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Gender and Development - A study of Vashi Naka Slums and Rehabilitation societies in Mumbai, Maharashtra

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Abstract

This paper examines gender inequality in urban India through the lens of the capabilities approach, addressing the pervasive “poly-poverty” emerging in an era of ongoing poly-crisis. Combining quantitative surveys with qualitative focus group discussions and in-depth interviews, the study investigates economic disparities, health deficits, educational barriers, time and digital poverty, and restricted access to public spaces and political participation. The findings reveal that the COVID-19 pandemic deepened preexisting inequities—women experienced a 53% income decline compared to 29% for men, shouldered over four times the unpaid domestic labor, and frequently lacked the agency to make key household decisions related to health and education. Additionally, inadequate infrastructure, such as poor sanitation and limited water access, further constrained women’s mobility and economic opportunities. Social norms continue to limit female political engagement and reinforce the “poverty penalty” associated with gender discrimination. In response, the paper recommends a multi-pronged, gender-sensitive intervention strategy. Proposed solutions include support for women’s economic ventures, improvements in public health and sanitation, recognition and redistribution of unpaid domestic labour, and initiatives to elevate female political representation. By addressing both the monetary and socio-cultural dimensions of poverty, these interventions aim to dismantle structural barriers, foster sustainable development, and empower marginalized women.

Key Words - Gender Inequality; Poly-Poverty; Capabilities Approach; COVID-19; Economic Disparities; Women's Empowerment; Gender and leisure

JEL Codes -

J16: Economics of Gender; Non-labor Discrimination

D63: Equity, Justice, Inequality, and Other Normative Criteria and Measurement

I32: Analysis of Poverty

I38: Health: Government Policy; Regulation; Public Health

Introduction

Women worldwide face systemic barriers to fundamental aspects of human life (Nussbaum, 2012). They have lower literacy levels, employment rates, and access to education, healthcare, and financial resources while experiencing higher levels of violence, exclusion, and discrimination. From a Senian perspective, these disparities limit women's freedom, capabilities, and potential, necessitating a gendered approach to development.

The Capabilities Approach

Building on Sen's work, Nussbaum's capability approach emphasizes human well-being and social justice by enhancing people's abilities to achieve valued outcomes (Nussbaum, 2009). This framework is crucial in gender and development as it acknowledges gender-specific inequalities embedded in socio-political structures (Nussbaum, 2000). Expanding women's capabilities involves removing barriers to economic, social, and political participation while addressing cultural stereotypes that limit their roles.

Nussbaum identifies ten core capabilities essential for human flourishing, which are especially difficult for women to attain:

- **Life & Bodily Health:** Access to healthcare, nutrition, and protection from violence.
- **Bodily Integrity:** Autonomy over reproductive choices.
- **Senses, Imagination & Thought:** Access to education and information.
- **Emotions & Practical Reason:** Recognition of emotional labour and decision-making rights.
- **Affiliation:** Equal opportunities in leadership and representation.
- **Play:** Leisure and mental well-being.
- **Control Over One's Environment:** Political, legal, and economic participation.

Gender and Development: A Framework

To address gender inequalities holistically, this report adopts the Gender and Development (GAD) approach, which integrates gender perspectives into development policies (Kabeer, 1994). The GAD framework recognizes gender inequality as a key driver of poverty and emphasizes women's empowerment as essential for sustainable development (UNDP, 1997).

Gender Development in India

India ranks 122nd on the Gender Development Index (GDI), with worsening gender disparities (UNDP, 2021). Women face higher poverty rates (34.8% vs. 28.1% for men) due to limited economic opportunities and unpaid care work (UN Women, 2020; World Bank, 2019). The COVID-19 pandemic further exacerbated these inequalities, highlighting the urgent need for gender-sensitive development policies.

Methodology

This study employs both quantitative and qualitative methods to analyse gender and development in Mahul, Chembur, Mumbai. Data was collected during a field visit on 18-19 March 2023 by six students through focus group discussions, in-depth interviews, key informant interviews, and surveys.

Research Objectives

1. To assess women's development in Mahul Gaon, particularly post-COVID-19.
2. To provide interdisciplinary recommendations for policymakers and civil society organizations.

Research Setting

Mahul Gaon, located in Mumbai's eastern suburbs, serves as a resettlement colony under the

Slum Rehabilitation Authority's Projected Affected Persons scheme. The area is notorious for poor living conditions, earning labels like "toxic hellhole" (BBC News, 2018). Residents face severe health, education, and infrastructure challenges (Indorewala & Wagh, 2017). The study covered cement buildings housing displaced communities and adjacent slum areas.

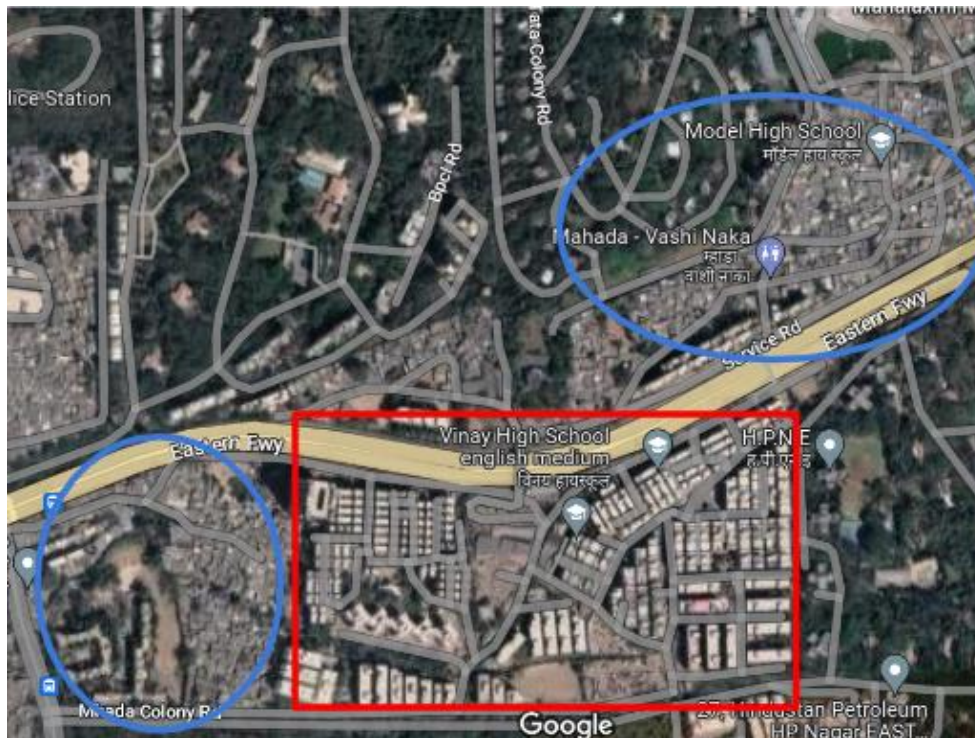


Figure 1: Map depicting area visited by field workers

Profile of Participants

The quantitative survey (n=84) has provided a profile of the members of the community. The data of the participants in the research is presented in disaggregation according to their gender, age profile and family size.

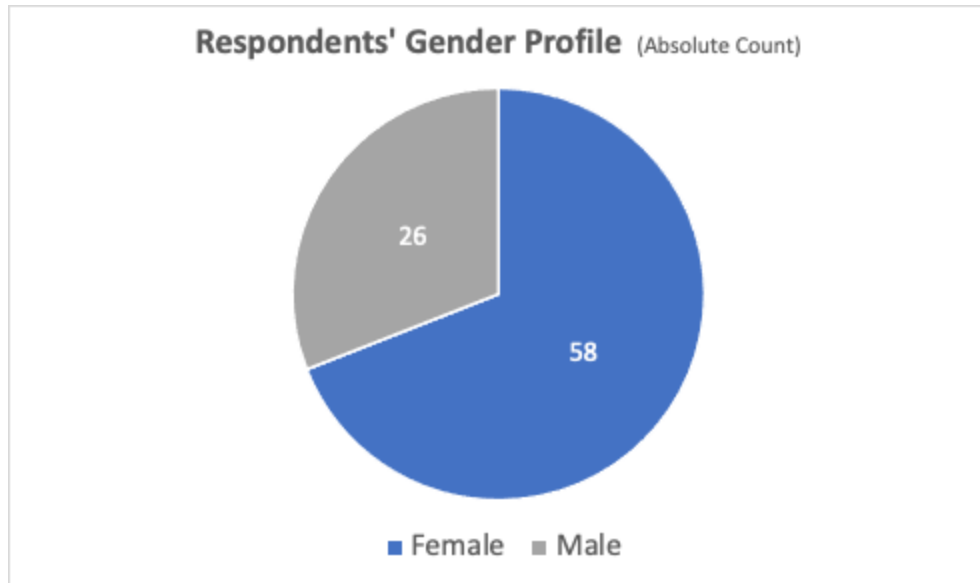


Figure 2

Pie Chart depicting Gender Profile of Participants of Survey

The respondents were majority females as the group's research focus was Gender and Development. The above chart represents absolute numbers: 26 male respondents and 58 female respondents.

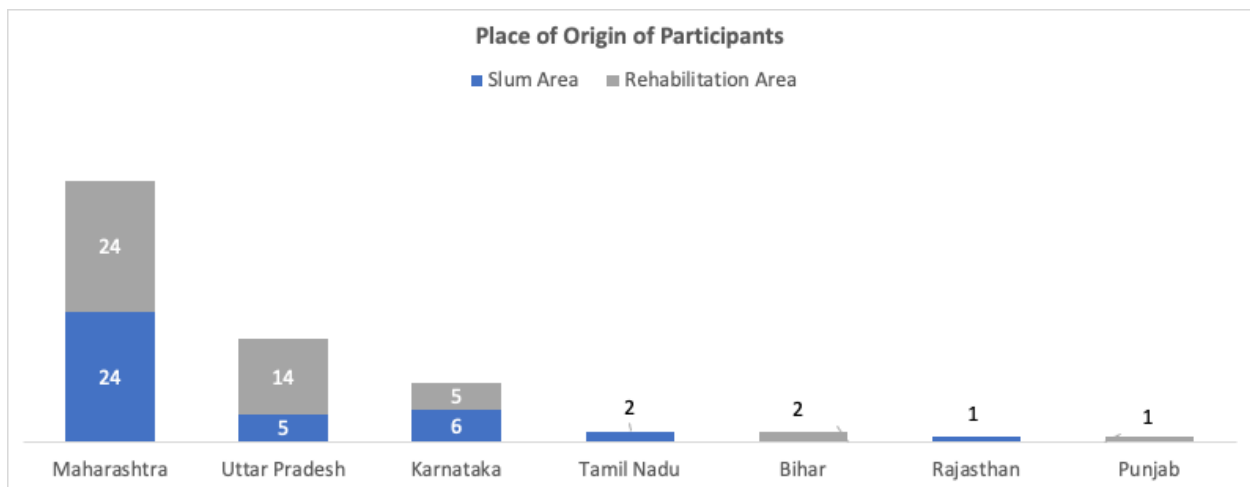


Figure 3

Geographical description depicting the place of origin of participants

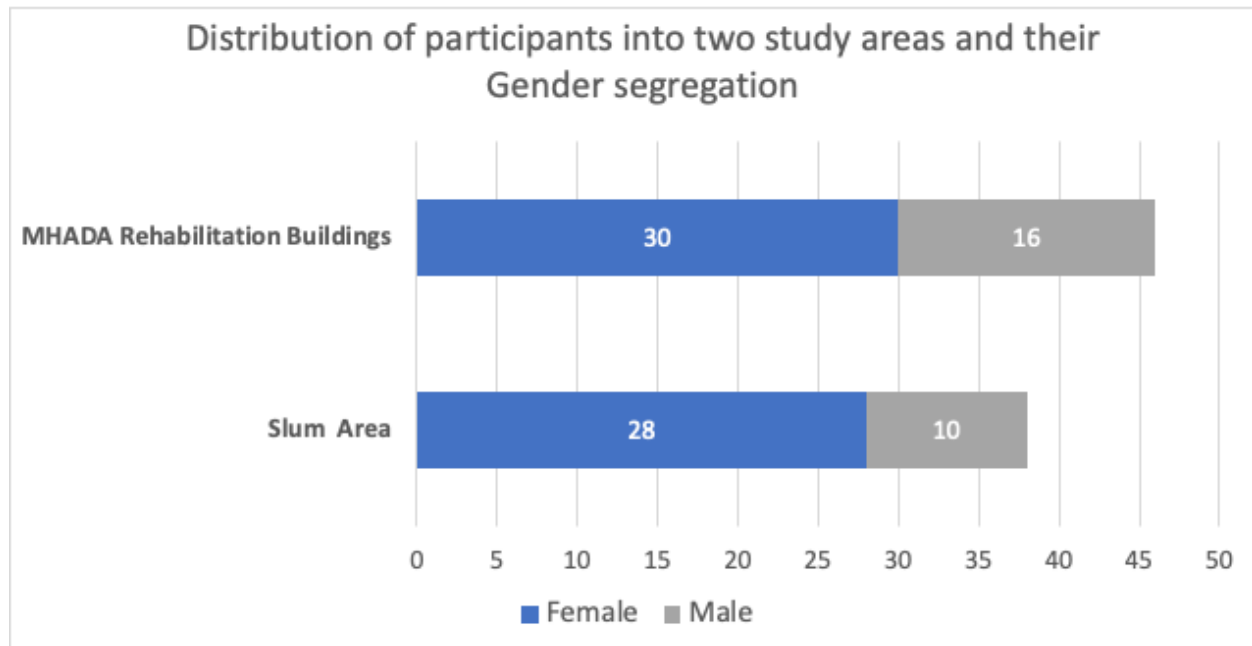


Figure 4

Graph depicting Gender Division Intersecting with Area of Participants of Survey

Out of 84 study participants, 46 are from MHADA rehabilitated buildings, and 38 are from Slum Areas. From the above graph, we can see that female respondents are almost equally distributed in both the study areas.

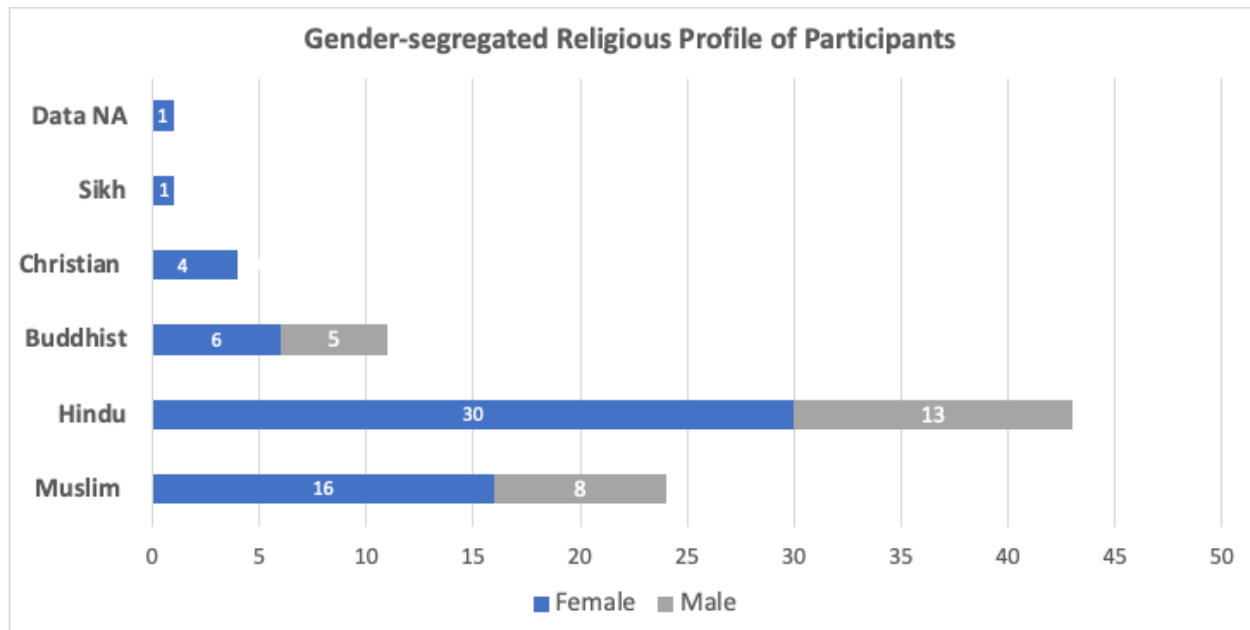


Figure 5

Graph depicting Religious Profile of Participants of Survey

From the above graph, we can see that majority of female respondents are from Hindu religion, followed by Muslim, Buddhist and Sikh religion, in decreasing order. Male respondents are from Hindu, Muslim and Buddhist religion, in decreasing order.

