

Global Agendas, Local Norms:

Mobilizing around Unpaid Care and Domestic Work in Asia

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ABSTRACT

This paper explores the articulation and framing of unpaid care work and the mobilisation around it at two spatial scales – the global and national - the latter focusing on three of the largest and most diverse countries in Asia - India, China, and Indonesia. While the concept of unpaid care work has received considerable attention in international development discourse, it is rarely found in feminist mobilization and advocacy across these countries. The paper asks why this issue remains largely invisible and excluded from women’s political agendas, but also explores how it is framed, if included. While most organizations do recognize women’s double burden, and the importance of domestic labour, they do not consider ‘unpaid care’ work as a legitimate political demand around which to mobilize. Rather, this is framed, if at all, as part of other political agendas, such as the rights of the elderly (in China), the rights to social protection, especially child care and maternity entitlements (in India), or the right to equal opportunities within marriage (in Indonesia). The paper analyses the differences in framing, the conceptualisation of gender equality embedded therein, and the implications for policy.

Keywords: Unpaid care, invisible agendas, women’s mobilization, India, Indonesia, China

INTRODUCTION

Unpaid care work is now on the global development agenda, with the Sustainable Development Goal (SDG) on gender equality encouraging states to ‘recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate’ (Goal 5.4)¹.

While this formulation may not be perfect, and allows nation-states the possibility of opting out, it is the result of a long history of debate, discussion, mobilization and advocacy by feminist academics and activists around issues of domestic work, care work, the care economy, social reproduction and unpaid/unremunerated work, since the early 1970s. Notwithstanding this recent global policy recognition, the issue of unpaid care remains contested and differently articulated across geographical and socio-cultural locations. Multiple strands of thinking persist, from seeing unpaid care work as the major obstacle to women’s equal enjoyment of human rights (Sepúlveda, 2013)², a form of ‘social investment’ that would both facilitate women’s labour force contributions, and child wellbeing (Williams, 2010), a legitimate form of work, not linked to women’s social roles (Federici, 1975), to a fundamental questioning of the gender order and the organisation of labour within it. These framings reflect different normative constructions of gender equality itself – from the liberal tradition of achieving equality with men through equal opportunities, to the radical tradition of seeking recognition and affirmation of ‘difference’ from the male norm, to a post-modern vision of transforming established gender norms. At a more practical level, these ideological positions and normative frames have implications for the social construction of values and obligations across time and place, including the relative roles of institutions of the market, the family and the state (Razavi, 2007; Folbre, 1995).

¹ <http://www.un.org/sustainabledevelopment/gender-equality/> (accessed on 15 January 2016).

² The Report of the Special Rapporteur on extreme poverty and human rights stated: ‘Women serve as unpaid alternative care providers when public services are not adequately funded, increasing their time burden and limiting their opportunities to engage in paid work, education, training or leisure, while also negatively affecting their enjoyment of rights such as health, education, participation and social security’ (Sepúlveda, 2013: 12).

This paper, based both on primary research undertaken as part of the UNRISD project ‘When and Why do States Respond to Women’s Claims? Understanding Gender-Egalitarian Policy Change in Asia’,³ and a review of available literature, including laws, policies and civil society texts, explores the articulation and framing of unpaid care and domestic work and the mobilization around it at two spatial scales – globally, and across three of the largest and most diverse countries in Asia - China, India, and Indonesia. Drawing on a critical frame analysis methodology (Dombos et al. 2012), the paper seeks to compare the diversity of ways in which this issue is problematized, framed and solutions offered, by systematically exploring the nature of actors involved in framing the issue in the policy domain across countries and scales, their ideologies, and visions for action.

Such analysis can help explain why while most women’s organizations in the selected Asian countries do recognize women’s double burden, they do not consider unpaid care and domestic work in itself as a legitimate political demand around which to mobilize; rather, they prefer to couch their claims within other political agendas, such as the rights of the child/elderly, the right to social protection, or the equitable distribution of roles and responsibilities within marriage. Interestingly, the claims have focused on different institutional arenas in the three countries: state social security provision, in particular, maternity entitlements and the provision of childcare services in India; the regulation of private provisioning of elderly care services (market-based) in China, and the reform of the marriage law which legitimises the unequal distribution of domestic and care labour at the household level in Indonesia. Are these conscious strategies deployed by the actors involved, keeping in mind political opportunities and possibilities, or do such framings dilute the central claim itself? The process of claims making around unpaid care is clearly complex, with intersections and overlaps between the claims of the care givers (i.e., women) and care recipients (i.e. children, elderly, and adult men); responsibilities of different social institutions in ensuring human wellbeing, and strong intra-household gender norms, which see care and domestic work primarily as women’s responsibility.

The starting premise of this paper is that the concept of unpaid care and domestic work, as a key element of gender equality, is open to interpretation and contestation by different actors.

³ Using a cross-country comparative approach, the research was conducted in partnership with feminist research organizations in China, India, and Indonesia (Chigateri et al., 2016; Eddyono et al., 2016; Du et al., 2016 forthcoming).

Nancy Fraser's (1989) ideas around the 'politics of needs' provide a useful framework for analysing the processes of framing and contesting claims around unpaid care. Her discursive approach to policy and politics, identifies three moments: 'the first is the struggle to establish or deny the political status of a given need... the second is the struggle over the interpretation of the need, the struggle for the power to define it... the third moment is the struggle over the satisfaction of the need, the struggle to secure or withhold provision' (1989: 164). This process of 'establishing' and 'interpreting' a needs-claim as legitimate is crucial for ensuring both the redistribution of goods and services, in a context of limited resources, and the recognition of dignity, respect and personhood. In such a framing of social justice, economic and cultural justice are mutually intertwined and implicated (Fraser, 1997: 15).

