1951 |
| Maternity Benefits Act | 1961 |
| Beedi and Cigar Workers Act\* | 1966 |
| Contract Labour Act\* | 1970 |
| Inter-state Migrant Workers’ Act\* | 1980 |
| Infant Milk Substitutes Act | 1992 |

\*Provide for crèches at the workplace.

No similar legislation exists for women in the unorganized sector. Though, maternity benefits are technically available to beedi workers under the Beedi and Cigar Workers” Act, records show that very few women workers are able to avail of them because of existing conditions and their lack of awareness of the benefits. In cases where there are strong unions, the benefits have been availed of.

Though between a third and a half of all agricultural labourers are women, the proposed Agricultural Workers’ Bill makes no direct mention of maternity, and the Construction Workers’ Act (1996) has not made any positive advance in this direction either.

Moreover, some of the legislation is restrictive rather than enabling in nature, like the Infant Milk Substitutes Act, which strictly regulates and restricts the promotion, distribution and donation of baby foods and milk substitutes and hence does little to help women, reducing instead of enlarging their options. The remaining Acts listed in Table 9.1 provide for crèches at the workplace. They will be discussed later.

In recent years, the central government as well as several state governments has launched schemes to support women during pregnancy, childbirth and lactation with cash nutrition or services. These schemes are specifically targeted at women who cannot claim benefits through the law which only addresses the organized sector. But these schemes do not have the force of law and thus benefits accruing from them cannot be claimed as a right or be contested in court. The schemes can be altered or wound up by the government without legislation. These schemes are shown in Table 9.2. The integrated Child Development Services and the Tamil Nadu Integrated Nutrition Project provide nutrition to pregnant and lactating women as well as children. The employment Guarantee Scheme Maharashtra offers maternity benefits and crèches, while others provide cash benefits.

**Table 9.2**

**Schemes Affecting Lactating Women, and Children of 0-2 years**

|  |  |
| --- | --- |
| **National Level** |  |
| Scheme of Assistance to Creches for Working/Ailling Mothers\* | 1974 |
| Integrated Child Development Services | 1974 |
| Maternity Assistance Scheme | 1995 |
| **State Level** |  |
| Employment guarantee Scheme | Maharashtra 1974 |
| Tamil Nadu Integrated Nutrition Project | Tamil Nadu 1980 |
| Maternal Protection Scheme | Gujrat 1986 |
| Muthulakshmi Reddy Childbirth Scheme | Tamil Nadu 1988 |
| Scheme for Pregnant Agricultural Labourers | Andhra Pradesh 1990 |

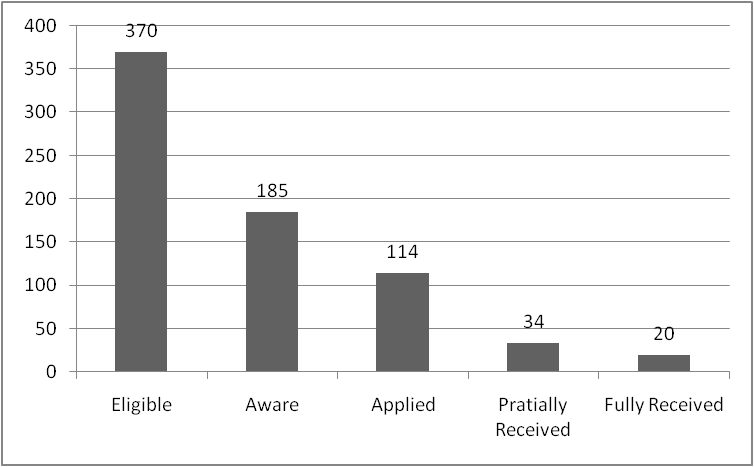
\*This scheme is discussed in the section on child care services.