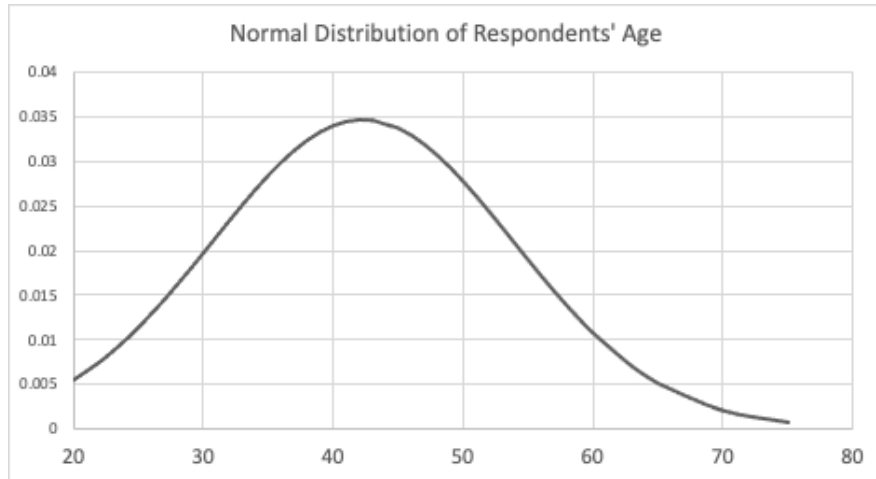


Figure 6

Graph depicting Age Profile of Participants of Survey

The age distribution of the respondents shows a normal distribution, with most respondents falling under the 'Working Age' of population. But this data needs to be gender segregated to know the distribution of age of female and male respondents, as shown below:

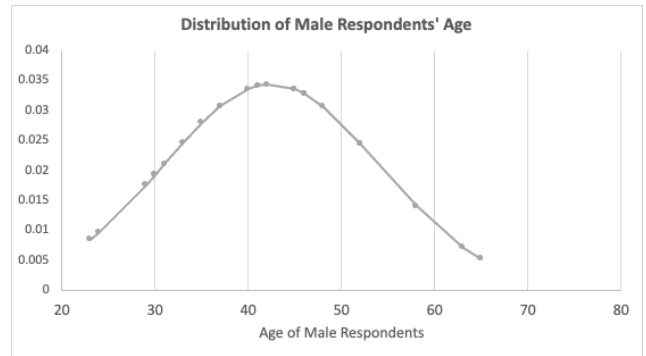
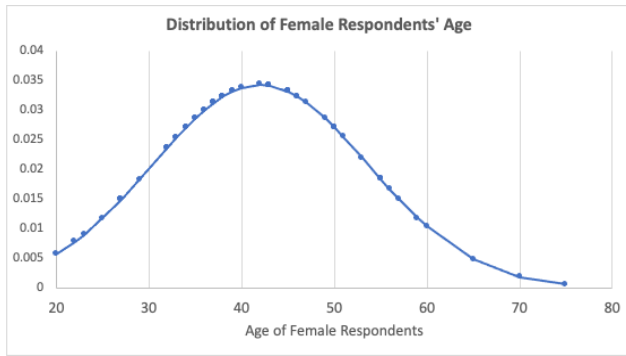


Figure 7

Graphs depicting Age Profile of Women and Men Participants of Survey

Above graphs show that the majority of participants of both genders are roughly in the same age bracket of 30 to 60 years.

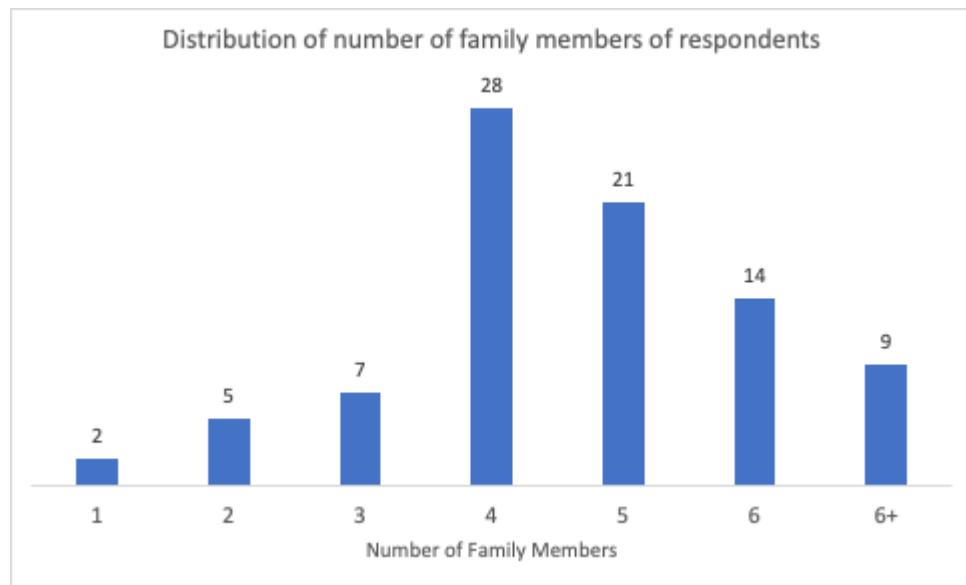


Figure 8

Graph depicting Family Profile of Participants of Survey

The family size here also depicts the number of children. In most of the households, the respondent

resided with a spouse and children. However, some households were undivided families or single-person households as well.

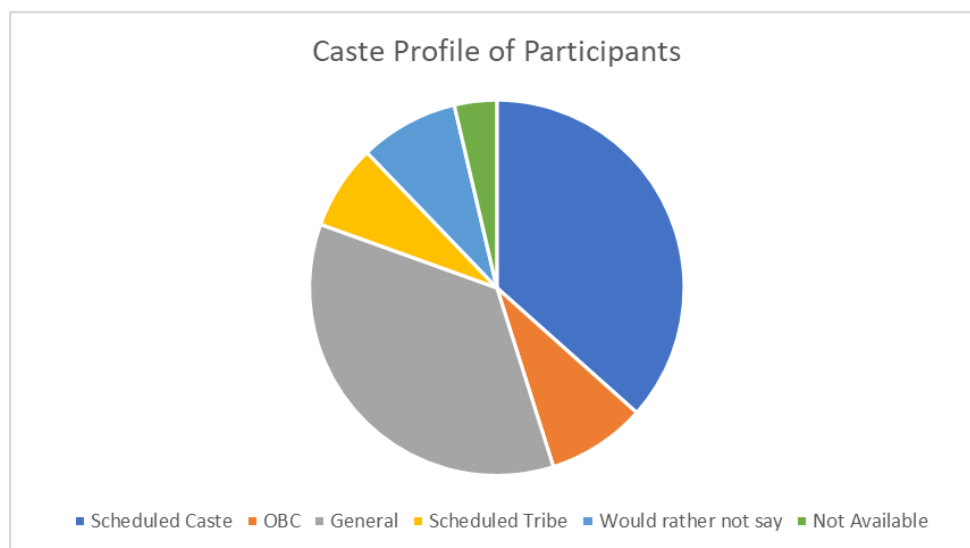


Figure 9

Pie chart depicting Caste Profile of Participants of Survey

The caste profile of the respondents is shown above. The following table gives the exact numbers:

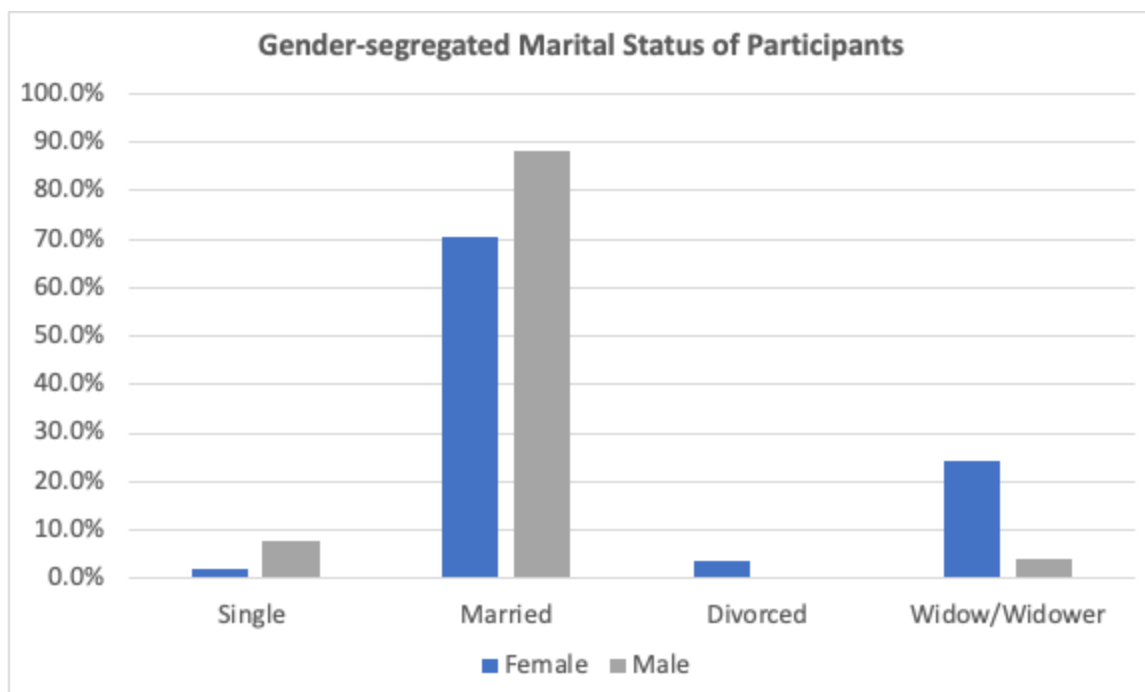
Caste	Number of Participants
-------	------------------------

Scheduled Caste	30
OBC	7
General	29
Scheduled Tribe	6
Would rather not say	7
Not Available	3

Figure 10

Table on Caste Profile of the Participants

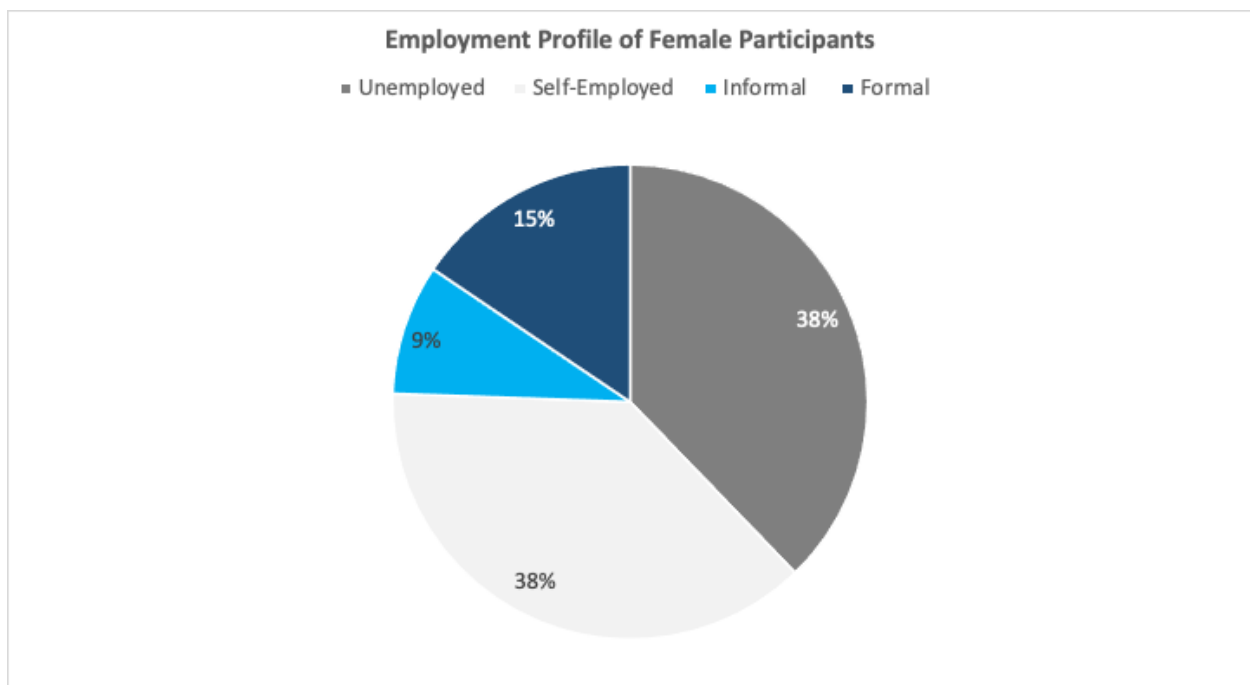
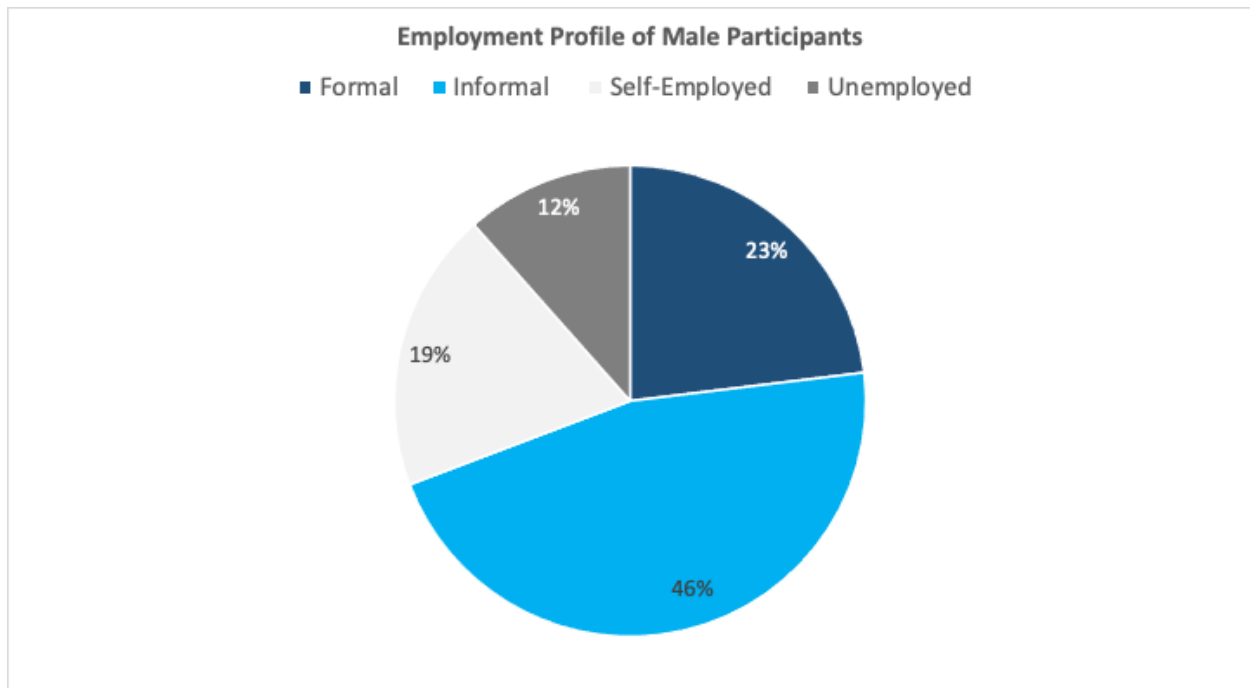
The below graph shows that for majority of both male and female participants are married, while



24.1% of female respondents are also widows.

