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TIME USE STUDIES TO EVALUATE UNPAID CARE WORK IN KERALA

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ABSTRACT

Care work, both paid and unpaid contributes to the wellbeing, economic growth and social development. Unfortunately, the burden of this unpaid care work is unequally spread in the family across gender and class. This makes the physical and mental health and wellbeing of the primary care providers out of the balance. So emergency measures are required to recognize this unpaid care work, find its magnitude and various factors and influence them. This paper examines the importance of the recognition of unpaid care work and method of estimation.

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KEYWORDS

Unpaid care work, time use survey, gender policy, ESNA, Becker's Theory.

INTRODUCTION

Traditional economic analysis conceptualized income earning activities as "work". As a result, a wide range of unpaid activities like producing goods and services for subsistence consumption, cooking, cleaning, care for children, elderly and sick persons, voluntary community services etc were not considered as work, in economic terms, as it is difficult to impute values for them. As a matter of fact, since the sixties and seventies, economists give increased attention to women's work both at the theoretical and empirical level. Discourse on the invisibility of unpaid work and the appeal for reflecting it in national accounts has triggered the use of time use survey, the best way to measure unpaid work (Budlender, 2002).

Consequently, The United Nations Statistical Commission, which is responsible for establishing and revising System of National Accounts (SNA) for the estimation of GDP, in its 1993 revision specifies a 'production boundary' which includes : goods and services produced for the market, subsistence production of goods, imputed rent and paid domestic work. But it excluded household production of 'services' on unpaid basis on the grounds that- it is difficult to impute monetary values, it has limited repercussions on the rest of the economy and the inclusion of this will have adverse impact on the effectiveness of the accounts for macro economic analysis and policy decisions (Razavi, 2007). Thus, most countries have excluded unpaid care work from their coverage of national income.

The unpaid care work that nourishes and replenishes human life and reproduces and maintains human capabilities contributes not only to economic production but also to social development of a nation. However, the cost of reproducing and maintaining the labour force in a given society remains unrecognized and undervalued as long as the scope of economic activity does not include unpaid care work. In all societies, regardless of whether developed or developing, women concentrate in unpaid care work more than men, and this leads to economic invisibility and statistical underestimation of women's work (Beneria, 1995). "This has an impact on the status of women in society, their opportunities in public life and the gender blindness of development policy"(United Nations, 1995 p:87).

We need to recognize the fact that, unpaid care work has a crucial dimension of wellbeing, not only for those who benefit from the care received but also as a cost for those who provide care, mostly women (Esquivel, 2013). Providing care has a major impact on care giver's life, the material cost in terms of time, energy, health and other resources, which can undermine their quality of life, their right to health and wellbeing. Unpaid care work also contributes to emotional and psychological cost, which have an effect on their right to education, paid employment and decision making. Thus, unpaid care work needs to be made visible (World Bank, 2001).

Unpaid work and care work, rather unrecognized productive activity in an economy, garnered increasing attention from the United Nations organizations and academic circles since the 1990s. As stated above, it led to inclusion of unpaid production of goods in national accounts, but not unpaid services. A series of United Nations intergovernmental resolutions and World Conferences namely, Fourth World Conference on Women (Beijing, September 1995) and The Social Summit (Copenhagen, March 1995) which call for the recognition and visibility of women's unpaid work and emphasize such a step for the formulation of socio-economic policies to recognize unpaid care work (World Summit for Social Development, 1995). The UNDP's Human Development Report of 1995 also has focused its special attention on women's contribution to the economic and social development of their own family, community and nation at large (United Nations HDR, 1995). Thus the analysis of unpaid care work by World Conferences on Women and several international organizations like United Nations, International Labour Organization(ILO), The United Nations International Research and Training Institute for the Advancement of Women (INSTRAW), Organization for Economic Co-operation and Development (OECD), feminist economist etc provide a state of affairs which make it impossible to disregard the issue of unpaid care work.