This process, however, is not straightforward, as late capitalist societies are highly unequal in terms of access to resources, services, status and power, based on lines of class, gender, race and ethnicity. Fraser's attention to social inequality and power raises a third important issue, alongside redistribution and recognition, that of 'voice' or representation. Representation 'tells us not only who can make claims for redistribution and recognition, but also how such claims are to be mooted and adjudicated' (2009: 17). Through a focus on representation, it is possible to explore the processes of claims making around unpaid care and domestic work to identify whose voices are included/excluded within such processes, and how effectively they channel their claims within the policy space (Lister, 2005, Cornwall, 2003). Indeed, the policy space as the terrain of social interaction among a multitude of policy actors, is itself embedded in power relations, with specific positions being articulated in the process of negotiating diverse interests, legitimizing some as 'authoritative', and important to address through policy interventions (Gaventa, 2006, Bergqvist et al. 2013, Beland, 2005).

Engagement with this process is critical, as not just does it have implications for material entitlements (needs satisfaction in Fraser's terms), but also raises political and theoretical debates on how citizenship is constructed – does it recognise universal rights (irrespective of gender), is it wage-linked (reflecting an implicit preference for men and justifying women's struggles for achieving 'equality' as 'sameness' to men), or is it based on a social construction of 'needs'. This last, according to Fraser (1997: 134), has its ideological underpinnings in notions of 'dependency', which within the contemporary welfare state, are increasingly feminized, racialized, individualized and stigmatised as an undesirable condition and a drain on state resources. A history of structural inequality, relations of domination and

subordination, are missing from this needs-based discourse (Eyben, 2012; Rao, 2008: 258). Within social and development policy, those constructed as the ‘deserving poor’ or ‘legitimate dependents’ are then the very poor, disabled, children and the elderly. In China, institutional elder care through state welfare has been restricted to the ‘*three no’s*’ – people with no children, no income, and no relatives (Feng et al., 2012). They are seen to lack agency, and often treated with a lack of dignity and respect.

In the next section, the conceptual debates on unpaid care work and the claims it has generated in the global policy arena are reviewed. Constructing such an ‘issue history’ – a systematic review of the policy process, to identify when and how the issue appeared on the political agenda, who contributed to it, how it was framed, and the strategies that were used (Dombos et al., 2012) – is critical for contextualising the debate in the selected case study countries, with their varying geographies, governance systems, economic structures and social relations. The paper concludes with some reflections on mobilizations or their absence in the case of unpaid care and domestic work – its framing as a welfare/needs rather than rights issue, the trade-offs between individual interests and shared values, and the intersecting influences of class and gender.

CONCEPTUALISING UNPAID CARE: DISCOURSES AND THEIR POLICY TRANSLATION IN THE GLOBAL ARENA

Discussions around unpaid care and domestic work first emerged in the late 1960s-early 1970s in what has been called the ‘domestic labour debate’. While domestic labour is central to the reproduction of the labour force (now used in the social investment logic), social reproduction, and indeed human or biological reproduction, its association with women within the sexual division of labour, and its invisibility and naturalization in the private sphere of the home, has led both to the devaluation of unpaid care work as ‘work’, and the subordination of women, responsible for the performance of this work (Edholm et al., 1978). The ‘Wages for Housework Campaign’ in Europe in the 1970s demanded wages as compensation for women’s unpaid domestic and care work. It sought to ensure women’s autonomy not by redistributing work, but emphasising ‘difference’, and seeking recognition for domestic work as a legitimate economic activity (Federici, 1975).

While criticized on several counts – that women are seen to constitute a ‘class’ of people subordinated by capitalism, the neglect of the relational and emotional dimensions of child-rearing and elderly care, or indeed its largely materialistic approach to unpaid ‘domestic’ work (Esquivel, 2013; Gardiner, 1997; Hochschild, 1983; Molyneux, 1979), the domestic labour debate did make important contributions to the present framing of unpaid care work. It questioned the normalization of the sexual division of labour that sees domestic labour as a ‘natural’ responsibility of women, and pointed to the ways in which it is socially constructed and (de)valued. Measuring, valuing and making visible reproductive and care work performed in the domestic domain within national accounting systems became a priority claim (Benería, 1979). Since the early 1980s, using both large datasets and new empirical research, feminist economists have systematically pointed to the crucial role of domestic work for the ‘functioning of the economic system’ (Beneria and Sen, 1981), as a ‘shock-absorber’ in times of economic crisis (Elson, 1991) and more generally, the ways in which women’s unpaid work underpins and facilitates engagement with the ‘productive’ economy, for both the present and future labour force (c.f Dixon-Mueller, 1985, Jain and Chand, 1982, Sen and Sen, 1985).

The first formal global recognition of unpaid care and domestic work came at the fourth International Women’s Conference, 1995, in Beijing. Strategic objective H.3 of the Beijing Platform for Action invites countries to: ‘Develop a more comprehensive knowledge of all forms of work and employment by : i) Improving data collection on the unremunerated work which is already included in the United Nations System of National Accounts [...]; iii) Developing methods for assessing the value, in quantitative terms, of unremunerated work that is outside national accounts, such as caring for dependents and preparing food..., with a view to recognizing the economic contribution of women and making visible the unequal distribution of remunerated and unremunerated work between women and men’⁴.