Three states (Gujarat since 1986, Tamil Nadu since 1988 and Andhra Pradesh [AP] since 1990) provide a modest cash benefit of Rs 500-800 for maternity to women below the poverty line. The Andhra Pradesh scheme is restricted to women agricultural labourers. Provision was made in the central government’s budget for similar benefits, but the extent of implementation is not clearly known. The weaknesses of these schemes are as follows:

1. Eligibility is defined as ‘below poverty line’, thus keeping out those who may be just above it, or who are unable to establish their eligibility, and also giving scope for cumbersome red tape and corruption right at the grassroots. Besides, it fails to recognize that women workers above the poverty line also require support as mothers.
2. The woman’s work is not referred to (except in the case of AP), so the objective of providing wage protection is not necessarily fulfilled.
3. Eligibility is restricted to two children, excluding the woman worker who may not be in a position to control the decision on the number of children she bears and placing a further burden on her. Further, this contravenes the right of the newborn to nutrition, as provided in the Convention on the Rights of the Child which has been ratified by India.
4. There are a number of other weaknesses in implementation. Figures are not available to show how many women are getting even these limited benefits. But a study which was conducted gives a very bleak picture of the utilization of the scheme in Tamil Nadu (see Figure 9.1).

**Figure 9.1**

**Utilisation of Cash Support Scheme in Tamil Nadu**



Out of 370 ‘eligible’ women, that is, those below the poverty line with two or less children, only half were aware of the scheme and only about one-third applied, perhaps because of a reluctance to face the difficulties in getting the money. Due to delays, red tape, need for repeated visits, bribes and other problems, only about one-tenth received even partial payment, and only 5-6 per cent had received full payment at the time of the study.

Proposals made by NGOs in Tamil Nadu suggest that, to enable women to stay off the labour market for at least a few months to care for the newborn child properly, it is necessary to provide wage protection at least at the level of minimum wages for a period of four to six months. At the current levels of minimum wages in Tamil Nadu (that is, Rs 20 per day), and allowing for 20 working days per month for four months, this would translate as Rs 1600 (20 x 20 x 4), while the amount presently allocated is Rs 500. What women actually get after allowing for costs and bribery is, of course, much less.

The integrated Child Development Services and the Tamil Nadu Integrated Nutrition Project provide enriched flour as a nutritional supplement to pregnant and lactating women, either in the form of a ‘laddu’ to be eaten on the spot, or a week’s ration to be taken home. The supplement is only available to women below the poverty line. Studies show that only about half the ‘eligible’ women take the supplement and little is known about how the ‘take-home’ food is shared and used in the family. However, studies in Tamil Nadu show that the nutrition scheme is more widely known and availed of than the cash support scheme.

**CHID CARE SERVICES**

Progammes which aim at providing child care services to women working in the unorganized sector can be categorized as specific services, which try to meet the needs of specific groups of women, general services addressed to all poor women, and innovative programmes.

Specific services

Women Workers

There are several laws mandating crèches for the children of women workers (Table 9.3). The first three, which were passed in the first few years after Independence, are modeled on laws in the West and relate to the organized sector. They make it compulsory for employers to provide crèches for children below 6 years at the workplace of working women, and lay down eligibility in terms of the number of women employed. They also lay down guidelines and rules regarding the location and construction of the crèches, furniture and equipment, amenities and facilities, milk and refreshments, etc. they make reference to ‘trained’ workers, without specifying the nature of training. But even in the organized sector, there are few such crèches, and their quality, is uneven.

As the last three Acts listed in Table 9.3 which relate to the unorganized sector, are modeled on laws passed for the organized sector, they are practically impossible to implement. Hence, there are hardly any such crèches. Unfortunately, the Construction Workers’ Act (1996) does not make any significant improvements over earlier Acts, and repeats the same clauses which have proved not to be workable.