Despite the fact that, unpaid care work is receiving attention in high level development policy discussions of several international agencies, unpaid care continues to be overlooked and invisible in development practices and policy advocacy of several advanced and most of the developing nations. The only difference is in its degree of neglect. The strategic neglect seems to be more pronounced in the case of India. For example, India is not counting fuel and water collection in its national statistics, despite the recommendations of the SNA document revision of 1993 (Eyben & Fontana, 2011). This seems to be the result of the reluctance and negligence on the part of the political leaders to revise SNA accordingly.

UNPAID CARE WORK AND NATIONAL ACCOUNTS

Care - a fundamental and inevitable component of human wellbeing, social development and economic growth - can be delivered by the state, families, markets and community sectors. Families in all their diverse forms remain the key institution in meeting care needs. But the cost of providing care are unequally borne across gender and class (UNRISD Research and Policy Brief 9, 2007). In most countries the provision of care in the family continues to lie unbalanced mainly with women on an unpaid basis, which is not economically or socially valued. Thus the burden of providing unpaid care falls heavily on those who are vulnerable, have less choice and less decision making power.

Although unpaid care work has considerable economic value, it is not reflected in the economic indicators like GDP, labour force surveys etc (Hirway, 2005). For this reason, the women who work full-time in their homes on unpaid basis are considered as economically unproductive. This institutional neglect of women's work in GDP calculations is an important issue that affect her daily life, with repercussions as low status in family, society and in the economy by their spouses, various institutions and governments. The failure to 'give visibility and value' to the essential work of care giving in economic measurement leads to underestimation of the care work of women and their contribution to national economy and provides inadequate information about the state of economy. Hence, GDP is unfit to reflect unpaid care work, as "men received the lion's share of income and recognition for their economic contribution -while most of

women's work remains unpaid, unrecognized and undervalued" (UNDP 1995, P.88). This inequitable situation is allowed to continue and government continues to set economic and social policies using incomplete information.

The sustained neglect of unpaid care work is quite visible in various arenas of Indian economy too. The 2001 Census of India categorizes unpaid family worker as 'Non-workers' and classifies them in the same category of beggars, jail convicts, mental patients, disabled and students (Census of India, 2001). This is a grave injustice to over 367 million women – or 32% of the entire population and 65% of all females of India. Also among the total of those listed as non-workers in India, 74.3% are women. Such a categorization of the majority of women cannot fail to have consequences in policies and programs aimed at women.

To date, Government of India has conducted only a pilot time use survey in the year 1998, in six states namely Tamil Nadu, Meghalaya, Haryana, Madhya Pradesh, Orissa and Gujarat to collect data about time spent on non-market productive activities and on unpaid care works. In a country like India, with varied regional, spatial, occupational, economic and social differences, it is relatively insufficient to measure and understand the nature, patterns, magnitude, determinant etc of unpaid care work.

Kerala, the southernmost state of India stands apart from other states with a consistently high level of human development in par with that of several advanced nations, but with a much lower per capita income (Centre for Development Studies, 2001)(Kerala Human Development Report, 2005). As per 2011 census, Kerala has achieved the highest literacy rate (93.9%) in India, against the national literacy rate of 74% and its sex ratio is 1,064 females per 1,000 males; which is the only state in India with a sex ratio more than 1. When it comes to women's status, Kerala has been acclaimed for the achievements in the human development indicators like health status, sex ratio, education and life expectancy among the women.

Even as Kerala ranks high among the states in India in gender development index, it is facing a "gender paradox", as the much improved human development position does not necessarily mean that the socially-sanctioned responsibilities of women in the society and within the household have been lightened. A close scrutiny to these broad indicators brought up more questions. The State is well known for gender based violence, depression and suicide which can be attributed to lack of autonomy and powerlessness experienced by women in the State. This growing gender 'un-freedom' has been, and could continue to be, an impediment to the growth prospects of the state's economy. Human Development Report (Kerala Human Development Report, 2005) highlighted that one of the most serious form of capability failure in Kerala is the problem of educated female unemployment. And one of the most noticeable trends in women's employment is that they tend to cluster in a few occupations like teaching, nursing, clerical and related jobs. All these jobs are largely related to their unpaid care work in the family, so society may fail to recognize her unpaid contribution to the economy. Yet another strand about Kerala women is their poor political participation and representation.