The Beijing Declaration led to a push to collect data through time-use surveys and develop alternate modelling frameworks to account fully for women’s work (Benería, 2003; Folbre, 2006; Hirway, 2010). Several countries including India and China developed time use surveys in the late 1990s; and efforts were made to quantify unpaid care and domestic work

⁴ <http://www.unece.org/fileadmin/DAM/stats/gender/web/pdfdocs/conference4.pdf> (accessed on 12 January 2016).

in monetary terms⁵. While the underpinning materialist logic ignored the emotional and subjective dimensions of the quality of care, nevertheless, it is the persistent effort to generate evidence in relation to the contribution of women's unpaid work (both time and money) to the GDP and human wellbeing that has led to the recognition of the importance of 'unpaid care work' in global policy agendas today.

Following Beijing, there has been an effort to nuance the debate to go beyond counting the amount of time and labour spent on unpaid care and domestic work, to also take into account the motivation and the meaning of caring labour. Four sets of issues have been put on the table over the past two decades – by feminist economists, but also a wider group of actors including social scientists, those interested in social policy issues, educationists and child rights activists, as well as social movements including grassroots feminist organisations.

The first issue relates to motivation. Nancy Folbre discusses three possible motives for women – altruism, long-run reciprocity, and the fulfilment of obligation or responsibility. There is clearly an emotional and relational dimension to care, it is the 'labour undertaken out of affection or a sense of responsibility for other people, with no expectation of immediate pecuniary rewards' (Folbre, 1995: 75-76). However, caring for others does not necessarily imply the lack of self-interest, but could be mediated by expectations of reciprocity in the long-run. Son preference in India, for instance, has often been attributed to mothers' expectations that their sons will look after them when they are old (Pande and Astone, 2007), though this varies across social and regional contexts. A responsibility or obligation, however, could be more coercive, as it is a socially constructed value, which women may find hard to avoid.

The second issue relates to defining the content of unpaid care work. Clearly, it is more than a set of 'measurable' activities; it requires continuous presence, especially in the case of a young child, and a caring relationship (Swaminathan, 2004). Even the activities can be differentiated into the 'direct' care of persons, a process involving 'personal and emotional engagement' (Folbre, 2006: 187), and housework, often a precondition for the provision of direct care (Razavi, 2007; Esquivel, 2013). Housework or 'indirect care', both time and

⁵ Dong and An (2015) calculate that unpaid care work accounted for between 25-32 per cent of China's GDP, based on different methods of calculation.

labour intensive in the absence of public provisioning, can be more easily transferred to the paid economy, especially by women in middle and upper class households. There is clearly a class and locational dimension to this element of care work, with poor, rural women, likely to face the largest ‘care deficits’ (Papanek, 1989). It is perhaps the prioritisation of direct care in the international discourse, rather than domestic work and other forms of non-market work including subsistence production, which has marginalized it from the political agendas in the study countries. It is important then to disaggregate the term ‘unpaid care’, distinguishing between different activities and forms of care, in relation ‘to the market, characteristics of the labour process, and types of beneficiaries’ (Folbre, 2006: 187).

A third important nuance relates to the costs of providing care, in terms of time, energy, and lost opportunities, and the potential rewards, whether in terms of stronger family ties or higher quality services (Folbre, 1994, 2006). This raises, however, the feminist dilemma – of ‘prioritizing equality with men’ through market processes, ‘revaluing the ways that women are different from men’ (Folbre, 1995: 84), or then problematizing the gendered world itself and challenging the male norm (Verloo and Lombardo, 2012). The choice is between reducing, maintaining, or challenging the meaning of women’s caring behaviour. It questions how citizenship is constructed for women: is it as workers, commanding equal wages to men in the markets, or is it as wives and mothers, with states providing support to women within the mainstream male breadwinner – female home-maker model (Williams, 2010)? In some ways, this is also a debate between ‘social investment’ to enable women’s participation in labour markets, welfare/needs-based entitlements, and ‘social justice’ that pays attention to notions of interdependence in human relationships, wellbeing, and work/care balance (Ibid.; Fraser, 1997). What emerges from this discussion of costs and rewards is that women’s claims for recognition of unpaid care and domestic work and support in its provision are intimately linked to their struggles against the cultural and social devaluation of such work. These claims are distinct from the more functional demands for economic justice or redistribution, emerging from their inability to engage with labour markets on equal terms due to the burdens of unpaid care.

The fourth issue is a practical one – Who provides the care, where does care take place, and who pays for that care? Can the responsibility for providing care be shared and distributed across different social institutions – families, communities, markets and the State? As Razavi (2010: 2) argues, these social institutions, constituting the ‘care diamond’, ‘interact in

complex ways, and the boundaries between them are neither clear-cut nor static'. The state is central to the care diamond and influences how care is organized among the other three institutions: it has the regulatory potential to restructure the provision of care, rebalancing the unequal burden of unpaid work that falls disproportionately on women, particularly poor women (ibid.). The state, however, is not a unified entity, and its influence varies across different systems of governance, as illustrated in the next section.

Parallel to these discussions seeking to nuance the debate around the meanings of unpaid care in different political and social contexts, and to some extent working out the details in terms of responsibility, activity, target group, motivation, budget required – all central for effective policy action - the advocacy around measuring and valuing women's unpaid work, as stated in the Beijing Platform for Action, continued apace. With a focus on alleviating women's work burdens and improving wellbeing, the '3Rs' framework, namely, the call to 'reduce, recognize and redistribute' the burden of unpaid care work, almost exclusively on women, was proposed (Elson, 2008). The 53rd Commission on the Status of Women (CSW), 2009, made the equal sharing of responsibilities, including care-giving, between women and men, its priority theme.