Figure 11

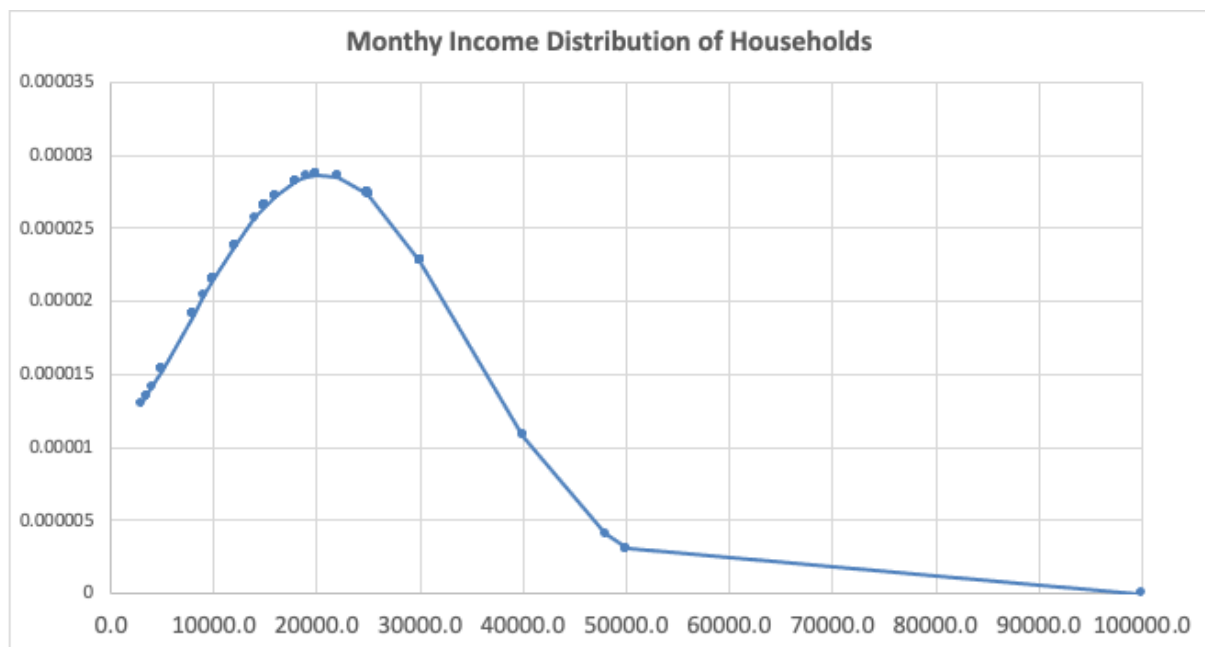
Graph depicting Marital Status of Participants of Survey



Figures 12 a) and b)

Pie charts depicting employment-types among genders - Much higher employment rates among males

It can be clearly noted from the above charts that there are much higher percentage of 'Unemployed' females as compared to males. This is because economically, homemakers are considered as unemployed, even though they are occupied throughout the day in domestic work. Both men and women have low percent of employment in the formal sector, though men have an advantage of eight percentage points. A significant 38% of women are self-employed, as compared to only 19% men. 46% of men are employed in the informal sector, while this figure is just 9% for women.



Mean (Rupees)	Standard Deviation (Rupees)
20543.2	13894.7

Figure 13

Frequency curve depicting the Monthly Income Distribution of Households

Majority of the respondents fall into low income households, earning rupees 10,000 to 30,000 per household.

Data Collection Procedures

Qualitative data was gathered through focus group discussions, interviews, and participant observations. Two focus groups were conducted: one with SRA residents (n=11) and another with women street vendors (n=14). Individual interviews included a transgender person and a police officer. Researchers also observed a Women's Day celebration. The Yuva organization facilitated participation, and discussions were held in Hindi and Marathi.

Quantitative data collection followed a structured approach. Researchers conducted door-to-door surveys, ensuring informed consent. Responses were recorded digitally, and missing or sensitive data was marked as 'NA.' A transect walk documented key observations.

Data Analysis

Descriptive statistics, including means and standard deviations, were represented via charts and graphs. Inferential statistics examined gender disparities. Qualitative data was partially transcribed, translated, and thematically categorized.

Ethical Considerations & Limitations

Participants' anonymity and informed consent were prioritized. However, limitations included potential discomfort in sharing sensitive information, exclusion of working individuals due to survey timing, and the short duration of fieldwork, which restricted deeper exploration of women's experiences.

Economic Poverty

Women in India are more likely to live in poverty than men, with around 21.9% of women living below the poverty line compared to 16.8% of men (Ministry of Statistics and Programme Implementation, 2020). Women in India face several economic barriers, such as limited access to education, limited job opportunities, and lower wages compared to men (Kabeer, 2018). According to the World Bank, around 80% of women in India work in the informal sector, which lacks job security and benefits (World Bank, 2021). This gender-based economic inequality is a significant obstacle to women's empowerment and development in India. In the following chapter, one can observe not only economic vulnerabilities of women but also the economic violence that maintains these inequalities.



Figure 14

Women from the community engaged in small businesses as a means to achieve economic sustainability.

Income Status of Women

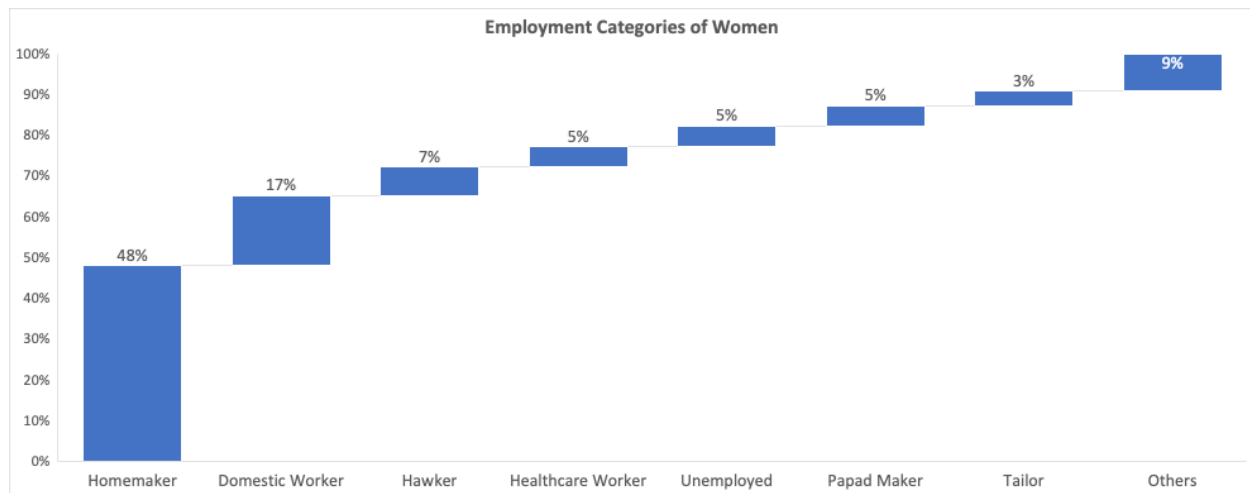


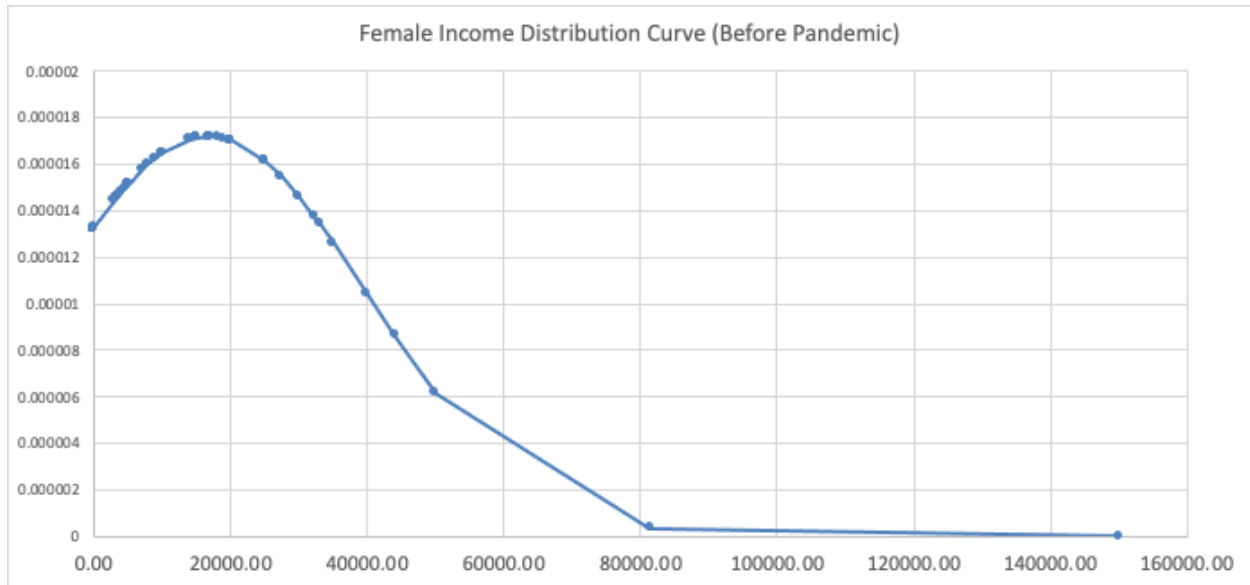
Figure 15

Employment categories of women in detail

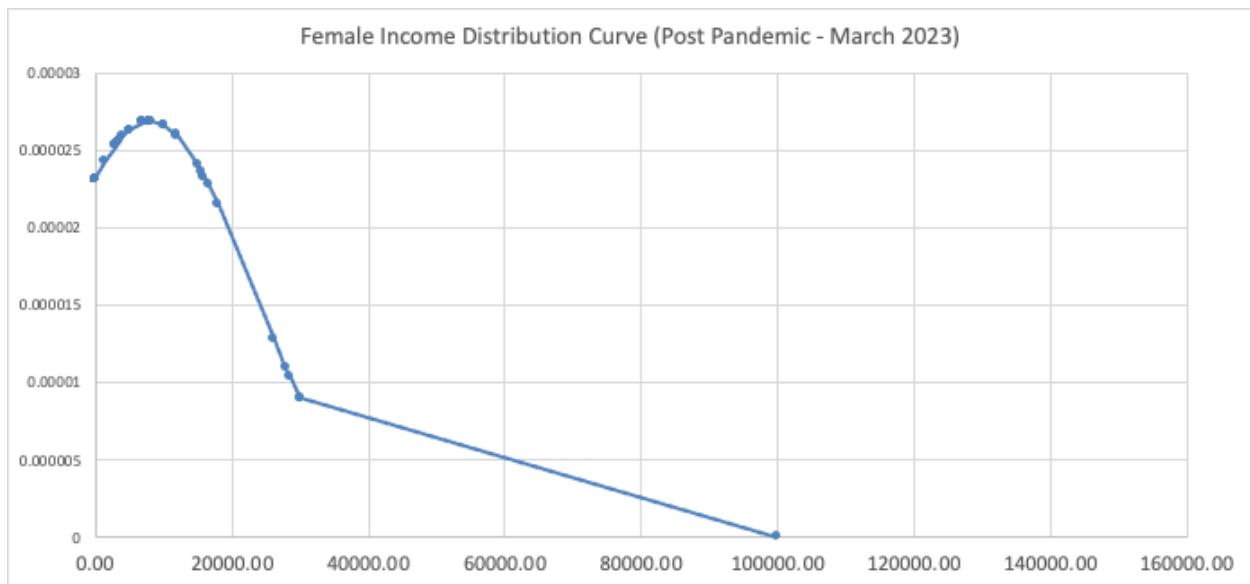
The survey data reveals that 45% of the participants are homemakers. Majority of other women are employed as domestic workers, street hawkers, papad makers or tailors. The “other” category in the above graph includes customer service professional, human resource professional, and tuition teacher.

The COVID-19 pandemic has had a severe impact on the economic poverty of women in India. The lockdowns and restrictions implemented to control the spread of the virus have led to significant job losses and economic downturn, disproportionately affecting women (Kabeer & Huq, 2020). Women are overrepresented in the informal sector, which has been severely impacted by the pandemic (Mazumdar, 2020). This situation can be seen within this area of study as well. Most of the female respondents in the surveys mentioned a reduction in incomes post-pandemic.