Looking at the care economy of Kerala, it appears that economic, demographic and environmental factors created an escalating demand for family unpaid care from the part of women in the economy. It can be attributed to a range of factors including a rapidly ageing population, a high morbidity rate, life style diseases, migration, environmental degradation, climate change, climate related depletion of essential water and fuel and food resources. All the above mentioned factors intensify the care needs of the Kerala society. As the government is gradually withdrawing from the health care and education sectors, the institutional health care has become affordable only for affluent people; the poor household's care needs are often met at the cost of emotional and physical wellbeing of the primary care givers-women (Esplen, 2009). This disproportionate responsibility that women bear and the time consuming nature of care work might constraint women from engaging in paid work, and other social, political and civil engagements.

Despite the relative success of social development, inequalities across social groups are evident from the high incidence of poverty found among the rural ST (44 per cent) and SC (22 per cent) as compared to the state average of 15 per cent (Human Development Report, 2011). Residential areas/colonies without the state provision for safe piped water, fuel, basic infrastructure, health care and other services amplifies the drudgery of unpaid care work on the part of women. Government of Kerala has not conducted a full-scale time use survey to understand the magnitude of the internationally discussed issue of unpaid care work in our state. Hence, there is hardly any published research material available on Kerala directly and explicitly dealing with 'unpaid care work'. If we cannot measure the unpaid care sector of the economy, we cannot manage it to minimize poverty, gender inequality etc and to boost sustained development of the economy. Proper understanding and measurement of unpaid care work is very much warranted. Relevant data on highly gendered issue like unpaid care work is the most important pre requisite for gender sensitive programmes, schemes and prioritising allocation of resources from a gender perspective. It is also relevant to a good number of programmes, including food security, women empowerment, access to credit, political and labour force participation, new enterprise, water, sanitation and hygiene.

Micro studies are essential for engendering macroeconomics; one cannot totally understand markets without being aware of how families and households function. To evolve local specific policies and programmes, one needs to know the issues, challenges and needs of people residing in a particular locality/panchayat. With this study the researcher seeks to explore various arena of the deep rooted issue of unpaid care work, particularly, its nature, characteristics, magnitude and determinants. This can be explored by seeking answers to the questions given below.

METHODOLOGY

The study is conducted in a small scale exploratory design utilizing cross-sectional face to face recall Interview Schedule for getting the time use data. The purpose of the design is to assess the magnitude and determinants of intra-household distribution of unpaid care work of primary male and female care givers in a household.

The information given in the following articles are helpful in providing insights about conceptual, methodological and analytical frameworks to be followed for this study -Guide to Producing Statistics on Time Use : Measuring Paid and Unpaid Work (United Nations, 2005), Reference Manual on Developing Gender Statistics: A Practical Tool (United Nations, 2010), INSTRAW, World Bank, Human Development Report (United Nations Development Programme, 1995), UN Discussion papers, ILO, Back ground papers, United Nations Research Institute for Social Development (UNRISD) Working papers, In depth Case Studies, Overview papers of countries etc. The study is conducted in the Madapally Panchayat of the Kottayam District from Kerala 315 households have been studied with both men and women primary care providers.

RESULTS AND DISCUSSIONS

NATURE AND CHARACTERISTICS OF UNPAID CARE WORK

This section provides the analysis of the nature of unpaid care work. The estimates are presented separately for men and women to highlight that significant gender differences prevail in respect of unpaid work.