**Table 9.3**

**Laws Relalting to Creches**

|  |  |  |  |
| --- | --- | --- | --- |
| Act | Minimum Number of Workers | Minimum Number of Children | Provision |
| Factories Act, 1948 | 30 | - | A suitable room or rooms for the use of children, with trained women in charge |
| Plantations Act, 1951 | 50 | 20 | -do- |
| Mines Act 1952 (Section 5B) | No minimum number specified | - | Room or rooms, amenities and supervision |
| Beedi and Cigar Workers (Conditions of Employment) Act, 1966 | 50 | - | Room or rooms and trained women in charge |
| Contract Labour (Regulation & Abolition) Act, 1070 | 20 | - | Two rooms to be provided for children, one play room and one sleeping room |
| Inter-state Migrant Workers’ Act, 1980 | -do- | -do- | -do- |

Detailed critiques of these laws by organizations like Mobile Creches working with construction labour indicate that these are not suitable models for the unorganised sector, since the conditions here are very different. For example, in this sector women may be self-employed in contractual work, or working for very small establishments, or in situations where there is no visible employer to whom the law can be addressed. This makes a mockery of the ‘eligibility’ clause without putting anything else in its place, such as incentives for small employers to group together to provide common services.

Voluntary Sector

The main scheme for this sector is that of Creches for Children of Working/

Ailing Mothers, implemented by the Central Social Welfare Board and the Department of Women and Child Development, recently supported by funding from the National Creche Fund set up in 1994. Though originally intended as a support for women working in the unorganized sector, the scheme has been so loosely defined and is so poorly implemented and monitored, besides being inadequate in coverage, that it does not fulfil its objectives. Its major weaknesses are:

1. Even after 20 years, only about 13,700 creches (12,500 under the Creches for Children of Working/Ailing Mothers and 1,200 under the National Creche Fund) catering to about 350,000 children exist throughout the country. These are concentrated in certain states, and are to be found mostly in urban and semi-urban areas.
2. In most cases, the crèches cater to children between the ages of 2 and 6, and very few or no children below 2 are to be found, even though this is a most critical need for working mothers. The main reason is that the conception and financing of the scheme is not conducive to the care of the very young. To cater to the very young, more adult workers are required, as well as more and different amenities, equipment, food, training, etc. Hence, most agencies are unable or unwilling to provide for infants, while parents are naturally reluctant to send their children under these conditions. The crèches therefore function mostly like pre-schools, nursery schools, balwadis, etc.
3. Most of the crèches only function for three or four hours as in the case of balwadis/nursery schools and their timings are not usually adapted to those of working mothers except in Kerala and Tamil Nadu, where all crèches are obliged to function for six hours, usually from 9.30 a.m. to 3.30p.m. or longer. Even here however they are not necessarily adjusted to the mothers’ work timings.
4. There is often no information about which categories of women working in which occupations use these facilities, since such records are not compulsory for receiving grants. There is hence little data available about whether the timings and locations of the crèches suit the mothers.
5. The funding, pattern of staffing, and lack of training of crèche workers make it very difficult for these crèches to offer good quality developmental care to the children. Besides, there are many other weaknesses in implementation.

Private sector

Unaided crèches have sprung up in both the voluntary and private sectors.

1. In the voluntary sector, there are now a growing number of crèches, often run by religious denominations, which are not government aided and are mostly funded by donor agencies often with some contribution from the parents. There is very little information available about them, but they are small, scattered and of an experimental nature. A few, like the day-care centres run by the Church of South India, offer a high standard of services, but they are expensive.
2. In the private sector, crèches catering to middle-class working women have mushroomed in the large cities, especially the metropolitan ones. There has been no systematic survey or quantitative assessment of them, nor are there any regulations or guidelines for such crèches. Some available studies indicate that the quality is variable, mostly poor, with heavy overcrowding, and lack of individual attention or stimulating activities for the children. The organizers have no specialized training and little idea about maintaining standards. However, parents’ needs and demands in terms of timing, location, safety and the basic requirements of food, toilet, rest, sleep, etc., are well met.