Effect on Female Income due to the Covid crisis

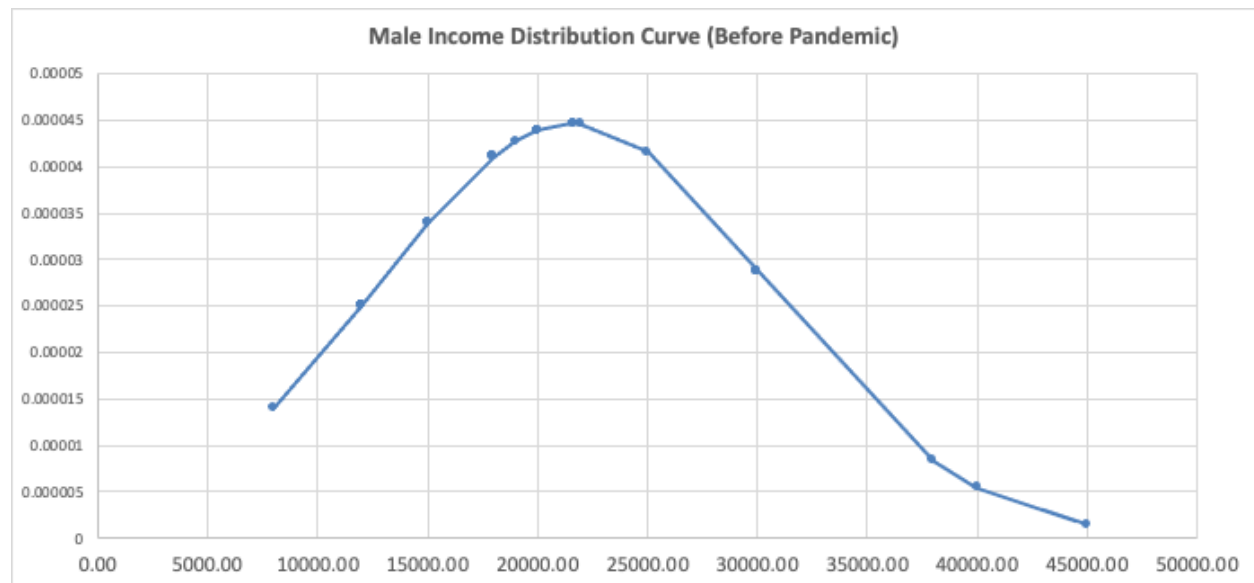


Mean (Rupees)	Standard Deviation (Rupees)
16757	23209

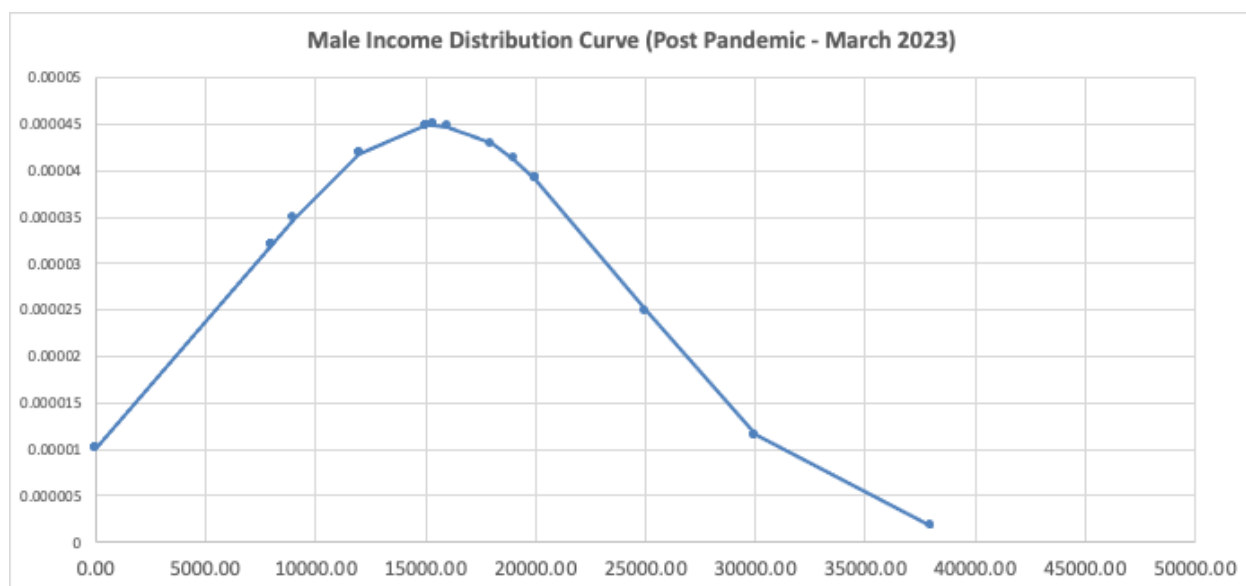


Mean	Standard Deviation
------	--------------------

(Rupees)	(Rupees)
8084	14836



Mean (Rupees)	Standard Deviation (Rupees)
21625	8939



Mean (Rupees)	Standard Deviation (Rupees)
15333	8887

Figures 16 a), b), c), and d)

Showing normal distributions of incomes before and post-pandemic for females and males

Gendered Impact of Income Decline

Prior to the pandemic, men earned on average 29% more than women. Post-COVID-19, incomes for both genders declined, but women were disproportionately affected, experiencing a 52% drop compared to a 29% drop for men. The income distribution curves shifted leftward, indicating a decrease in earnings across the board. The income gap has significantly widened, with men now earning 90% more than women on average.

In addition to income decline, state support in the form of extra ration, grants, and wage assistance, which had been available during the pandemic, has been withdrawn despite ongoing economic hardship. As one respondent noted:

“Our salaries have remained low. But now all the schemes are gone... They say, ‘We don’t have the support money, everything has been stopped now.’” (FGD 2, P9)

Age also played a role in women's economic participation. Many older women found it difficult to secure employment, as employers often rejected them due to age discrimination:

"Who will give me a job now? I tried, but they reject me every time saying that 'you're too old now'." (Interview with a female respondent in her late 40s)

Precarious Employment and Wage Decline

The pandemic intensified the precarity of daily wage-based jobs. Many respondents lost employment and faced persistent financial obligations, such as rent, school fees, and food expenses:

"Those with service jobs lost their occupation. Those like us who worked daily, how could we go to work when even going outside was prohibited?" (FGD 1, P2)

Even after the pandemic, jobs remained scarce, wages were lower, and workers had to take up unfamiliar roles:

"No, we didn't get the same jobs back... We have reduced wages now. And we couldn't even ask for specific work." (FGD 1, P1)

"People who had 20-30,000 as salaries are taking up jobs with 10-12,000 now." (FGD 1, P2)

The financial burden was overwhelming, as one respondent explained:

"What to do with 10-12,000? The school fee makes up 2-3,000 per month. Electricity bill of 1-2,000. The gas cylinder costs 1150 twice a month. What do I eat now?" (FGD 1, P7)

Challenges Faced by Women Street Vendors

Women street vendors struggled to sustain their businesses due to lockdown restrictions and post-pandemic economic shifts. During lockdowns, they faced police harassment and were unable to set up stalls, particularly those selling perishable goods (Sinha et al., 2021; Ismail et al., 2021):

"When the police came, we would hide. When they left, we would try to sell at least a little bit. If we didn't sell, we would die of hunger." (FGD 1, P2)

Even after restrictions lifted, economic recovery was slow. Customers increasingly favored online platforms over street vendors:

"A lot of our goods still get left. It is not like before... Everything is online. No one comes to vendors to buy goods." (FGD 1, P8)

Economic Violence Against Women

Economic violence includes financial control, employment restrictions, and denial of access to economic resources (EIGE, 2016; Fawole, 2008). In Mahul, men often refused to contribute to household expenses, leaving women solely responsible for bills, school fees, and rent:

“I hardly earn 5-8 thousand rupees... My husband earns but we never see that money. He spends it all on alcohol.” (FGD 2, P9)

This lack of financial contribution led to household conflicts:

“There would be fights... [over] many things. We wouldn’t have money to run the household. They (husbands) wouldn’t give us anything. Spent it on alcohol.” (FGD 1, P4)

Furthermore, financial decision-making was dominated by men, with women having little autonomy over major purchases and investments. Survey data showed that only 19% of women independently made high-value purchase decisions, compared to 50% of men.

Women’s employment was also restricted by social expectations. Some respondents believed that if household earnings improved, women should stop working:

“No, then, why would we work? We would look after the house better.” (FGD 1, P2)

However, others expressed a desire to continue working despite economic hardships:

“Someone gives even a lakh rupees, I still would like to keep working.” (FGD 1, P7)

“No, then, why would we work? We would look after the house better then. Look after the kids and

stuff.” (FGD 1, P 2)

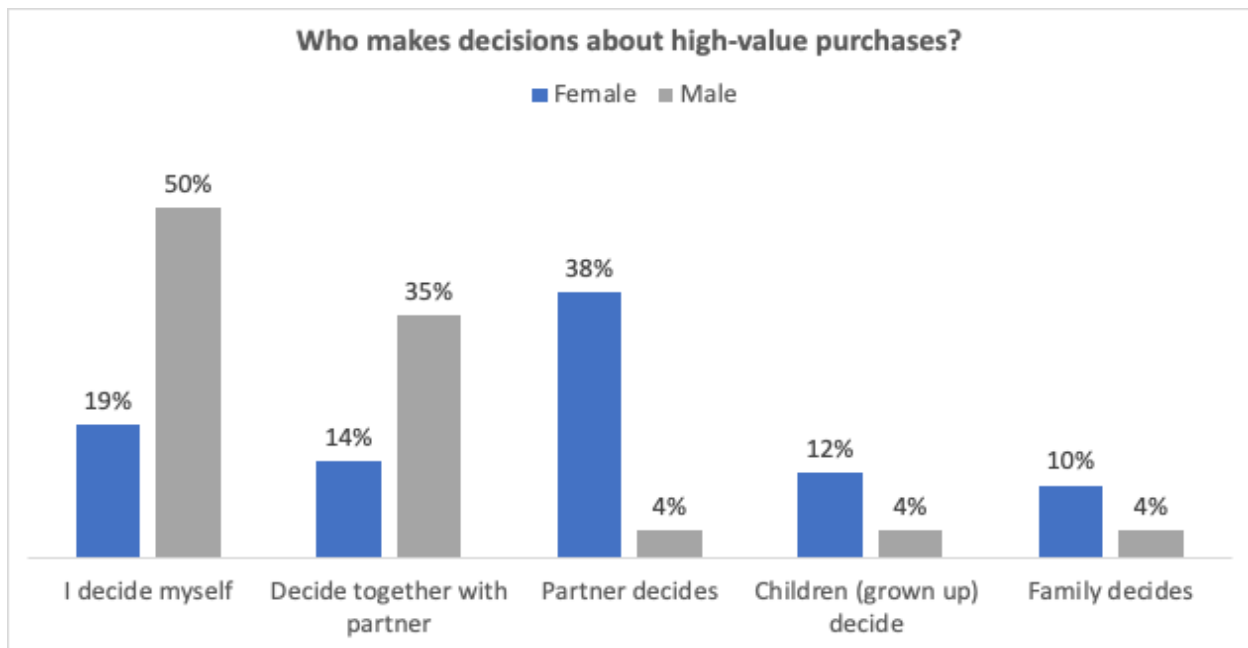


Figure 17

Graph showing decision makers on high-value purchase according to Gender

“(Will your husband help you manage the house?) No, how can they? They work till the night na? We’ll stay home, so we’ll be able to look after the house better.” (FGD 1, P2)

This invisibilization of women’s work, at home and outside, and a hierarchy of importance attached to men’s employment was visible in male respondents’ answers as well.

“It [work conditions] isn’t ideal. But we can’t do anything now. We need to bring in money to survive.” (FGD 1, P 4 male)

There was still another theme of ‘habit’ which was expressed in FGD 1 -

“It’s also about ‘habit’. I work now. So, I like working, and would want to continue doing that even after a pay rise.” (FGD 1, P2)

“Someone gives even a lakh rupees. I still would like to keep working.” (FGD 1, P7)

“Habitual problem!” (FGD 1, P 4 male)

Life and Bodily Health

Bodily health and life are fundamental capabilities that enable individuals to pursue their goals, engage in economic and social activities, and participate fully in their communities (Nussbaum, 2011). Women’s health is especially critical due to reproductive health needs, pregnancy, childbirth, and vulnerabilities like gender-based violence (Sen, 1999; García-Moreno et al., 2015). Given this, we examined women’s nutritional status, access to health infrastructure, knowledge of family planning, and economic conditions impacting their well-being.

Nutritional Poverty

According to NFHS-5 (2020), 19.6% of women in urban Maharashtra have a BMI below 18.5, indicating undernutrition. Poor nutrition leads to increased susceptibility to infections, cognitive impairments, and maternal mortality.

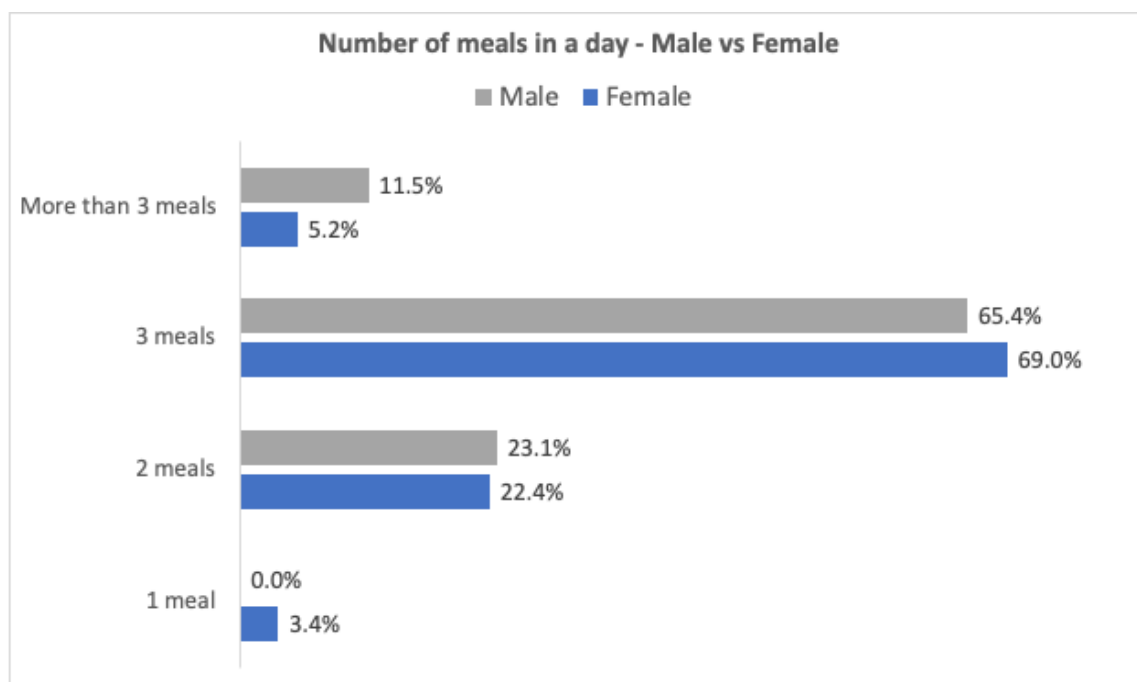


Figure 18

Graph depicting number of meals consumed in a day – Male vs Female

While most participants consumed two or three meals a day, a higher proportion of men ate more than three meals, while 3.4% of women ate only one meal daily, compared to none of the men. Traditional gender norms often lead women to prioritize their families' nutritional needs over their own (Dey & Mohanty, 2017). The pandemic further worsened food security due to disruptions in supply chains and economic instability (Nair et al., 2020; Bhargava, 2020). Participants reported difficulty accessing rations:

“They have changed the grains that come through the PDS system. They only have rice nowadays. No wheat.” (FGD 1, P6)

“Yeah, wheat is selling 50-60 Rs a kg in the black market.” (FGD 1, P6)

Gender-based discrimination in food distribution exacerbates health issues. While 44% of male respondents reported health concerns, the figure was 67% for women.