Though limited, this success was celebrated as acknowledging some headway in recognising women's contributions to unpaid care globally. The final CSW document resulted from negotiations between several actors - feminist economists and academics had prepared the ground for the 3Rs framework through research and evidence building from the early 1980s; religious groups supported a more equitable sharing and redistribution of unpaid care work between men and women within households as a way to preserve the centrality of the family (Bedford, 2010). The role of the state in providing care services was introduced, though with qualifications, applying for instance in contexts with high prevalence of HIV/AIDS, or the 'three no's' as in the case of China mentioned earlier, those seen as 'legitimate' dependents. Women's organizations accepted this compromise, reflected again in the recent SDG 5.4, despite their preference for a move beyond households to the public provisioning of care (Esquivel, 2008). Reduction, however, continues to be largely linked to class position, and the ability to buy goods and services in the market, at least in low income countries where public infrastructure and services are not well developed, or have declined, as in the case study countries discussed next.

CONTEXTUAL CHANGES AND THEIR IMPLICATIONS FOR CARE PROVISIONING

While there has been much progress in the global discourse and policy agenda on unpaid care work, this seems to be very patchy and uneven, at both the discursive and policy levels, across the countries studied. While women's work burdens and drudgery are not invisible any more, they continue to be taken for granted in policy, be it through the notion of 'filial piety' in China (Cook and Dong, 2011), 'gendered familialism' in India (Palriwala and Neetha, 2011), and the normalization of the sexual division of labour legally through the Marriage Law in Indonesia (Eddyono et al., 2016).

The Indian care regime, according to Palriwala and Neetha (2011: 1049), is 'fuzzy and rests on a series of contradictions'. Women are concentrated in low-paid, home-based, piece-rated work (Neetha, 2010; Rao, 2014), and while contributing to household survival and economic growth, this has both enhanced socio-economic inequalities and strengthened the male breadwinner model. Women from poor, landless households end up with double work burdens, those with some resources, focus on activities around the house including care of livestock and kitchen gardens, and only those with very young children engage exclusively in domestic and care work (Sen and Sen, 1985). Secondly, social policies in India largely constitute a residual welfare regime, targeted at 'deserving' social groups (Palriwala and Neetha, 2011), the 'legitimate' dependents, in Fraser's terms. Being discretionary and non-universal, they end up excluding large numbers of people, especially poor women.

The impacts of such omissions and exclusions are visible in the worsening nutritional and health status of women and children belonging to 'low-status' social groups in India (IIPS and MI, 2007). The 86th Constitutional Amendment, 2002, guaranteed the Right to Education, but only to children from six-fourteen years of age, leaving the care of the young child to the family. While the better off have shifted to private provisioning, in the case of the poor, especially in villages, given the non-existence of public crèches and day-care for children, large care deficits are visible (Neetha and Palriwala, 2008). Despite a rhetoric of women's empowerment, the assumption that families, and women within them, will continue to provide care remains strongly embedded in the policy domain – women who don't are the exception rather than the norm (Palriwala and Neetha, 2011).

China's rapid transition from a centrally planned to a market economy over the past three decades has been marked by the state's withdrawal from the responsibility for social

reproduction and care. Following Engels' (1972), the Chinese State had viewed women's emancipation as contingent on their full participation in the labour force, alongside a socialisation of domestic labour (Croll, 1983). Although the provision of unpaid care, both for children and the elderly, remained primarily women's responsibility, equal entitlements as men to a range of services and benefits, including maternity leave, child care, health care and pensions, meant that physical drudgery and emotional stress were alleviated, and market 'penalties' for women's care-giving roles minimized (Cook and Dong, 2011: 948-9). Post-reform, state and employer support for care provision in the form of subsidized child care or paid maternity leave has declined (Zhan, 2002). In rural areas, the closure of collective farms has made women engage with informal or precarious forms of employment (Maurer-Fazio et al., 2011), or migrate to urban areas and export zones, leaving behind both elderly parents and young children (Zhou et al., 2014). The erosion of social services and the privatization of care services have coincided with a re-emergence of traditional patriarchal values and norms, notions of filial piety within a patrilineal family system, enhancing social pressures on women to deal with care responsibilities as unpaid workers, in addition to paid employment (Entwisle and Henderson, 2000; Cook and Dong, 2011; Maurer-Fazio et al., 2011).

In Indonesia, cultural and religious differences, alongside rural-urban disparities, shape the nature of unpaid domestic and care work (Zuryani and Leahy, 2006). In urban areas, nuclear households, especially amongst the middle and upper classes, rely less on unpaid care contributions from relatives and neighbours, and tend to employ domestic and care workers and/or use public and private facilities, especially for child care (Eddyono et al., 2016). Public care facilities are, however, more or less restricted to government ministries in the major cities, and even these are not adequate in number or quality. In the rural areas, the pressure for earning has increased on women as a result of the economic crisis of 1997-99, pushing many of them into low paid, informal sector work, often making them migrate to urban areas or overseas, as in the case of China⁶. Out of necessity, care responsibilities are being shared by other family members - men, but also grandparents, and in some high out-migration areas, community initiatives are being explored.

⁶ Frankenberg et al. (1999 cited in Elson, 2002) found that the percentage of the labour force employed in paid work in 1997 and 1998 increased by 1 per cent for women (against a decrease of 1 per cent for men). If unpaid work is included, the rate increased by 7 per cent for women (against 1.3 per cent for men).