General Services

In the sixties, increasing concern was voiced about the plight of young children and the possible adverse effects on them of poverty and deprivation. It was realized that the reach of the existing programmes was inadequate to meet the needs of millions of children.

Integrated Child Development Services

This led to the launching of the Integrated Child Development Services (ICDS) Scheme, vast in its scope and conception, aiming at the total development of young children in the most vulnerable groups. This scheme has the most extensive and comprehensive network of child care services in any developing country and reaches about 15 per cent of all children in the age group 0-6 and two-fifths of those most in need. By the turn of the century, it is expected to cover the entire country.

The overall goals of the ICDS Scheme are:

* to provide a comprehensive range of basic services to children in an integrated manner.
* to create a mechanism at the village level for service delivery, and
* to give priority to low-income groups, including the underprivileged tribes and Scheduled Castes.

Specific beneficiaries include: expectant and nursing mothers, other women aged 15-45 years, and children of 0-6 years. The package of six services provided are: supplementary nutrition, immunization, health check-up, referral services, non-formal pre-school education (for 3-6 year-olds), nutrition and health education for women and a nutritional supplement for pregnant and lactating mothers, in selecting project areas, priority is given to those predominantly inhabited by tribes and Scheduled Castes, backward areas, drought-prone and nutritionally deficient areas, those poorly served by social services, and urban slums. The anganwadis generally run for three hours (four in some states and a full day of six hours in Kerala and Tamil Nadu), and the pre-school classes only cater to children of 3+. There is evidence that the services are used only by the poorest groups.

The scheme does not specifically recognize or cater to the work done by women, or their needs or responsibilities as mothers, nor are the timings or location of centres geared to the convenience of working women of any category, to seasonal changes in their work schedules, migration patterns, or other work-related factors affecting them. Women are expected to avail of the benefits at the times and places laid down in the scheme, and this is widely quoted as a reason for the low availing of supplements and other benefits by eligible women, as well as for the low utilization by children.

The main success of the ICDS scheme has been in developing an infrastructure for child care services, and in areas like immunization and enrolment of children from anganwadis in primary schools. However, it has had limited value as a support service for women in the unorganized sector, because of its fragmented approach which focuses on the delivery of specific services, and lack of attention to day care for children.

Day care was not originally a component of the ICDS Scheme and the need for this service was not recognized until the National Policy of Education, 1986. The programme of Action which followed, however, stated that a fixed number of anganwadis (25 per cent) would be turned into anganwadi-cum crèches by the year 2000. It spelled out the requirements for running such anganwadi-cum-creches. Till the end of 1996 only 659 anganwadi-cum-creches had been approved for the entire country, although 25 per cent would imply about 100,000 anganwadi-cum-creches.

Table 9.4 give a summary of the nature and extent of general child care services run by the government or with government aid. Though there is no hard data available it can be assumed that the mothers of many (or the majority) of these children work in the unorganized sector. It must be noted that most of these services are partial and fall far short of holistic child care or day care, especially for children below the age of 3.

**Table 9.4**

**Coverage under Various Early Childhood Education Schemes (1996-97)**

|  |  |  |
| --- | --- | --- |
| Schemes | Number of Centres | Number of Beneficiaries |
| ICDS (pre-school education age group 3-6 years | 400,000 (aprox.) 5,614 projects | 10.81\* |
| Early childhood education (ECE) (age group 3-5 years) | 4,635 | 0.153 |
| Crèches and day-care centres (age group 3-6 years)14313 | 14,313 | 0.342 |
| Baalwadis (age group 3-6 years) | 5641 | 0.169 |
| Staturoty crèches (0-6 years) | 5000 (approx.) | 0.050 (aprox) |
| **Total** |  | **18.5 (approx>)** |

\*An additional 8.1 million children in the 0-3 age group are covered under ICDS, receiving food supplements, immunization and health checks.

Source: Data on ICDS, ECE, crèches and day-care centres and balwadis are from the Department of Women and Child Development in the Ministry of HRD, Government of India.