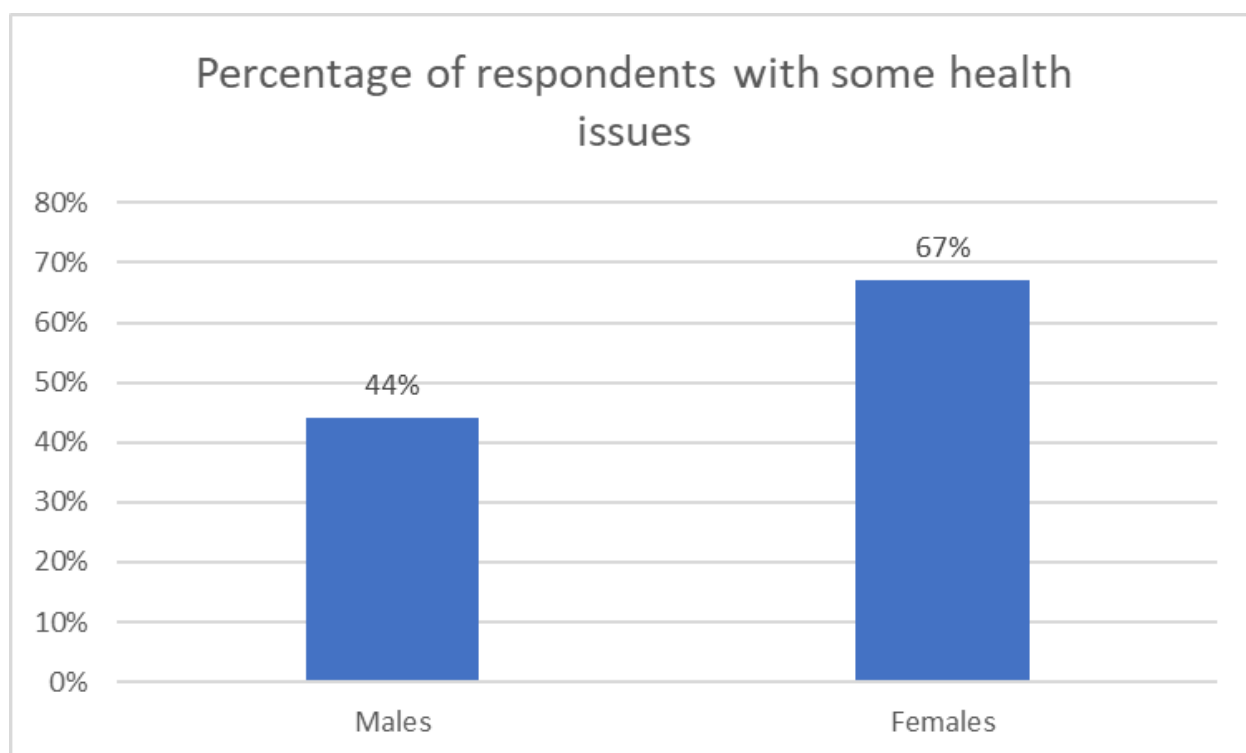


Figure 19

Graph representing the Proportion of Women and Men respondents who reported health issues
Mental health concerns also emerged, with some women unable to access support:

“... you see, I have troubles up here (points to her head).” (KII, Female respondent)

Access to Health Infrastructure

Women's health often receives lower priority within households. During COVID-19, women were 1.5 times less likely to be hospitalized than men due to their perceived lesser economic contribution (Zodpey & Negandhi, 2020).

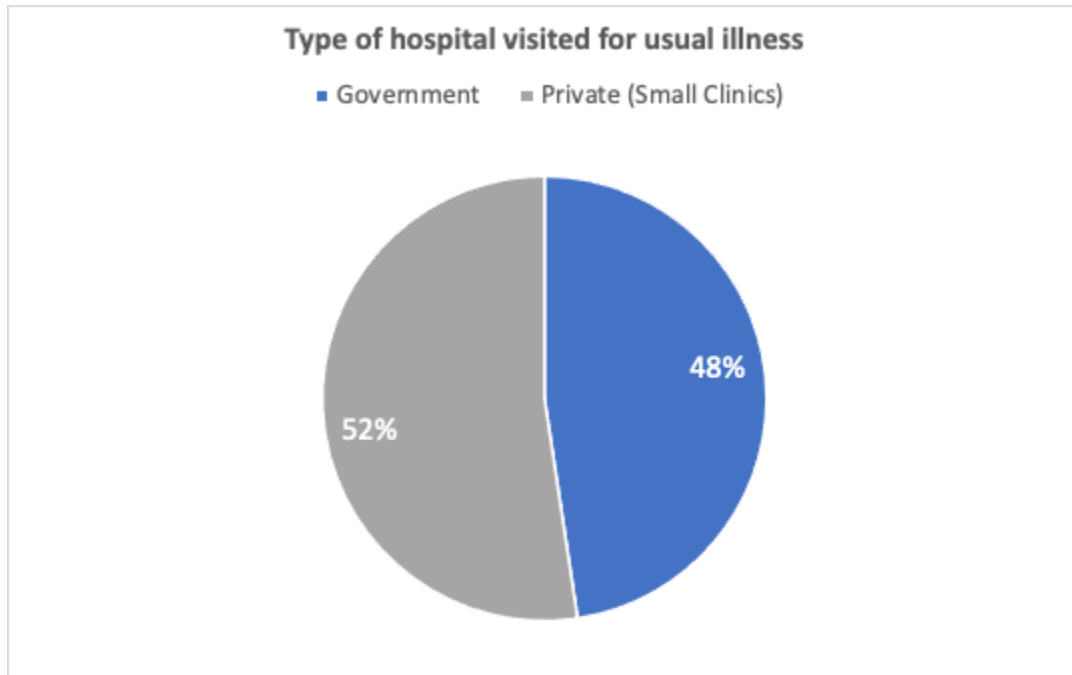


Figure 20

Graph on the use of government versus private healthcare

Despite low incomes, most respondents preferred private healthcare, indicating dissatisfaction with government services. Informants reported using private clinics for minor illnesses and government hospitals only for severe cases, largely due to travel expenses. However, access to healthcare is also influenced by social norms. Forty percent of women needed permission to visit a hospital, compared to only 12% of men, reflecting deeply ingrained patriarchal norms limiting women's autonomy (Kumar et al., 2018).

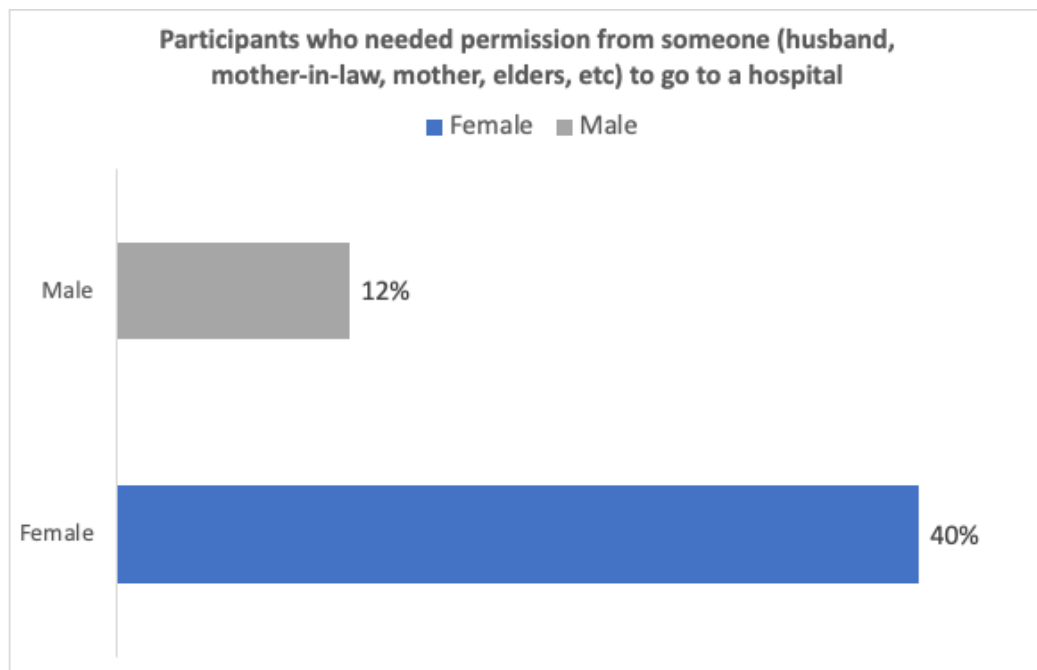


Figure 21

Graph depicting the figure of people who needed permission from others in the family to go to a hospital

Economic constraints further restricted access to healthcare. Women's health issues, such as nutritional deficiencies and chronic illnesses, were often deprioritized.

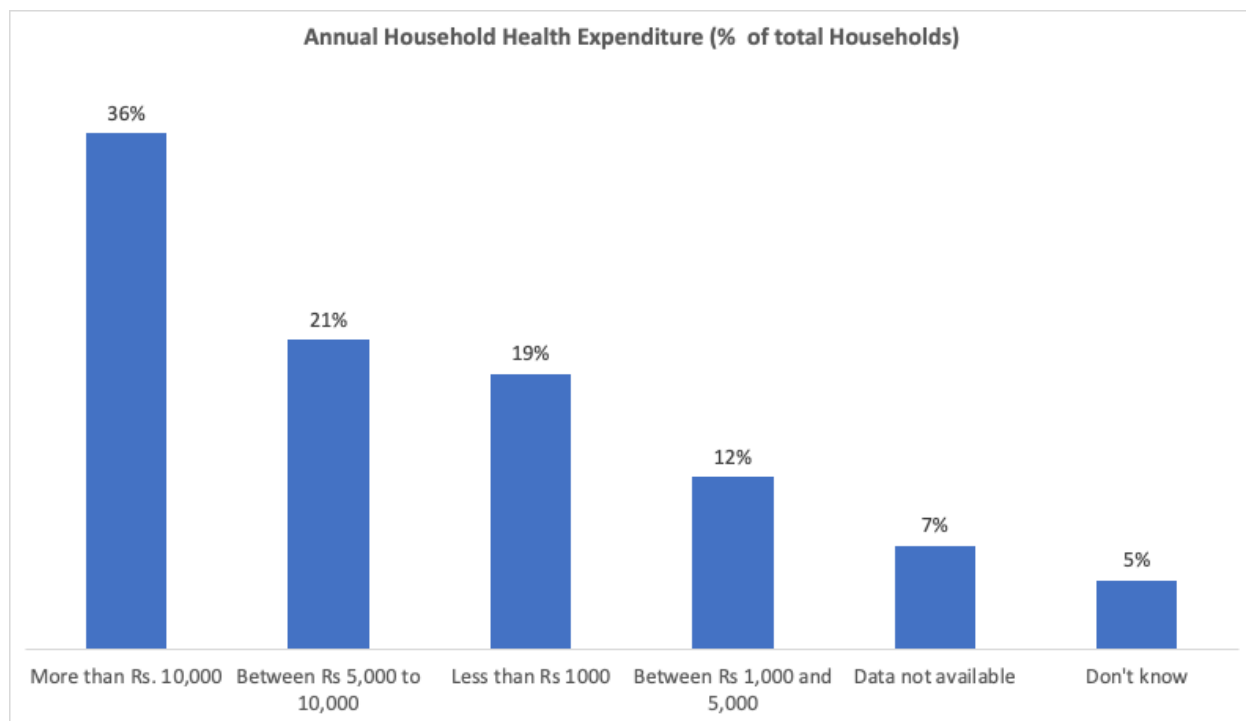


Figure 22

Bar Chart showing the Range of health expenditure for Households

Thirty-six percent of households spent more than Rs 10,000 annually on healthcare. A staggering 91.7% relied on out-of-pocket expenditure, with only 1.2% benefiting from government schemes. This highlights a failure in policy implementation, despite Mumbai's extensive healthcare infrastructure.

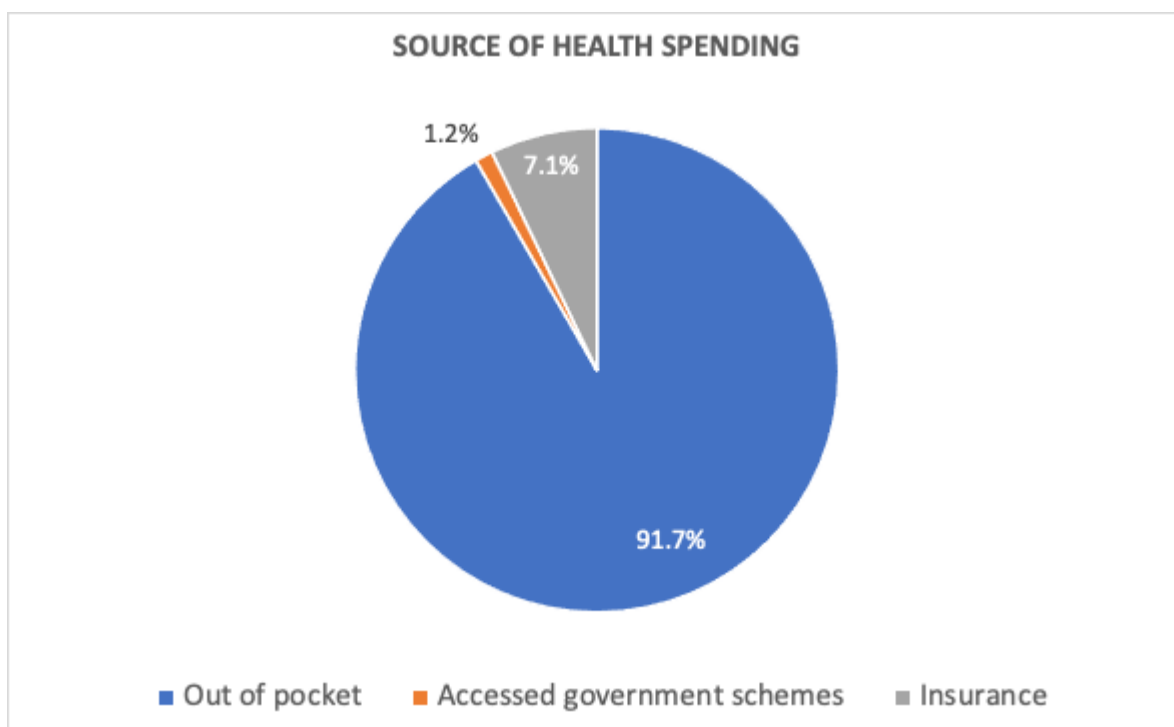


Figure 23

Pie Chart Showing sources of Health Spending

Family Planning

Family planning is crucial for women's health and economic participation. Unplanned pregnancies increase maternal mortality and morbidity (International Institute for Population Sciences, 2021). Maharashtra's modern contraceptive use rose from 53.2% (2015-16) to 57.8% (2019-20), but disparities remain.

The average number of children per participant was 2.4. Segregating by residential area and religion revealed additional patterns.