In all the three countries, rather than playing a central and regulatory role, the state as a care provider has either withdrawn or remained insignificant. While a holistic concept of unpaid care and domestic work as in the global discourse has largely been missing from policy debates (Palriwala and Neetha, 2011; Cook and Dong, 2011; Eddyono et al., 2016; Nesbitt-Ahmed et al., 2015), mobilizations on particular dimensions are visible. Specific examples are discussed next.

MOBILIZATIONS ON THE GROUND: DISCOURSES, ACTORS AND THEIR STRATEGIES

Social Security and Care: the case of India

Historically, in India, state policy has dealt with unpaid care through piecemeal legislation and policies around maternity entitlements and the provisioning of child care services. Given that a large majority of women are engaged in informal employment, the major modalities for provision include the Integrated Child Development Services (ICDS) aimed at children under six years of age, and two conditional cash transfer programmes targeted at improving maternal survival through institutional deliveries (Janani Suraksha Yojana (JSY), 2005) and compensating women for the loss of wages (Indira Gandhi Matritva Sahayog Yojana (IGMSY), 2010) (Chigateri et al., 2016). While ICDS has been successful in its campaigns for immunisation and nutrition supplementation, it has failed to provide care and educational services for the young child in most parts of the country.

Even these limited gains, however, are a result of women's mobilization over at least three decades. With inputs from both feminist academics/economists and grassroots women, in 1988, *Shramshakti*, the report of the National Commission on Self Employed Women and Women in the Informal Sector, included a key recommendation on recognizing the right of working women to childcare (GoI, 1988). The following year, the Forum for Crèches and Childcare Services (FORCES), a national network of women's organizations, trade unions, NGOs, academics, lawyers, doctors, and individuals concerned with issues of childcare confronting women working in the unorganized sector, was formed. Several member organizations have been involved both in advocacy and the provision of childcare (Chigateri, 2013), and while providing innovative models, they cannot satisfy the huge demand in the absence of state provisioning (Palriwala and Neetha, 2011).

The Indian time use survey (TUS), conducted post-Beijing, covering almost 20,000 households in six states in 1998-1999 (CSO, 2000; Neetha and Palriwala, 2008), confirmed the skewed sexual division of labour in both rural and urban areas, with unpaid care and domestic work primarily falling in women's domain; and poor households experiencing a severe care deficit. This enhanced the demand, according to one activist, 'to alleviate the burden of unpaid care' through a focus on maternity entitlements, that would enable the mothers of infants to exit paid work, at least temporarily, and provision of crèches in legally mandated worksites as those set up under the National Rural Employment Guarantee Act (NREGA). These demands got a fillip with the publication of the report of the National Commission on Enterprises in the Unorganized Sector, 2007, which demonstrated that 92 per cent of all workers and 96 per cent of women workers were involved in the unorganized sector (NCEUS, 2007).

While building on the earlier campaigns and work of FORCES, the mobilization now broadened to additionally include informal sector workers' organizations, women's groups, human rights and development organizations, as well as Dalit and Adivasi organizations (Chigateri et al., 2016). Demanding a legal framework, a consortium of thirty organizations from across the country came together to critically analyse and fine-tune the provisions of a draft bill on social security of workers in the unorganized sector developed by the Indian National Law Commission. Recognizing the interconnected nature of employment and social security, irrespective of the type of work (paid/unpaid, formal/informal) (Swaminathan, 2000), they initiated the campaign 'Social Security Now' with the purpose of pressurising the government to approve a comprehensive social security law (SSN, 2006). Their final declaration specifically stated: 'All women workers, paid and unpaid, need additional protective cover in the law for equal wages and service conditions, mechanisms for the prevention and redressal of sexual harassment, maternity benefits with leave, widow pension and legal aid. All women should be entitled to social security benefits as independent workers and not as dependents of male earning members' (Ibid: 3). In fact, one activist noted that 'it is because unpaid care work is categorised as reproductive and not productive that the battle is lost even before it is begun'.

A national working group was set up to coordinate the campaign, and by 2008, the campaign had articulated a universal vision of social security, irrespective of gender, caste, religion; but also one that was not linked to worker contributions. They recognized unpaid care and

domestic work as work that is entitled to social security from the state, dismantled the idea of women as dependents, and demanded maternity benefits as a right of women workers, and not just a requirement for ensuring children's wellbeing. The government passed the Unorganized Workers' Social Security Act in 2008 and established a National Social Security Board to regulate social security schemes including disability allowance, health and maternity benefits, and pensions, in 2009. The Act, however, excluded unpaid work from its purview. This was a disappointing outcome and the campaign soon lost steam.

Nevertheless, some claims relating to unpaid care work, such as demands for maternity entitlements as well as crèches/child care services, had been placed on the policy agenda. They were picked up by other mobilizations, such as the Right to Food campaign and the Alliance for Right to Early Childhood Care and Development (ECCD). The National Food Security Act, 2013 (NFSA) reiterated the provision of universal maternity entitlements, acknowledging its importance for improving both maternal and child nutrition and wellbeing. Yet, rather than linking the maternity benefit to the minimum wage applicable in particular states, 'to make it more equitable with what women in the organized sector receive as maternity benefits' (Swaminathan and Prasad, 2010: 23), the NFSA provides a standard amount of Rs 1,000 per month for six months. The demand for six months of compensation at minimum wage has been repeated by the Alliance, in its response to the draft of the National Maternity Benefit Act proposed by the Ministry of Labour. The amount offered under the present dispensation is not to be scoffed at, yet it demonstrates the ideology of 'gendered familialism' (Palriwala and Neetha, 2011), where not just is 'care' women's responsibility, but she is also only considered a secondary earner or 'household helper' (Rao, 2012).