The complete activities are grouped into eleven sub categories for the ease of research, which is similar to (slightly adapted version of) the high level categories of International Classification of Time Use Activities (ICATUS) based on SNA framework, developed by United Nations Statistical Division. Then the eleven activities are grouped into three broad categories namely 1) SNA work activities, 2) Non SNA work activities / Extended SNA / unpaid care work and 3) Non productive activities / Personal activities. The detailed discussion is made in chapter five. So this chapter discusses only the nature and characteristics of unpaid care work.

The main sub-categories of unpaid care work are house work, care of children and care of adults and community activities. Pilot study showed that community activity is very less among the respondents, especially among women, hence it is omitted from the list; instead, water / fuel collection is incorporated due to its magnitude felt especially in settlement colony households. In India, economists do not practically include collection of fuel and water in their GDP calculation. Hence it is included as a sub category of unpaid care work in the present study. House work, collection of water / fuel, care of children and care of adults in the household are the main four sub-categories of unpaid care work. The 1993 SNA revision suggested that countries should develop a 'satellite accounts' that capture unpaid care excluded from the SNA and they are termed as Extended SNA (ESNA).

GENDER DISTRIBUTION OF UNPAID CARE WORK

In order to know the exact nature of unpaid care work it is necessary to know how it is distributed among men and women care providers. Table 1 shows that men spend an average of 0.5238 hours for unpaid care work, while women spend 9.5746 hours a day. While all women spend at least two hours for unpaid care

work, a large portion of men do not spend any time for that. This data itself shows that there is an unsymmetrical distribution of unpaid care work among the men and women care providers.

TABLE 1: MEAN TIME SPEND FOR UNPAID CARE WORK

Gender	Mean	N	Std. Deviation
Men	.5238	315	1.15457
Women	9.5746	315	3.03640
Total	5.0492	630	5.07738

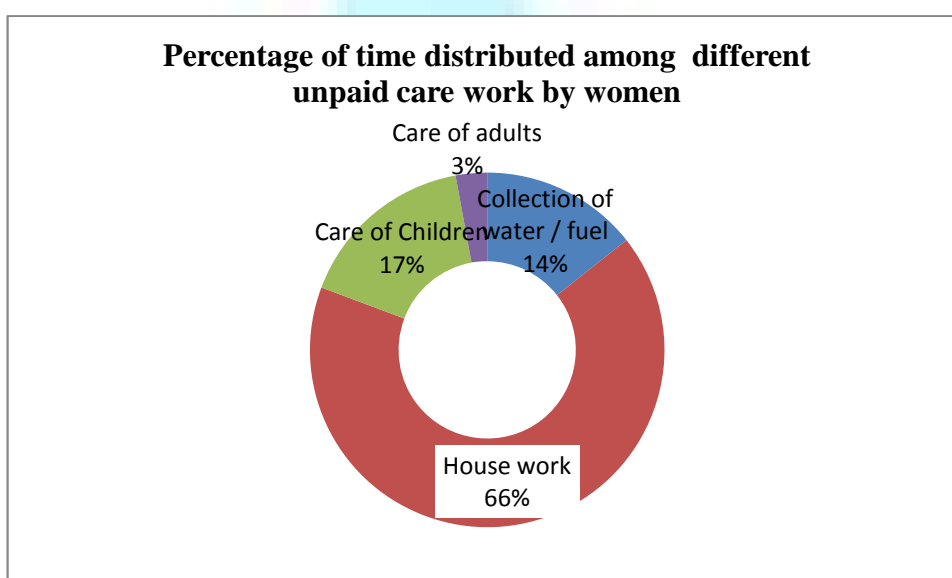
Source: Survey data

From ANOVA shows P value is less than 0.01, which means that the difference is highly statistically significant. Women spend much more time for unpaid care work than men. All over the world women does more unpaid care work than men. This is seen in the study area also. Yet there are high differences in the duration of unpaid care work. Even though human development achievements of Kerala economy is in par with advanced nations, in the study area, it is found that women spend a greater portion of their day time for unpaid care work. However men spend only a fraction of their time for care work. It might be due to the fact that the society is rooted in strong patriarchal structure and the prevalence of gender role is so strong in the society.