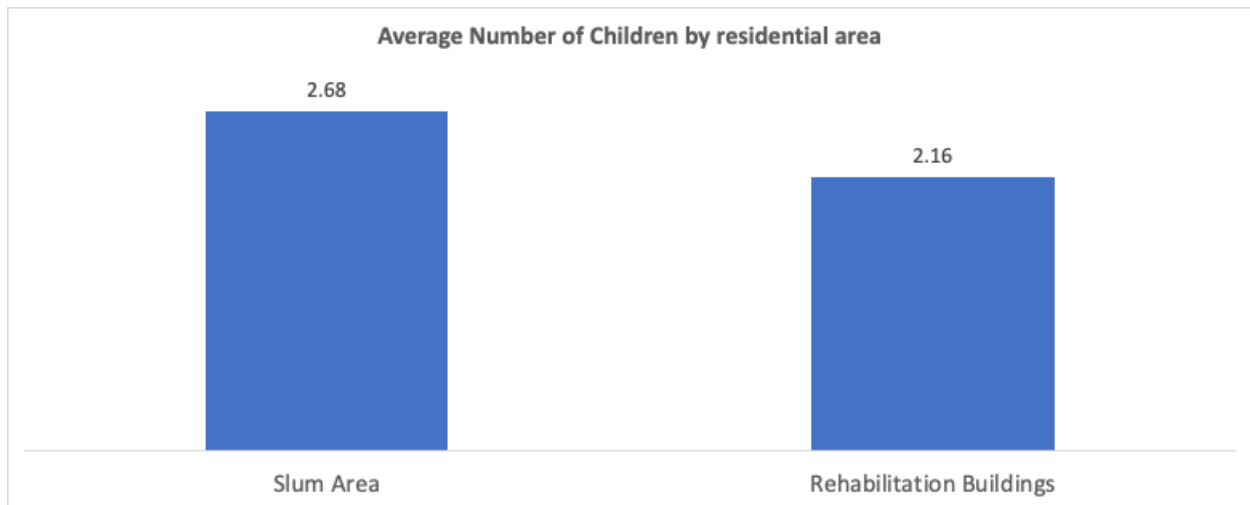


Figure 24

Showing number of children per family in the slum area vis a vis in families rehabilitated in buildings

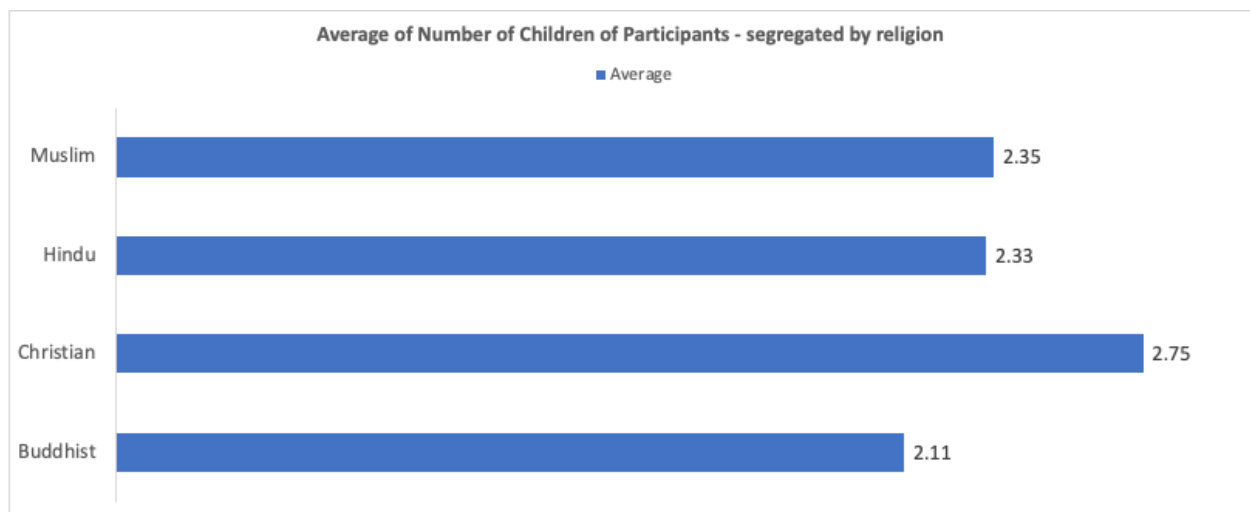


Figure 25

Average number of children of participants segregated by religion

There was minimal difference between Hindu and Muslim households, with Christian households showing slightly higher averages.

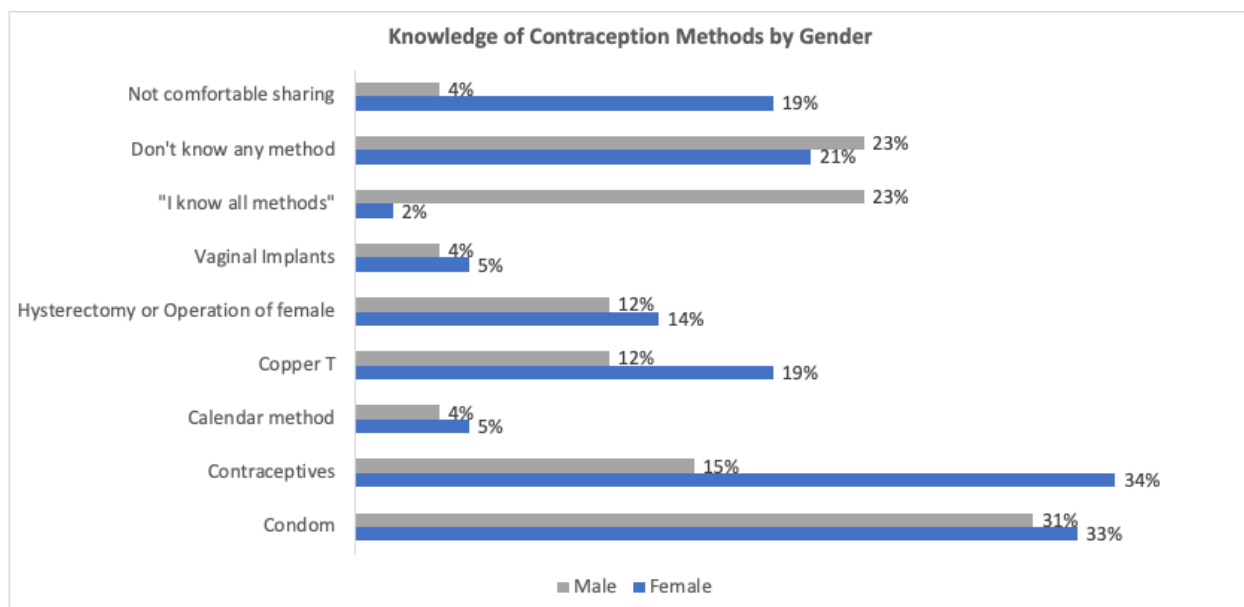


Figure 26

Graph showing the gender wise knowledge of Contraceptive Methods

One-fifth of respondents were unaware of contraceptive methods. While one-third of both men and women knew about condoms, men were less informed about female contraceptives like Copper T. Despite urban settings, modern contraceptive use remained low.

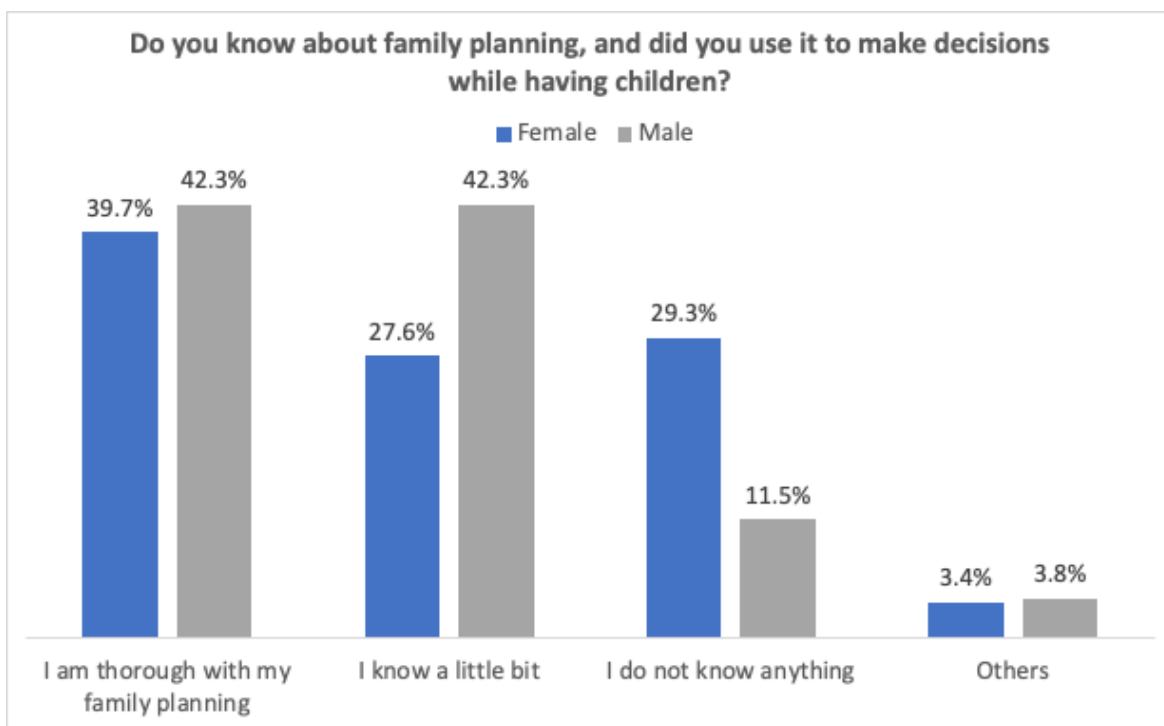


Figure 27

Graph showing the knowledge of family planning between males and females

Men exhibited more confidence in family planning knowledge and were more likely to make related decisions. About 29% of women reported having no knowledge of family planning, compared to 11.5% of men, indicating male dominance in reproductive choices.

A community health worker noted:

“We reach out to all women, so they have knowledge. Implementation is the problem.” (KII, ASHA Worker)

She observed that Muslim women were less likely to use contraception, often citing religious beliefs:

“In many cases, we have to support women to get secretly sterilized.” (KII, ASHA Worker)

Additionally, women found contraceptive options inadequate:

“We give them condoms, but they say they tear easily. Copper Ts cause infections. Mala-D disrupts periods.” (KII, ASHA Worker)

Emotion, Bodily Integrity, and Leisure

The capabilities of emotion, bodily integrity, and play are crucial for women's well-being, enabling them to express emotions, control their own bodies, and engage in fulfilling activities. This chapter explores these themes through issues of security and leisure poverty.

Poverty of Security

Bodily security, ensuring protection from violence and abuse, remains a major concern for women in India due to high rates of gender-based violence (Khan & Hussain, 2021). Mothers in the community reported restricting their daughters' movement after dark due to prevalent violence and a lack of police presence.

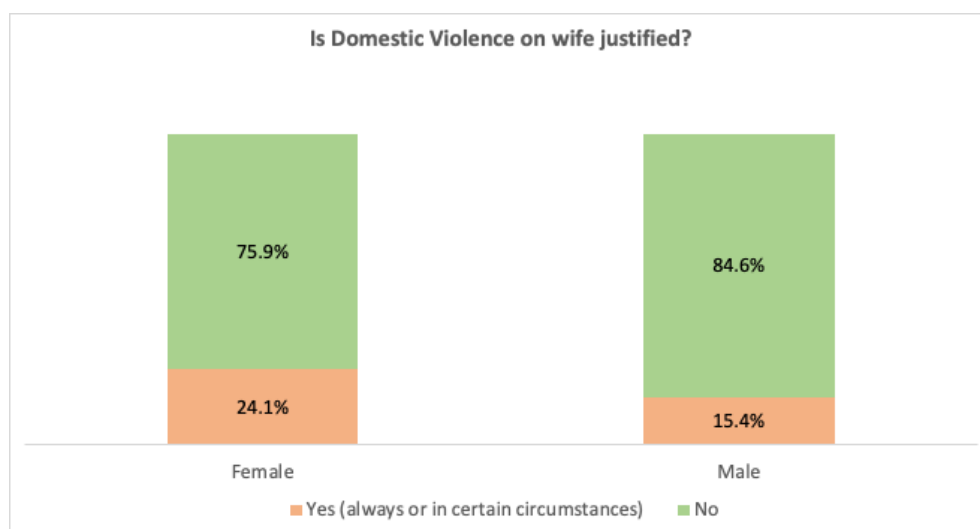


Figure 28

Graph showing male-female respondents' response to justification for Domestic Violence on Wife

A significant 24.1% of female participants and 15.4% of male participants stated that domestic violence was justified in certain circumstances. Given the possibility of social desirability bias, the actual figures may be higher. Many women normalized domestic violence:

"This happens in every house. The man gets drunk and beats his wife." (FGD 2, P11)

"It is more prevalent in the slum areas. They are poor and uneducated." (FGD 1, P3)

Women from marginalized communities face higher risks of violence due to intersecting discrimination (Khan & Hussain, 2021). On Women's Day (March 21), a female police officer

highlighted key issues, including the trust deficit between women and their families, preventing them from reporting intimate partner violence. She introduced the ‘Nirbhaya Squad,’ a police initiative with female counselors addressing women’s security concerns. Additionally, she promoted the universal helpline ‘103’ for emergencies.

Community women stressed the lack of agency and collective voice as major barriers:

“No one speaks up when we see substances being abused by men. No one reports violence later. This silence has cost us dearly.” (KII, Social Worker)

Male respondents acknowledged security concerns, but their suggested solutions reflected a gendered perspective. While women sought more support in public spaces, some men advocated for increased policing and even ‘military rule’ to ensure women's safety.

Leisure Poverty

Leisure poverty describes the lack of opportunities for recreation, which negatively impacts well-being. Studies show women in India have significantly less leisure time than men due to household responsibilities, limiting their access to public spaces (Banerjee & Dasgupta, 2018; Srivastava & Bhatnagar, 2021).

During the Women’s Day celebration, a respondent asked:

“Don’t you think a woman must also be allowed to have fun? To play? To occupy the streets for her leisure? Have you seen a single woman here having fun?” (Interview, P3)

Asserting their right to leisure, women played a hoop-passing game on the streets, reclaiming public space and strengthening their community bonds.



Figure 29

Picture taken during the Women's Day celebration¹

A transwoman participant reinforced the importance of such activities:

"These are essential for forming a community and having a support group." (KII, Trans female respondent)

Leisure poverty impacts women's mental and physical health, contributing to stress, anxiety, and reduced social interaction (Banerjee & Dasgupta, 2018). Limited access to recreational activities also affects physical health (Srivastava & Bhatnagar, 2021), further exacerbating gendered inequalities in well-being.

¹https://drive.google.com/file/d/1Ia1iusIX-GlXpXdKE4DpWOQLu21YG57t/view?usp=share_link (A link to the video depicting the women's day celebration)

Senses, Imagination, and Thought, and Practical Thought

Women have historically been excluded from education and intellectual development. Nussbaum argues that sensory experiences, such as music or art, and the ability to imagine and think critically, are essential for a fulfilling life. Practical thought, or the ability to plan and act in alignment with one's values, is crucial for women's empowerment, allowing them to challenge social norms and pursue opportunities (Nussbaum, 2011).

Educational Poverty

Nussbaum emphasizes the importance of education and access to resources in fostering women's capabilities. By ensuring women have educational opportunities, societies can empower them to think critically and take control of their lives (Nussbaum, 2011).

A majority of female participants had dropped out of school, citing financial problems, lack of familial support, and marriage as major reasons.

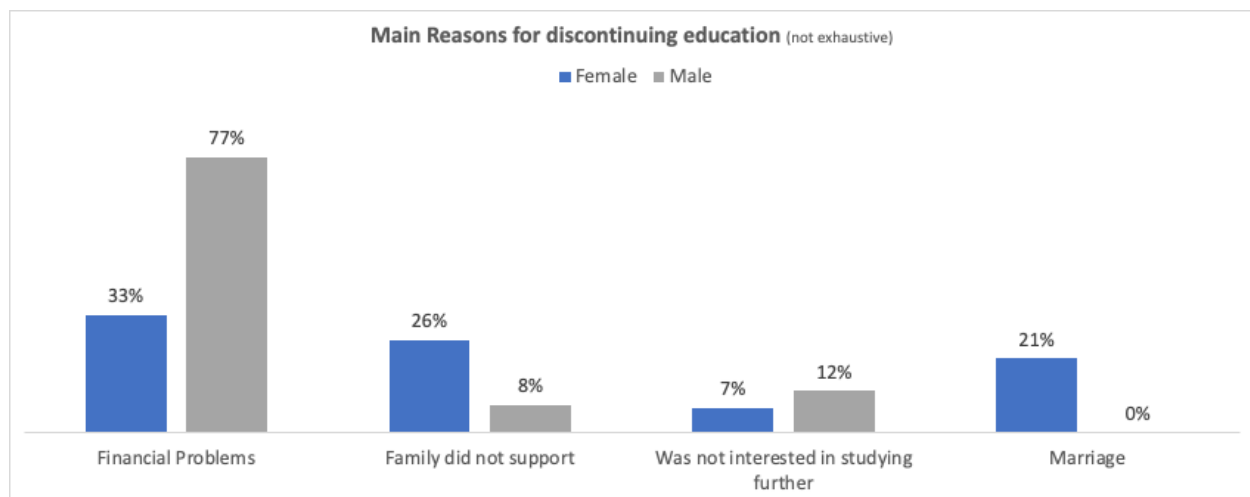


Figure 30

Bar graph depicting Reasons for Dropping out of the Respondents

While financial constraints were a primary reason for both genders, women faced additional barriers such as family opposition and early marriage. Women were also less likely to receive parental support for education.