While most of the women's groups and feminist activists interviewed in India as part of this research recognized the lack of mobilization on unpaid care work, they explained it in different ways. While some felt mobilizing on this issue was difficult as the 'gendered division of labour is deeply internalized and strikes at the heart of familial relationships', others analysed it in terms of the 'moral reluctance to monetize intimate relationships'. While trying to accommodate women's double burdens in their everyday practice by being sensitive to the times at which women were available, and accommodating children during rallies and demonstrations (Chigateri et al., 2016), they have yet been unable to articulate a strong political statement on unpaid care and domestic work which challenges the social organisation of labour that maintains and reproduces gender inequality.

Renegotiating the marital contract in Indonesia

In Indonesia, the focus has precisely been to dismantle the patriarchal gender relations in the family, though this demand is articulated and led by a relatively small group of feminist activists and pro-feminist men. It is also relatively recent, with unpaid care and domestic work emerging as an issue in public discourse only in the last five years. As more women are engaged in labour markets, both within the country and overseas, and kinship relations are harder to draw on, especially in urban contexts; unpaid care and domestic work is no longer a private or personal issue confronting women. Developing innovative strategies for managing and redistributing responsibilities has become essential for family survival and wellbeing (Eddyono et al., 2016).

In November 2014, the Vice President of the country, recognizing the problem of inadequate childcare, issued a statement about the need to reduce women's working hours, so they could give adequate attention to the upbringing of their children, fulfilling their roles as mothers. This statement raised a lot of debate. From a social justice and rights perspective, feminist activists and pro-feminist men's organizations, such as the New Men's Alliance, rejected this idea as gender biased, potentially discriminating against women in the workforce and reinforcing women's roles as carers. They argued that women have a right to choose to work either at home or outside, and both need to be recognized and supported (Eddyono et al., 2016). Research on unpaid care work, conducted by the SMERU Research Institute between 2012 and 2015, supported this position (Nesbitt-Ahmed et al., 2015). Most Ministries, however, supported the Vice President, as did Islamic organizations like the Unity of Islamic Ummah (PUI), reflecting state and religious positions that affirmed the recognition of difference, of women as 'natural' carers. In regions where women's role in the economy was central, however, representatives did argue for 'choice'.

As in India, here too feminist groups acknowledge women's double burdens, their role in both the paid and unpaid economies, but tend to accommodate it through internal work/family balance policies, instead of mobilizing around a transformative agenda. For instance, the Indonesian Human Rights Study and Advocacy Organization (ELSAM) grants parental leave to both female and male staff (one month in case of fathers); some organizations provide childcare facilities during training sessions; and a few Muslim women's organizations, such as Aisyiyah, run community-based childcare centres. Informal neighbourhood support groups, managed largely by unpaid or underpaid women workers,

remain important in the provision of childcare in most provinces. In some instances, there are also cultural deterrents, as amongst the matrilineal Minangkabau in West Pasaman, who see child care as a responsibility of the family, and the idea of paying for this remains socially and culturally unacceptable (Valentina, 2007 in Eddyono et al., 2016).

Little attention has been paid to institutional issues; the one exception being the mobilization questioning the division of labour at the household level. From 2004-2011, several women's organizations advocated for amendments to the Marriage Law No. 1/1974, which states that 'the husband is the head of the family and the wife is the home-maker'. This clause has been noted as discriminatory by the CEDAW Committee; it is also seen as out of date given the changing work participation rates (Hadiz and Eddyono, 2004), yet no action has been taken. This is partly a result of opposition from Islamic institutions, both political and non-political (Blackburn, 2008), as well as a lack of consensus amongst women's organizations themselves (Eddyono et al., 2016).

While legal reform has not been successful, there have been efforts in a few regencies such as East Lombok to socialize domestic work through a programme called Aliansi Laki Laki Baru (ALB) or the New Men's Alliance. Founded in 2009 by the activist Nur Hasyim together with the Rifka Annisa (Women's Crisis Centre), their main strategy is to involve men in achieving gender equality (Hasyim, 2014). Male community organizers promote father's engagement in maternal and child care, and a more equal sharing of domestic and care responsibilities. Initially, this effort was challenged by religious and community leaders who assumed that the ALB would lead to a loss of self-esteem for husbands, turn women against their husbands, but also challenge some of the 'sacred values' in the household. However, this resistance is diminishing as new role models for men get established. Women still carry a heavier work burden, yet the movement is motivating couples to share at least some care and domestic work responsibilities (Eddyono et al., 2016), challenging patriarchal values stemming from customary and religious traditions (Hussey and Pilon, 2014).

Macro-level changes have catalysed the processes of mobilization and change. The Regency of Jember, for instance, has a large number of migrant women workers, leaving behind young children with husbands and other relatives. Care of these children depended on the regularity of remittances. Tanoker, an organization formed to address the emotional and physical needs of these children, saw them as 'social orphans', suffering neglect, and in need of care. With

the support of Migrant Care and the Australian government, they created a pilot project in three villages. Winning much acclaim nationally, the success of this intervention has led to policy action to socialize childcare at the Regency level (Eddyono et al., 2016). Yet given the nature of decentralised, multi-level governance in Indonesia, this gain need not necessarily be replicated in other regencies and provinces without their own struggles and advocacy (c.f Goetz and Jenkins, this issue).

Further, elderly care remains firmly in women's domain. As one respondent noted, 'Women have more patience to care. In most cases, the care of elderly parents is undertaken by women. If they live with the son, it is their daughter-in-law who will care for them. Providing care for parents is seen as a religious and cultural obligation'.