Innovative Programmes

Some innovative small-scale programmes offer insights and scope for emulation.

Employer-funded

To promote small-scale industries, several state governments have set up[ industrial estates with special facilities for small businesses. In these estates there are a large number of small employers who are not statutorily obliged to provide crèches, and hence there have been some voluntary cooperative ventures run with goodwill and imagination. In Chennai, a joint initiative involving a voluntary agency, the Indian Council for Child Welfare, the employers (Ambattur Industrial Estate Manufactures’ Association) and the state government (Small Industries Development Corporation) led to the establishment of two crèches for children of women workers which run a 12-hour day, in shifts, and cater to about 100 children. The crèches are financed by the employers’ association with small contributions from the parents, and are staffed and run by the voluntary agency in accommodation provided by the state government. There is great need, though not yet a strong demand, for more such crèches, since there are several thousand women employed in the Estate. This model could be replicated in similar situations, but depends on goodwill, since there is no legal requirement for employers to fund such crèches. Recognition and reward for those who adopt humane employment policies, discounts and incentives for joint activities, and some investment in advocacy and awareness creation would go a long way in helping more small employers to promote crèches.

Employee-organised

An association of women employees in government and public sector undertakings in Chennai runs a chain of eight to 10 creches, housed in the office buildings in which the mothers woerk (e.g., Income Tax, Secretariat, Port Trust, Reserve Bank, etc.). Accommodation, and funds for some initial equipment were provided by the concerned offices, and the creches are managed by the Women’s Association. The main funding is from the parents themselves, though substantial contributions have been made and occasionally continue to be made by the employers, depending on the interest and goodwill of the senior officer/heads of the concerned departments. These crèches mostly cater to children below 3, as those is the 3+ age group tend to be placed in private nursery schools which also function as day-care centres. Parental needs for safety, cleanliness, food, timing and proximity are adequately met, though developmental care is often lacking. However, there has been little recruitment to these cadres in the last few years, and the average age of the women employees is steadily increasing. Most of them have completed their child-bearing, and with declining fertility among the middle class, the younger women may opt to have only one or no child. Because of these factors, and the increasing difficulties of urban transport, the demand for such crèches seems to be on the decline.

Union-organised

Crèches established by SEWA for the children of women tobacco workers are a good example of a service organized by a union for its members. Launched in 1989 and focusing (for the first few years) on the age group 0-3, it has now been extended to children up to 6 years of age. Further, the management has been taken over by a service cooperative consisting of the child care workers themselves under the overall umbrella of SEWA. This, the first attempt of its kind in the country, is in itself a very significant experiment. Further, the crèches are funded by multiple sources, including modest contributions from the mothers, donations from philanthropists, contributions in kind from panchayats and local bodies, support from insurance and labour welfare funds and to some extent from the tobacco factory owners themselves. This last however, is considered a voluntary contribution for two reasons:

1. The women work both in the tobacco fields and the factories, according to the season. While crèches are mandatory under the Factories Act, there is no such provision for agricultural workers.
2. Though employers are required to provide crèches at the factory site, they are not obliged to provide funds to any other agency to carry out that task. Hence, such contributions have to be accepted as a gesture of goodwill and cannot be demanded as a matter of legal right.

Women Workers-organised

Now operating in four states (Gujarat, Karnataka, UP and Bihar), Mahila Samakhya, a government-sponsored autonomous women’s organization, was set up in 1987 with a view to empowering women and education for equality. It helps women find time and space to reflect on issues of their concern, organize and generate their own solutions, with support from the organization.

In some areas in Gujarat, rural and tribal women have defined child care support as one of their basic needs and have by trial and error devised strategies to meet this need. Child care support has become a tool for the empowerment of these women. Currently financed by government through Mahila Samakhya, staffed by local women, and run on the pattern of the Central Social Welfare Board crèches, child care centres have been established and have been able to garner some support from the men and other family members, as well as some local bodies. Though not of high quality, they are adequate to meet the women’s needs. Their future viability, however, can be ensured only if linked in the long term with local panchayati raj or a larger umbrella organization. Intensive efforts are required to get funds from various sources, as well as to train and supervise the workers.