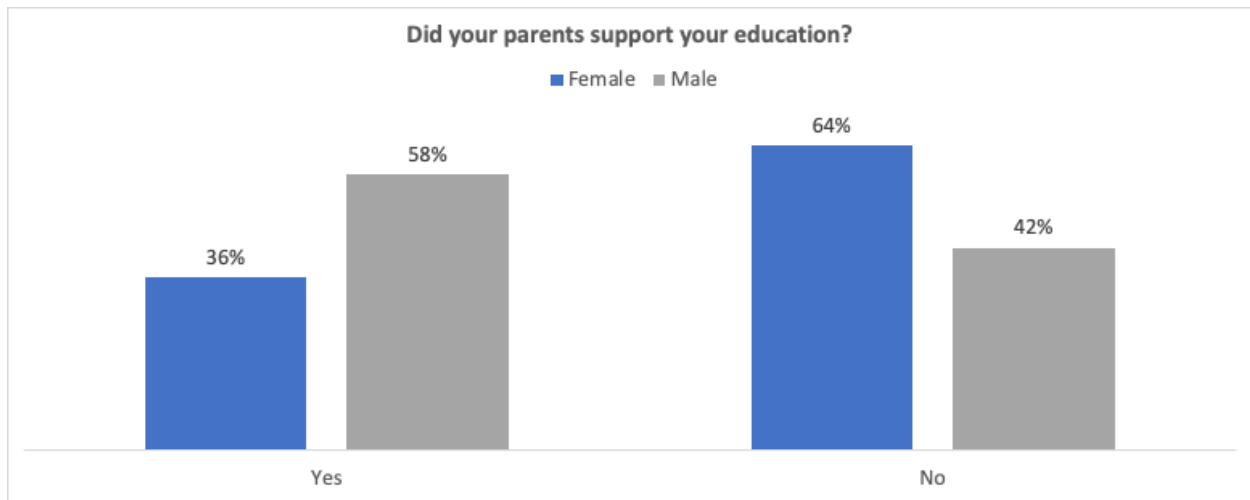


Figure 31
Bar graph depicting Parental Support for Education of the Respondents

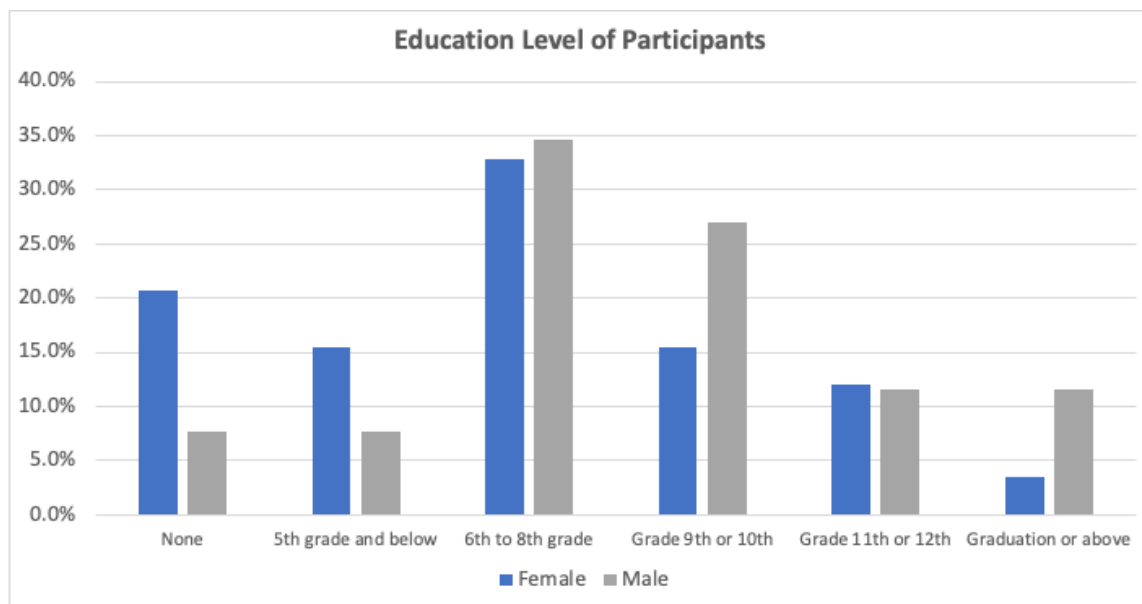


Figure 32
Education Levels of Participants - Gender Disaggregated

The data shows that women are overrepresented in lower education levels. About 20% of female respondents were denied schooling, compared to 7% of men.

Poverty remains a key factor in girls' education. Families often prioritize sons' schooling over daughters' due to economic constraints (UNICEF, 2018). In-depth interviews revealed an absence of government schools, forcing families to rely on costly private institutions:

“Most of the income goes into project materials and homework. They keep saying they need this and that. The fees aren't much, but the extras add up.” (KII, Woman respondent)

Early marriage is another major reason girls leave school. Research suggests that higher education demands a higher dowry, making educated girls less desirable for marriage (Singh, 2018). However, a positive shift was observed as many participants expressed strong support for their daughters' education.

Impact of the Pandemic on Education

The COVID-19 pandemic severely disrupted education, especially for marginalized communities. School closures and remote learning disproportionately affected low-income students (UNESCO, 2021). The digital divide meant many students lacked access to online education (UNESCO, 2020).

Respondents expressed concerns over online learning:

“How do I pay for internet and a smartphone on my reduced earnings? My child couldn't ask questions or get feedback properly.” (FGD 1, P2)

Teachers also excluded students who could not pay fees on time:

“They simply removed children from online groups if fees were delayed. How could we afford school fees, new phones, and internet balances all at once?” (FGD 1, P1)

Many parents struggled with technology:

“My child asked me for help with his work. I couldn't understand that device, so what could I do?” (FGD 1, P10)

With automatic promotions, many feared the long-term impacts on their children's education:

“They mainly played on their phones. They were all passed in their exams for two years. How will these kids get jobs later?” (FGD 1, P7)

Time Poverty

Women's ability to engage in intellectual and creative activities is hindered by time poverty. According to Hyde et al. (2020), time poverty results from unpaid care responsibilities, long working hours, and rigid gender roles, negatively affecting women's well-being and agency.

Women spent significantly more time on domestic labor than men, limiting their ability to engage in personal growth.

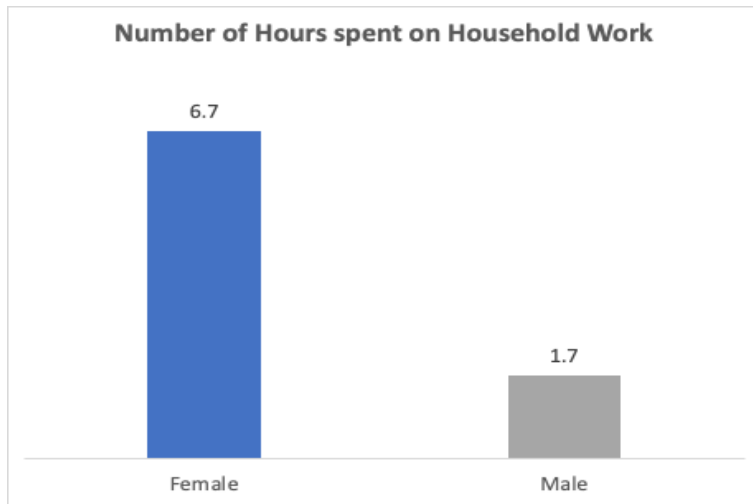


Figure 33

Graph showing number of hours spent on household work between males and females.

Women (6.7 hours) spent far more time in unpaid domestic labor than men (1.7 hours). Male respondents largely dismissed domestic work as a female responsibility:

“Of course not. There’s a wife for that.” (Interview, male respondent)

Even in households without female members, caregiving roles were outsourced to female relatives rather than shared among men. This rigid gender division reinforces women’s time poverty and economic dependence.

Digital Poverty

Limited access to technology is another challenge for women in India. Women are less likely than men to own smartphones or have internet access, restricting their participation in the digital economy (Kumar, 2021).

A National Sample Survey Organisation (NSSO) report found that only 14% of rural women have smartphones, compared to 29% of men (NSSO, 2018). Similarly, an Internet and Mobile Association of India study found that only 33% of rural internet users are women (IAMAI, 2019). The digital divide is especially pronounced among marginalized communities, including Dalits, Adivasis, and Muslims (Kumar, 2021).

Street vendors highlighted how the shift to digital payments affected their livelihoods:

“Customers come with mobiles for payment. They don’t have cash. But where will we get mobiles for online payments?” (FGD 2, P7)

Despite technological advancements, vendors faced barriers due to their reliance on cash-based supply chains:

“We sell vegetables. The suppliers come every morning and only accept cash. If we don’t have it, we don’t get goods.” (FGD 2, P6)

Many could not afford smartphones or internet plans, preventing them from accessing government economic support programs:

“We can’t use GPay. Our suppliers don’t accept it, and we can’t afford a smartphone or data recharge.” (FGD 2, P4)

Ironically, despite digital poverty, many rooftops in the study area housed cell towers. When questioned about potential health risks, respondents dismissed concerns in favor of the rental income they received. This highlights a paradox—communities hosting the infrastructure of digital advancement remain excluded from its benefits.

Affiliation and Control Over One's Environment

Women's influence over public spaces is severely restricted, as captured in Nussbaum's (2000) capabilities of affiliation and control over one's environment. Affiliation refers to the ability to form and maintain social relationships, while control over one's environment entails shaping one's physical surroundings and exerting influence over life circumstances. In India, these capabilities are critical for women's well-being, yet gender norms and systemic barriers often limit their mobility and participation in decision-making processes (Kabeer, 2001; Sen, 2001).

Infrastructural Poverty

Infrastructural poverty is a significant barrier to women's well-being, particularly in low-income areas. Women disproportionately face challenges due to inadequate infrastructure, including lack of access to clean water, sanitation, healthcare, and transportation (WHO/UNICEF, 2019). These deficits affect their health, education, economic opportunities, and overall social well-being.

One prominent issue is water access. In the surveyed area, residents rely on municipal water pipes or an informal network managed by private merchants. Access is limited, requiring residents to queue at specific times. Some must pay for water from private sources, adding financial strain. The burden of fetching water falls primarily on women, affecting their time and opportunities.

Sanitation is another critical concern. A key theme emerging from FGD 2 was the disproportionate impact of poor sanitation facilities on women's health. In one interview, a male respondent described his bedridden mother's injury due to the lack of an elevator in their building:

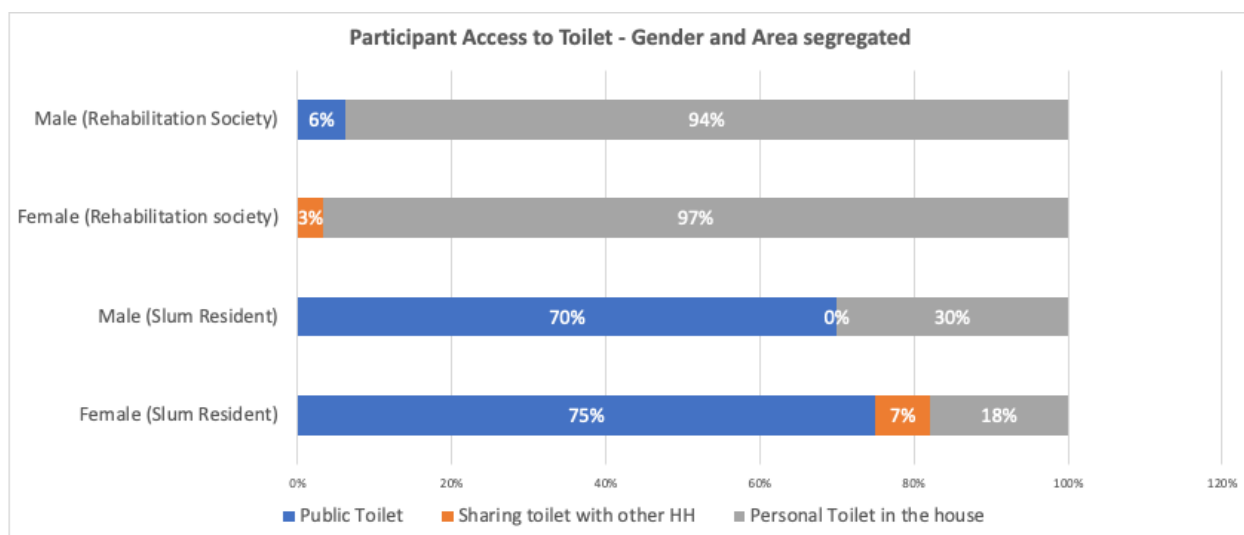


Figure 34

Graph showing access of toilet of people living in slum area and rehabilitation area - gender segregated.

“She was going down the stairs as we don’t have a lift in this building, and we live on the fourth floor. She is aged now and couldn’t make the climb before as well. But this time, she fell, and there is a gap in her backbone and hip.” (KII, Male Respondent)

This lack of infrastructure limits women more than men, as they often bear the primary responsibility for domestic work. Another elderly male respondent mentioned his wife’s struggles due to the absence of an elevator, whereas his occupation as an auto driver allowed him greater mobility despite mobility issues.

Public toilets, a necessity for slum dwellers, are poorly maintained, leading to unhygienic conditions. In one community, residents had to jointly pay for cleaning services, yet the facility remained in poor shape. Another area’s public toilet had been privatized, imposing restrictive hours that disproportionately affected women:



Figure 35

Image showing poorly maintained, uncovered drains.



Figure 36

Image showing Construction of new drainage is underway in the background, while blocked and damaged drainage is at the front.



Figure 37

Image shows A public toilet used by residents, poorly maintained and dumped with garbage

“It’s just open from 5 to 12 in the mornings. And they don’t even wait till 12:05 to close it. It shuts before 12 on most days, in fact... We have trained our kids to go early in the morning before school. But it is very difficult for us, women.” (FGD 2, P1)

Men faced fewer issues as they could urinate in open spaces, whereas women required privacy, particularly those working as street vendors in the evening:

“Men don’t have a problem. They can just unzip their pants and go anytime, anywhere. But we need privacy. And in the evenings, that is a real problem because we’re outside with our vending carts.” (FGD 2, P5)

Poor sanitation and infrastructure directly hinder women’s economic participation, safety, and dignity.

Political/Representational Poverty

Nussbaum (2011) defines political representation as the ability to participate in decision-making, exercise rights, and influence policy. Women's underrepresentation in politics perpetuates gender inequality, limits empowerment, and hinders gender-sensitive policymaking (Mukhopadhyay & Higgins, 2020; Celis, 2019). Studies show that higher female political representation correlates with increased social spending on education, healthcare, and employment equality (Duflo & Topalova, 2004).

Survey data on voting behavior in the last state elections revealed that a higher proportion of women voted than men. The primary reason for male non-voters was the lack of a voter ID (four male respondents), while one male respondent cited disinterest. Among women, seven out of eight non-voters lacked voter IDs, indicating that if IDs were accessible, nearly all women in the area would vote.