Elderly care in China: Mobilizing for Quality Regulations

In post-economic reform China, the care economy has not received much attention from the state; rather, care both for children and the elderly, emphasizes family responsibility alongside market provision. The demographic transition to an ageing society, what has been called the 'four-two-one' family structure (four grandparents, two parents and one child), due to rapidly declining fertility rates resulting from the one child policy introduced in 1979, and the increase in life expectancy, has enhanced the burden of elderly care on families, particularly women (Cook and Dong, 2011; Feng et al., 2012; Chen and Standing, 2007). Various laws, including the Marriage Law, 1950 (and its 2001 amendment), the Elderly Rights and Security Law, 1996, the Criminal Law, 1979, reinforce the moral obligation of children to take care of their parents (Zhang and Goza, 2006). Things are worse in rural areas where both women and men of working age migrate (Herd et al., 2010). When only men migrate, the women left behind are solely responsible for both child and elderly care, in addition to paid work (Qiao et al., 2015).

Policy attention to the issue of elderly care has increased since 1999, with the Beijing Conference giving an impetus to both the All China Women's Federation (ACWF), a national-level women's organisation, linked to the Party-State, and autonomous women's groups, to place new issues on the agenda. Under pressure to prioritise the interests of women over the Party (Howell, 1996), they have over the past two decades, emphasised issues of violence, sexual harassment, and discrimination in employment in the reform period. They were able 'to prevent the inclusion of a clause on phased employment for women in the tenth

five-year plan (2001-05), whereby women would remain at home full-time to take care of children and re-enter the labour market at a later stage' (Du, 2001: 13 quoted in Howell, 2003: 200).

Nevertheless, with ACWF seeing cuts in funding, pressure to downsize and not engage in confrontational advocacy, there is a reversal in the twelfth five year plan (2011-15), with the articulation of 'home-based care as the "basis", community-based services as "backing", and institutional care as "support"' (Feng et al., 2012: 2767). While drawing on the notion of filial piety, the state has tried through the Family Support Agreement to formalize the contract, albeit voluntary, between parents and their adult children (Chou, 2011). Daughters and daughters-in-law remain the main providers; the issue of unpaid care thus 'reprivatized' (Fraser, 1989). Hierarchies of locality, sex and education, work to make women appear more suitable for this task rather than political affairs and public engagement (Edwards, 2007). As a 'backing', community care services have been encouraged, such as the Starlight Programme between 2000-2005 or the more recent Virtual Elder Care Home, however, they remain restricted to urban areas, are poorly funded, and focus largely on the category of the 'Three No's' (Wu et al., 2005; Feng et al., 2012).

The practical difficulties involved in providing adequate care and making a living has led to the rapid growth of the private sector in the provision of elderly care since the 1990s, especially in urban centres (Song et al., 2014). A majority of those in private care homes are people with resources, those whose children can afford to pay; those receiving welfare support from the state form only a small proportion (16 per cent in Nanjing, 6 per cent in Tianjin in 2009-10) (Feng et al., 2012). At the same time, care provision, whether in community, private or state run institutions is mainly a job taken by rural, migrant women workers. They work long hours, receive poor wages, have no paid leave or employment benefits, and often suffer abuse (Wu et al., 2005; Hu, 2010).

Mobilizations by women's organizations, especially ACWF, have been unable to push back on the appropriation by the state and market forces of women's unpaid care work. They therefore now focus on the labour rights of care/domestic workers and the regulation of the private sector, supporting mobilisations led by the Beijing Migrant Women's Club, for instance, rather than directly challenging notions of filial piety and the lack of recognition of unpaid care work performed by women (Du et al., 2016 forthcoming). The evidence they

draw on comes largely from academic studies in the field of health provisioning, which have raised issues around quality of care (due to the absence of professional training), alongside the poor working conditions in these private facilities. The perspective is that of users of such facilities (rights to a professional, good quality service), and care-providers, in particular, migrant women, as ‘workers’, rather than the recognition of women’s rights (Wu et al., 2005; Hu, 2010; Feng et al., 2012; Song et al., 2014). While they have been successful in securing some regulation of the private elderly care sector in the 12th Plan, care-giving continues to be devalued, and care-givers, both paid and unpaid, still lack social and economic recognition.

TENTATIVE CONCLUSIONS: A LONG ROAD AHEAD

I started this paper with the objective of providing empirical evidence on the processes of framing, interpreting and contesting an issue, in this case, unpaid care and domestic work, as a legitimate ‘gender equality’ claim in the policy domain. In examining the diversity in the framing of the claim, the actors involved, their conceptualisations of gender equality and the implications of this for policy, several lessons emerge.

First, policy change, especially for gender equality, does not happen without strong mobilisation from the ground (Htun and Weldon, 2010). At the global level, a long process of evidence-building, in particular by feminist economists, who during the decade of the 2000s took on board critiques and nuances from other stakeholders around issues of motivation, content, rewards and responsibilities, has contributed to policy recognition for the 3Rs framework, as reflected in SDG 5.4, even though it comes with a clause allowing nation-states to opt out. In the Asian countries studied, while mobilisation has occurred, women’s organizations have not always prioritised or indeed led the agenda of recognition, reduction and redistribution of women’s unpaid care and domestic work. In India, child rights activists and social movements demanding broad-based social security entitlements have taken the lead; in China it has been health professionals and feminist academics. In Indonesia it has been a community-based response to emergent livelihood challenges. The outcomes of mobilisation then are not necessarily similar or predictable, they vary across scales of governance and across contexts, reflecting differences in framing ideologies, the motivation of actors and the spaces for contestation.