CATEGORIES OF UNPAID CARE WORK

Unpaid care work can be of either direct personal care or indirect care work. Direct care work consists of care of children and the care of adults, while indirect care work refers to the collection of fuel/water and the house work. Another important characteristic of unpaid care work is that there are differences between men and women in the distribution of direct and indirect unpaid care work. It is found that women spend 66.34 per cent of their total unpaid care work time for house work, 14.38 per cent for collection of water/fuel, 16.41 per cent for care of children, and 2.85 per cent for care of adults. It is presented in the Figure 1. With respect to men, as presented in Figure 2, they spend only 20 per cent of their time for house work, but they spend 42 per cent of their time for collection of fuel/water, 30 per cent of their unpaid care work time for care of children and 8 per cent for care of adults.

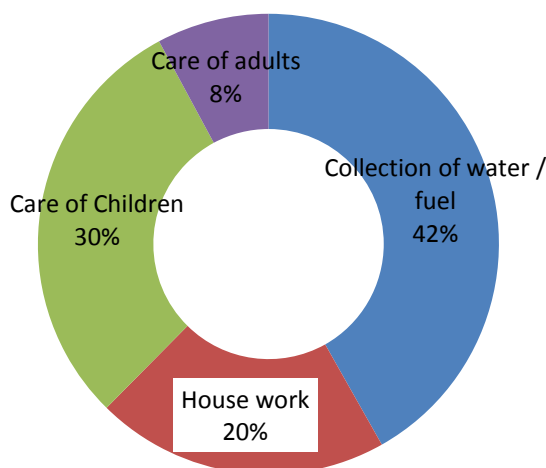
FIGURE 1: PER CENTAGE OF TIME DISTRIBUTED AMONG THE SUB-CATEGORIES OF UNPAID CARE WORK BY WOMEN



Source: Survey data

FIGURE 2

Percentage of time distributed among different unpaid care work by men



Source: Survey data

Thus women spend 80 per cent and men spend only 62 per cent of their total unpaid care work time for indirect care work. But regarding direct care work, women spend only 20 per cent of their time for it, but men spend 38 per cent. This is a characteristic of unpaid care work in developing nations that the time spent on indirect care work is much higher than that of direct care work. It might be due to inadequate public provision of key infrastructure facilities and labour saving technologies.

HOUSE WORK/HOUSEHOLD MAINTENANCE

In all developing nations the main component of unpaid care work is house work. Routine house work includes tasks like cooking, washing, cleaning and all other home maintenance. House work accounts for 66.34 per cent of women's total time spent on unpaid care work. Women spend an average of 6.35 hours per day on house work while, men devote only 0.11 hours for it. Participation rate of men and women care providers in house work is estimated in the Table 2.

TABLE 2: HOUSE WORK

Number of hours	Women		Men	
	Frequency	Per cent	Frequency	Per cent
0	2	0.6	300	95.2
2	2	0.6	7	2.2
3	9	2.9	3	1.0
4	41	13	2	0.6
5	53	16.8	3	1.0
6	54	17.1	0	0
7	64	20.3	0	0
8	52	16.5	0	0
9	29	9.2	0	0
10	7	2.2	0	0
11	2	0.6	0	0
Total	315	100	315	100

Source: Survey data

It is found that all women (99.37 per cent) except two are engaged in household maintenance, while 300 men (95.2 per cent) do not do any house work. Per day, 95.87 per cent of women do house work for more than four hours, at the same time only 1.6 per cent of men are engaged in house work for more or less the same time. No men does house work for more than six hours, while 66.03 per cent of women spend more than six hours for house work. The Table makes it clear that the unpaid care work is distributed highly skewed towards women.