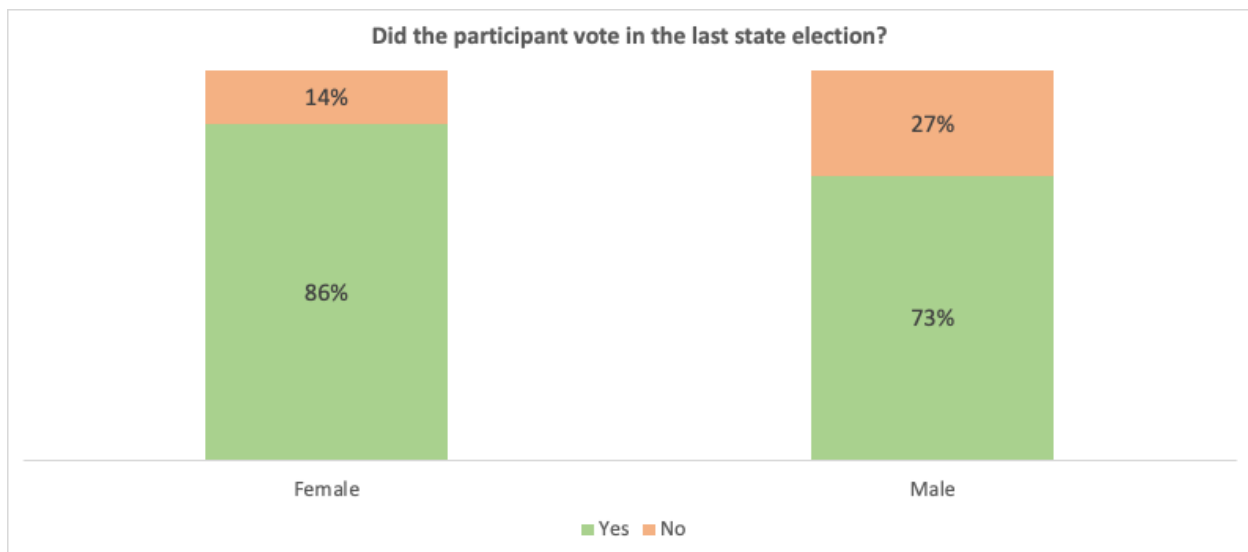


Figure 38

Graph showing the percentage of male-female respondents who voted in the last state election

However, decision-making in voting remained influenced by household dynamics. While 46% of women said they voted independently, 20% admitted to voting as instructed by male family members. By contrast, only 5% of men reported voting based on family influence.

why people voted for the candidates, and if they really were politically aware.

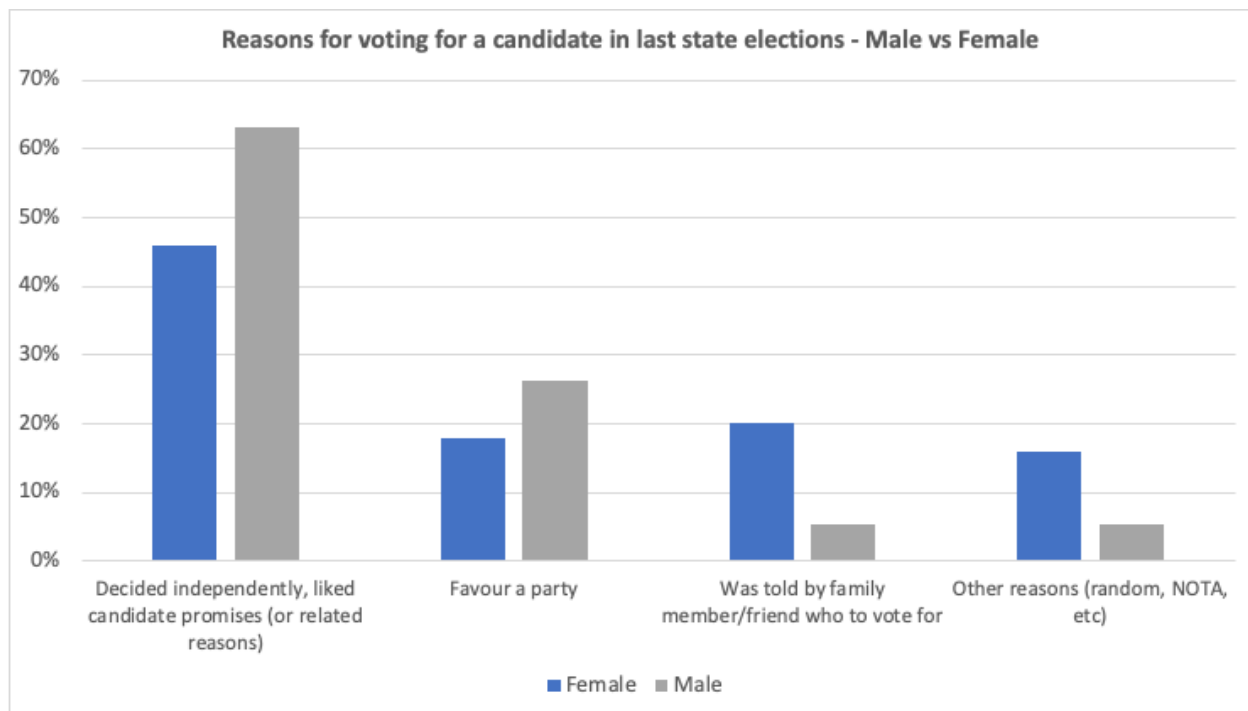


Figure 39

Graph showing Male-Female Respondents Reasons For Voting For A Candidate In The Last Election

Despite women's active participation in voting, their representation in leadership remained limited. Most respondents, regardless of gender, had never held a political position. A significant proportion of men (27%) opposed increasing female political representation, compared to 14% of women. This resistance was reflected in qualitative interviews:

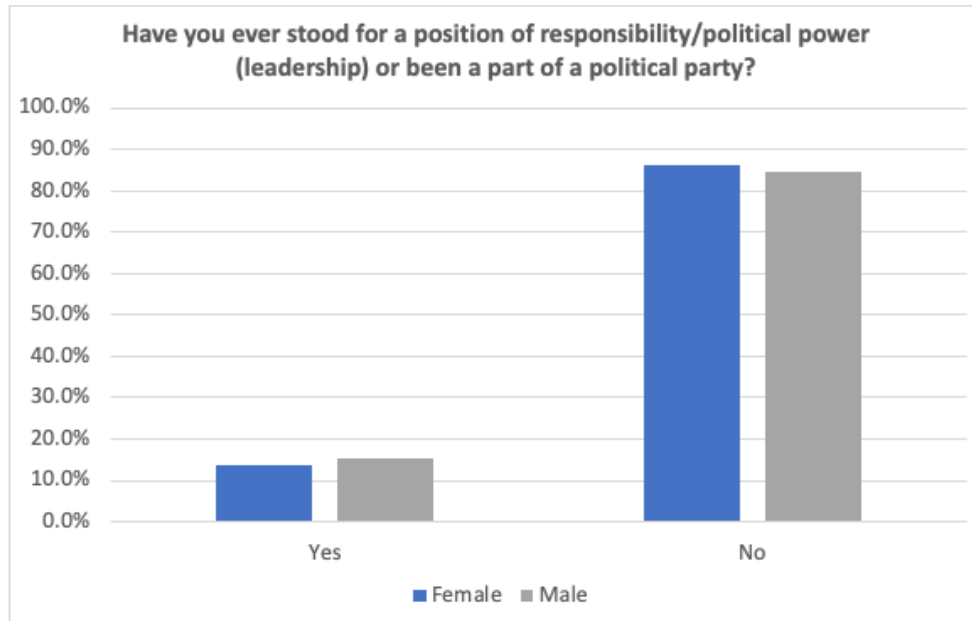


Figure 40

Graph showing male-female respondents' tendency to take up positions of responsibility

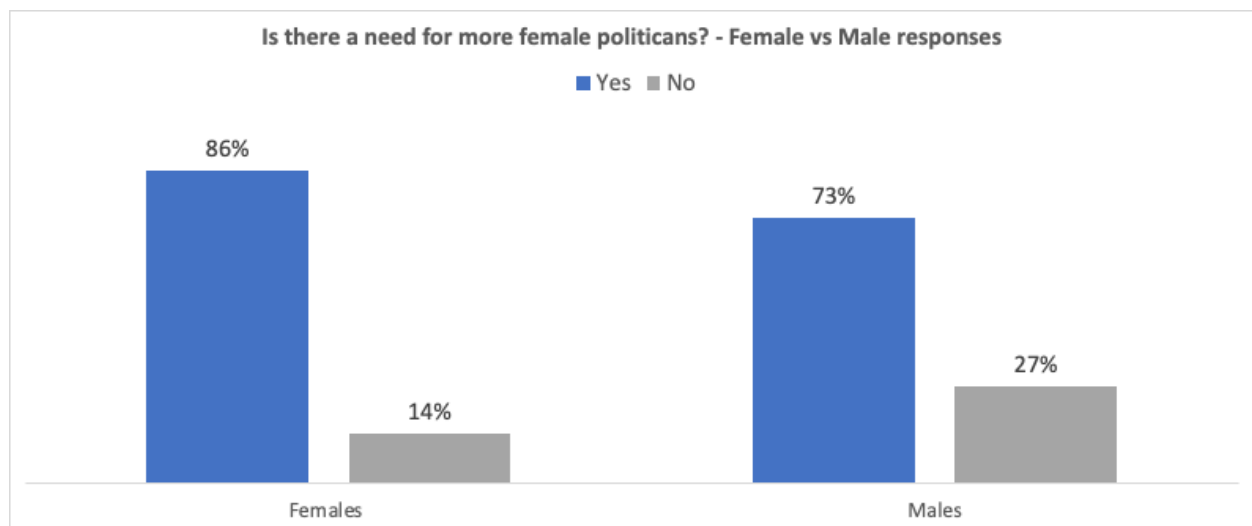


Figure 41

Graph showing male-female respondents' opinions on the need for more female politicians

“No, I don’t think there should be female candidates in politics. See, females can never care for communities. They’ll just fill their own household coffers, because they care mostly for their own families and houses. They’ll be corrupt and inefficient like that.” (KII, Male Respondent)

Women, however, had a different perspective on female political participation. One social worker expressed how standing for elections shifted perceptions about women:

“Remember Medha Patkar? That’s what you all make of us women when we stand for elections. We are good as social workers, but the moment I go out there to seek power in an election, people’s ‘eyes’ change. My ‘image’ changes.” (KII, Social Worker)

Women street vendors also reported a lack of political support, especially during crises like the COVID-19 pandemic:

“No one came. No one came to ask us about our problems. They only came to shut down our stalls. No one was there to hear us.” (FGD 2)

Community Support as a Pathway to Empowerment

One of Yuva’s main initiatives involves securing documentation and support programs for informal workers, hawkers, and homeowners. On March 20, Yuva led a women’s delegation to the BMC office to request hawker licenses. Such collective actions enhance women’s access to rights and opportunities.

Kiran, a transwoman from Kolkata, migrated to M East Ward in 1997 and shared her journey:

“See, when we try to step out, we never get any support. Not for education, not for our gender needs, not for getting employment. We beg and enter sex work. Even there, we never get support, not even from the community. That’s why it was important for me to get support, and after I scored 90% in my 12th-grade examination, I went with Yuva’s help to apply for jobs. I got one online three years ago. I trained in operating computers and working with some software there, and today I have a well-paying job.” (KII, Kiran)

Kiran highlighted a broader issue: the shift from permanent to contractual labor, which disproportionately affects marginalized groups:

“There are no permanent ‘jobs’ today. Only contractual labor. Those who entered employment earlier (mostly men) secured permanent jobs and use community networks to keep winning those

ances. When we apply, we only get short-term contracts with little experience or training. After our contracts end, we're told to leave because we 'can't do anything more.' Those with permanent jobs learn more and build networks. We need to support each other and receive external support too.” (KII, Kiran)

Kiran's experience underscores the importance of community networks and institutional support in overcoming systemic barriers to women's empowerment. By facilitating access to education, employment, and political participation, collective efforts can help women and marginalized communities gain greater control over their lives and spaces.

Community Support as a pathway to empowerment



Figure 44

Women engaged in papad making

One of the main themes of Yuva's activities is seeking documentation and access to support programs for workers in informal work, hawkers, vendors, and homeowners - whether it is registrations for their house or vending cart, documentation as workers for social support, or verification of licenses for small businesses. On March 20, the Yuva organization led a women's delegation to the BMC office to request approval for licenses for female hawkers.

This access has a 'collective' aspect, as was expressed continuously by Kiran, a transwoman from

Kolkata who migrated to M East ward in 1997 as a child:

“See, when we try to step out, we never get any support. Not for education, not for our gender need, not for getting an employment. We beg and enter sex work. Even there we never get any support, not even from the community. That’s why it was important for me to get support and after I scored 90% in my 12th grade examination, I went with the help of Yuva to apply for jobs. I got one online 3 years ago. I trained in operating computers and working with some software there, and today I have a well-paying job.” (KII, Kiran)

Conclusion

The findings of this study illustrate the urgent need for a gender-sensitive approach to addressing poverty in the era of poly-crisis. As poly-crisis becomes "permacrisis," its impact on poverty manifests in gendered inequalities that go beyond economic deprivation. The data and analysis reveal stark disparities in education, healthcare access, economic participation, and political agency, demonstrating that women experience a distinct and multifaceted "poverty penalty." A key takeaway from the research is that gender-based poverty cannot be addressed through monetary solutions alone. Women in marginalized communities face compounded disadvantages, from limited parental support in education to restrictions in decision-making over healthcare and household finances. The pandemic further deepened these inequalities, with women suffering greater income losses than men, despite an increase in their workforce participation. However, qualitative insights indicate that this increase was often out of desperation rather than empowerment.

The study also highlights entrenched socio-cultural norms that perpetuate gender inequalities. The justification of domestic violence among both men and women signals the need for behavioral and attitudinal shifts alongside policy interventions. Moreover, the dual economies within households, where women manage expenses while men often divert earnings toward non-essential consumption, further exacerbate financial insecurity for women.

The proposed solutions emphasize a multi-pronged approach to tackling these challenges. Economic support tailored to women, such as gender-sensitive entrepreneurial policies and community-based savings initiatives, can enhance financial independence. Infrastructure improvements, particularly in sanitation and public spaces, can create safer and more accessible environments for women. Recognizing and redistributing unpaid domestic labor is crucial for achieving greater gender equality within households.

Additionally, raising awareness about the impacts of economic and domestic violence, alongside efforts to increase women's leadership in community decision-making, is essential for long-term social transformation. Programs like leadership seminars, constitution workshops, and female-led civic initiatives can empower women to claim positions of authority. Access to healthcare and education must also be expanded through advocacy for policy reforms, such as a state-wide Right to Health Bill and the establishment of women's-only educational institutions.

The research underscores the necessity of community involvement in effecting change. Civil society organizations, like Yuva, play a crucial role in bridging gaps in service delivery, promoting women's agency, and advocating for systemic reforms. By creating inclusive spaces for discourse and ensuring that women's issues receive dedicated attention, meaningful progress can be achieved.

Ultimately, addressing poly-poverty in the context of poly-crisis requires a paradigm shift in how poverty is understood and tackled. It demands policies and interventions that acknowledge the unique vulnerabilities women face and provide targeted, sustainable solutions. As the findings demonstrate, gender-sensitive approaches are not only necessary for equity but also essential for the overall resilience and development of marginalized communities. Without addressing these systemic gender disparities, efforts to reduce poverty will remain incomplete.

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Declaration of Competing Interest –

The authors have pursued this research independently and without any financial interests or funding.