Despite global recognition for the 3R's, why do feminist activists in these countries frame the issue differently? Processes of contestation and interpretation are central to placing any issue on the policy agenda, and these involve a multiplicity of actors, some in support and some not. Alliances then become crucial, as demonstrated by the Indian SSN Campaign, and the New Men's Alliance in Indonesia. They help link the claims of women's rights organizations with those of other constituencies. However, this implies the need to negotiate and prioritize claims across a wide range of competing interests. In the process, some claims are modified, others may be dropped. Consensus on challenging the the idea of the 'family', albeit patriarchal, and gender roles within it, has not been achieved, even amongst women's organisations. So, while time use surveys conducted post-Beijing have highlighted the nature and extent of unpaid work performed by women (Dong and An, 2015; Neetha and Palriwala, 2008), such recognition is not yet widely accepted as 'legitimate'. In Fraser's terms, this represents the first 'moment' in mobilizing around unpaid care work.

If unpaid care in itself is not a legitimate issue, then the question of how to frame claims around it remains a vexed one. In contesting the meaning and content of the claim, Fraser's second 'moment', redistributive claims, such as, childcare provision, maternity entitlements and universal old age pensions have perhaps been the easiest to justify. Using in large measure a 'social investment' logic, they provide a way forward for specific mobilizations targeted at the State. Another route is provided by mobilizations of pro-feminist men's groups advocating work-life balance policies for both men and women, through sharing the burden of care amongst household members, but with the support of the state and employers. While addressing to some extent the issue of redistribution, these measures don't adequately confront the ideologies inherent in such claims.

In their framing of the issue, Indonesian feminist organizations do adopt a rights-based approach (Sepúlveda, 2013), seeing unpaid care and domestic work as a societal responsibility, wherein women have the choice of whether to join the paid economy or focus exclusively on unpaid care and domestic work within the household. While they might choose to work in the domestic realm, they should not be obliged to do so legally. Whatever be their choice, this should not limit their rights as citizens (Eddyono et al., 2016). The state, however, driven by a needs-based, 'social investment' approach, has responded only marginally, focusing on childcare provision to public sector employees, on whom it depends for its everyday functioning.

China has moved from a situation of equal rights in the 1950s to one that is needs-based post-reform, but at the same time from socialized care services to privatized arrangements.

Mobilization here does not question the duty of families, particularly women, to provide care services, but focuses more on the working conditions of care workers and the regulation of the private sector. Interestingly, the shift in the basis of citizenship entitlements from universal to needs-based or linked to work (Fraser, 1989), has not been questioned. Pensions are an exception; the 12th Plan aims to attain universal coverage by 2020, partly perhaps in response to women's mobilisation (Sargeson, 2008). However, apart from civil servants, the pensions to other elderly people, especially in rural areas, are too low to pay for their basic needs and care⁷.

India, a federal state with a vibrant democracy, has a range of ideological positions co-existing, from extreme conservatism that sees unpaid care as women's responsibility, to the mobilization of the poor and self-employed, mainly women, for equal rights to social protection – pensions, maternity entitlements, crèche services, education, amongst others. Unlike China, being a democracy, it is important for the state to respond to mass mobilizations from below. Since 2005, there have been a plethora of new laws and policies [be it the Right to Education (2002), to Work (2005) or to Food (2013)], and while framed in a language of rights, their content leaves much to be desired. The Right to Education excludes the young child's needs for care and stimulation; pensions and maternity entitlements have been universalized through the Right to Food, applicable also to workers in the unorganized sector, yet the financial allocations are grossly inadequate, the timing of delivery uncertain. Given the discriminatory wages in labour markets, the poor quality of work available to women, and the questionable quality of child care facilities, where they exist, women often prefer to care for their children and family. Yet this needs to be recognized and supported, and not taken for granted.

It is not that there have been no gains – there has been progress in recognizing unpaid care work, whether through time use surveys, or the mobilizations by campaigns for social security or child rights. There has also been some progress in terms of 'need satisfaction',

⁷ <http://www.social-protection.org/gimi/gess/RessourcePDF.action?ressource.ressourceId=51765> (accessed on 14 January 2016).

Fraser's 'third moment', as seen in recent laws, policies and projects, albeit partial and under-resourced, but that do seek to compensate women monetarily and socially for care provision. Yet measures to reduce and redistribute, as suggested by the '3R's' framework (Elson, 2008), have lagged behind, a result perhaps of the intersection of male bias and class interests in policy making. Reduction and redistribution of unpaid care work call into question gender divisions of labour within households, both physical and emotional, and the need to rethink the very basis of intra-household relationships. They also implicate class status, which allows the better off, both men and women, to transfer the more laborious elements of unpaid care, at the very least, to the paid economy. This however is not a choice for the poor, their struggles for survival only intensifying with the cutbacks in state investments in public infrastructure and services. Redistributive claims for them then get limited to the partial transfer of responsibility for care to state social services, often of poor quality, and in few instances, to men.

Maternal altruism and the emotional dimensions of the care relationship ensure that mothers are present and carry out the activities needed for the wellbeing of their children and families, irrespective of monetary incentives or other forms of support. Yet in the final analysis, this tells on their own health and wellbeing. There is still a long way to go to ensure that care work becomes a choice rather than an obligation for women (Folbre, 1995), its drudgery reduced, and some elements at least redistributed across institutions, which are accessible, affordable and of good quality. Perhaps the recent inclusion of unpaid care work in the Sustainable Development Agenda could boost both feminist mobilization and state policy response in the coming years.

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