House work is the main reason for the women not engaging in any paid work. 46.6 per cent of the women responded that their main reason for not going to paid work is lack of time due to house work (Figure 6.5). It is observed that women in the poor household spend more hours for house work. It might be due to lack of income, as, most women in the poor families are either unemployed or engage in part time paid work and their income is insufficient to purchase home technology as they give priority to their children's educational and nutritional needs.

COLLECTION OF WATER/FUEL

Among different subcategories of unpaid care work, women tend to spend 14.38 per cent of total time for collection of water and fuel. In the Table 3 it is observed that 48 per cent of women do at least one hour of water collection a day, while, 86.7 per cent of men do not do any work related to water collection. A few women are found to spend even more than 5 hours a day for water collection.

TABLE 3: COLLECTION OF WATER AND FUEL

Number of Hours	Women		Men	
	Frequency	Per cent	Frequency	Per cent
0	164	52.1	273	86.7
1	16	5.1	21	6.7
2	50	15.9	16	5.1
3	42	13.3	4	1.3
4	32	10.2	1	0.3
5	6	1.9	0	0
6	3	1	0	0
7	1	0.3	0	0
9	1	0.3	0	0
Total	315	100	315	100

Source: Survey data

It is observed that women residing in settlement colonies have to walk long distance to collect water. They opined that they are spending at least 3- 4 hours to collect water and it adversely affects their physical and emotional health. The drudgery of water collection is high during summer season and it adds much to their unpaid care work burden. It implies that the government must provide necessary infrastructure facilities like public provision of free water supply to all the needy people especially the vulnerable sections of the society, such that it may enable them to reduce their care burden and engage in other productive activities.

CARE OF CHILDREN

Child care involves activities like meeting the basic needs of children, educational and recreational child care and travel related activities. From the Table 4 it can be observed that 89.2 per cent of men do not do any work related to care of children while only 46 per cent of women are not engaging in care of children. The possible reason is that young children may be absent in these households. 114 (36 per cent) households have only adult members in their families. It is found that women spend only 16.41 per cent of their total unpaid care work time for care of children. The low amount of time spent for care of children may be due to the fact that child care is such an activity often performed simultaneously with other house work, so women do not consider it as a work and often failed to report the exact number of hours they spend for this activity. Another reason might be due to the perception of women that it is not a 'work' and as is performed simultaneously with other domestic work and women regard this as a labour of love.

TABLE 4: CARE OF CHILDREN

Number of Hours	Women		Men	
	Frequency	Per cent	Frequency	Per cent
0	145	46	281	89.2
1	33	10.5	25	7.9
2	44	14	6	1.9
3	41	13	1	0.3
4	23	7.3	1	0.3
5	18	5.7	1	0.3
6	9	2.9	0	0
7	1	0.3	0	0
8	1	0.3	0	0
Total	315	100	315	100

Source: Survey data

Not only the total amount of time devoted for child care but also the kind of child care activities differ between men and women care givers. From the discussions it is found that majority of the women devote most of their time for physical care, such as feeding, dressing and bathing etc. and supervising, helping them in doing school home work and the like; while men spend most of their time playing with their children.

Also, when the reason for unemployment is analysed, 28.64 per cent of the unemployed women responded that the child care is the main reason for not engaging in paid work. So child care work is a determinant of the women's labour force status too.

CARE OF ADULTS

Similar to childcare, the time spent for the care of adults is difficult to measure accurately. Women spend an average of 0.2730 hour a day for old care, but men spend only, 0.413 hours. It is found that women spend 2.85per cent of their total unpaid care work time for the care of adults, while men spend 8 per cent of their total unpaid care time for this category.