Voluntary Agency-run

The oldest and best known example is Mobile Creches, a voluntary agency which has specialized for nearly three decades in running day-care centres for the children of migrant women construction labourers and other casual workers in the metropolitan cities of Mumbai, Delhi and Pune. Since the women are obliged to go to work soon after childbirth and to leave the children for long hours, Mobile Creches has developed a programme sensitively tuned to the needs of each age group, from home-like crèches for infants, to play centres equipped with stimulating low-cost materials and activities for pre-schoolers, to helping older children get into and through primary school. The workers are trained as interns ‘on the job’ through a well-planned programme of practical work. Funded from multiple sources with heavy contributions from donors, Mobile Creches also gathers some contributions from building contractors and builders. However, for reasons already mentioned (SEWA) these are considered as voluntary contributions. Because of the complexity of the task, the lack of readily available trained workers, the high costs and uncertainty of results due to the heavy turnover of labour, limited cooperation from the building industry, and other reasons, this model has not been widely replicated.

There are several other examples in various parts of the country which adjust their programmes in varying degrees to the requirements of women workers, their children and the local community.

CONCLUSION AND RECOMMENDATIONS

This brief survey of existing entitlements/facilities/services indicated what needs to be done: funding needs to be shared by government (the lion’s share in the case of the poor), employers, parents and the general public, while programmes should be flexible and need-sensitive, decentralized and participatory in management. Thus, programmes my be run by women’s groups, employers, workers, cooperatives, trade unions, voluntary agencies, local governments, service clubs, educational institutions, etc. since the child care worker is crucial to the success of a programme, adequate attention should be given to her selection, training, wages, working conditions and motivation.

In the light of these considerations, some basic policy recommendations are:

1. A Maternity and Child Care Policy, a comprehensive statement which deals with the totality of a woman’s reproductive function, from pregnancy till the child is able to go to school. The document should state the woman’s right to health care, wage protection and adequate working conditions for maternity, and at the same time the child’s right to survival, protection, care and development. The policy statement, based on the Constitution and the Convention on the Rights of the Child has then to be transformed into an interrelated set of laws and schemes addressing the continuum of maternity and child care. Learning from the experiences of the past, some of the present laws and schemes would have to be superseded or amended, and new ones provided.
2. A statutory state-level Maternity Fund which could be drawn upon to provide every woman, regardless of income, number of children or other considerations, with income protection to enable her to withdraw temporarily, partially or wholly from the workforce, in the interests of child care. Such a Fund should be funded from multiple sources which could include: a cess on employers, regardless of the number or sex of workers employed; a percentage of all large contracts, especially in trades like building, quarrying and construction; a cess on the turnover of establishments; tax-exempt donations; and insurance contributions from workers of both sexes. The Fund could also be enriched by percentage contributions from sectoral labour welfare funds and insurance funds. The management of the Fund should have representatives of labour, employers and the state, and the procedures should be laid down by this autonomous body, delinked from the contributors.
3. A state-level statutory Child Care Fund, along similar lines. For flexibility and need-responsiveness, child care services should be decentralized and run by a variety of organizations which may be funded by the Child Care Fund. This Fund too should have multiple sources of raising and developing its income, and autonomy in action. Both these Funds should be state rather than national level, for administrative convenience and adaptability. They may even be combined if feasible.
4. Recognition of the child care worker as fulfilling an important social role and as an emerging category of worker through a programme of appropriate and ongoing training and supervision, combined with adequate wages and reasonable working conditions.

Though such policies and the programmes which would arise from them, women will be empowered to effectively and satisfactorily fulfil their multiple roles, and children may have the chance for a healthy and happy life.

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