TABLE 5: CARE OF ADULTS

Number of Hours	Women		Men	
	Frequency	Per cent	Frequency	Per cent
0	258	81.9	306	97.1
1	35	11.1	6	1.9
2	17	5.4	2	.6
3	4	1.3	1	.3
5	1	0.3	0	.0
Total	315	100	315	100

Source: Survey data

Table 5 indicates that 97.1% of men do not engage in any adult care while 81.9% of women also do not have any adult care. The reason is that in 258 (81.9 per cent) households elderly persons are absent. In the study area 57 out of 315 households have elderly persons in their family. In all 57 families women devote time for elderly care work that 35 women devote one hour, 17 women spend 2 hours and 4 women spend 3 hours and one woman spend 5 hours a day for this. While among the 57 households have elderly persons, only 6 men spend one hour and 2 men spend two hours and one man spend three hours for elderly care work. Thus women spend on average more time for the care of adults than men, but the difference is much smaller when compared to childcare. From the demographic data it is evident that the number of elderly people are increasing, which points to an increase in the elderly care demands in the near future.

REGION WISE DISTRIBUTION OF UNPAID CARE WORK

The nature of unpaid care work may differ in line with the location of household too. Analyses of the region wise distribution of time spent on unpaid care work by men and women care providers is shown in Table 6. It can be seen that there is a slight difference in the time spent on unpaid care work by men and women by region.

TABLE 6: REGION WISE DISTRIBUTION OF UNPAID CARE WORK

Region		Mean	N	Std. Deviation
North	Men	.7183	71	1.25565
	Women	10.0986	71	3.32589
	Total	5.4085	142	5.33177
East	Men	.4634	82	.98376
	Women	9.3659	82	3.07725
	Total	4.9146	164	5.01214
South	Men	.5867	75	1.30584
	Women	9.7467	75	2.86683
	Total	5.1667	150	5.10351
West	Men	.3678	87	1.06874
	Women	9.1954	87	2.86859
	Total	4.7816	174	4.92469
Total	Men	.5238	315	1.15457
	Women	9.5746	315	3.03640
	Total	5.0492	630	5.07738

Source: Survey data

It is found that women and men primary care providers of northern region do more work than other regions (women-10.0986, men- 0.71831 hours). It is followed by Southern region (women-9.7467, men- 0.5866 hours), Eastern region (women-9.3659, men- 0.4634 hours) and Western region (women-9.1954, men- 0.367816 hours). This regional disparity in unpaid care work can be attributed to the unequal distribution of resources like water, public provision of infrastructure facilities etc

The result of ANOVA reveals that the P value is greater than 0.01. So there is no statistically significant difference between the unpaid care work of men and women in different regions of the Panchayat.

SUMMARY

The study found that the nature and characteristics of unpaid care work of women is quite different from that of men. Women spend an average of 9.5746 hours and men 0.5238 hours a day for unpaid care work. It is found that 230(73 per cent) out of 315 men do not spend any time for unpaid care work, were as

all women do some kind of unpaid care work and 95.87 per cent of women spend more than four hours for house work. Women spend 80 per cent and men spend 62 per cent of their total unpaid care work time for indirect care work. While women spend only 20 per cent and men spend 38 per cent of their unpaid care work time for direct care work.

Among different components of unpaid care work, women spend 66 per cent of their total unpaid care work time for house work, where as men spend only 20 per cent. 14 per cent, for collection of fuel/water by women and men spend 42 per cent. For the care of children, women spend 17 per cent and men spend 30 per cent of their care work time. Concerning care of adults, women spend 3 per cent and men spend 8 per cent of their total unpaid care work time. Thus there are gender differences in time spent on all categories of unpaid care work. Even though there is only slight difference in the mean time spent on total unpaid care work among regions, there are regional differences, which women of north region spend much time for the collection of fuel/water category of unpaid care work.

CONCLUSION

Kerala is a state with Human Development Index which is par with the western countries. But the burden of unpaid care work is asymmetrically fixed on the shoulders of women due to the cultural and social taboos we maintain through generations. This results in a clear violation of human rights for the women primary care providers, who have to work for their livelihood and work again at home for the care of the family. Unfortunately, it is not properly recognized. Unless it is recognized, due justice cannot be offered to this oppressed and marginalized section of the society. Recognition of this unpaid care work helps in the formulation of new gender sensitive policies, which help to reduce the burden and magnitude of unpaid care work.

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