Understanding the Gender and Household Dimensions of Health in the Context of Economic Change

As noted in the previous section, the impact of economic policies and the subsequent sectoral changes show considerable regional variation. While much of the assessment of the impact of the reforms is done in terms of the growth or decline in incomes and the reduction of poverty, we would, in this section like to take account of the micro-level effects that would be visible at the level of the household. Apart from income, various aspects of the household’s welfare are affected by economic transformation. These include intangible variables, which nonetheless have a deep impact on the quality of life. Some of these include the household’s non-working time (time for leisure, socialisation and community life), a basic right to access to services such as education, health and housing (without regard for capacity to pay), the living and working environment of the household and its members and access to social support structures which provide security and participation in the collective life, even when they are not directly providing income, goods or services. (Woodward;1992). It is evident that any effect on the both the wage and non-wage income of the household will significantly affect women’s lives.

In any period of transformation, households are invariably compelled to respond to the new challenges posed by the process of transformation. Households, especially wage-earning households, respond to such changes by redistributing their existing resources and reallocating work responsibilities. The combination of wage income and non-wage income undergoes alteration in response to changes in the opportunity for employment, direct transfers from the state and other sources and the demand for cash income of the household. Logically, therefore, in order to measure the impact of a policy or programme, it is essential to take into consideration, not merely the change in wage/income, but also the impact on these aspects of life.

*Sectoral effects*

Although the impact of this phase of economic change has been varied in different regions, one can point to certain changes that are visible universally and which have considerable impact on the lives of individual households. These include diminishing role of the state in the economy and the social sector; the relative decline in formal sector employment and informalisation of production, the penetration of the market into geographically remote areas as well as customarily non-market (household) sector of production and consumption; and a greater impact of global market changes (of goods and services) on the local economy (in terms of availability of employment and the prices of commodities).

These processes have a spiralling effect on the entire economy and society, affecting employment, gender relations, social structures and cultural values. The wage earning households, which are the focus of our study are deeply influenced by these changes, albeit in different ways. Even within the same area, seemingly contradictory effects can be seen. From the point of view of women, it is evident that both gains and losses have resulted from the process of economic change.

*Modernisation and development*

The experiment of development in the third world essentially involved a process of modernisation, conceived as a process that not merely influenced the mode of production, but also the social sphere. As Scott notes, 'For modernisation theory, development requires the emergence of rational and industrial man, an individual who is receptive to new ideas, acknowledges different opinions, is punctual and optimistic and believes that rewards should be distributed on the basis of universalistic rules...The counterpart of the modern man is the modern and efficient state, one that evolves towards an increasingly differentiated capacity to penetrate
In India, the goal of social transformation implicitly involved active intervention of the state. It was achieved directly through legislation and the institution of democratic structures, and indirectly through the process of economic development and, importantly, through welfare.

The fact that the political process on which we relied for the establishment of democracy was heavily weighted against women came as no surprise at all. However, it is now widely acknowledged that the process of ‘development’ in general is also not gender-neutral and it does not, automatically include those who live and work at the margins of society. In addition to this, one the most significant outcomes of the globalisation process has been the easing of the moral imperative to establish a welfare state.

The most pervasive experience among the wage-earning households has been that of ‘uncertainty’. This uncertainty relates, not merely to the availability of employment (a dominant feature of the informal sector), but also to the increasing fluctuation in prices of essential commodities and consumer goods and uncertainty of access to transfers from the state in the social sector (for e.g. seeking treatment in government health facility does not mean that no cost (or predictable costs) will have to be incurred, because most of the goods and services associated with the health care have to be bought from the open market). Thus, on the one hand, the cycles of the growth and stagnation are becoming shorter, making it difficult for households to predict the availability of work and income even for relatively short periods (a season, a year), on the other hand, the increased dependence of the market makes it difficult to budget household resources, especially to tide over certain unforeseen crises, such as illness. (at a time when the availability of free services can not be relied on).

**Patriarchy and the household in the development process**

By the late 1960s itself, it was becoming increasingly clear that without engaging with the patriarchal structure of the household, it would not be possible to reach women. Studies, emerging from the South Asian countries in the 1980s, especially, revealed that there were significant intra-household inequalities in physical well-being (survival, nutrition, health status) primarily on the lines of age and gender. On the other hand, anthropological studies were also challenging the notion that the ‘allocational outcomes of households could be attributed to a unified decision-making process, based on rational choice, and suggested instead that such outcomes reflected differential obligations and interests among household members which led them to allocate resources within their jurisdiction in systematically different ways’. (Kabeer; 1998; pg 94)

However, as the state withdraws from the public sphere and the political imperative to make commitments towards welfare is weakened it is unthinkable that the state can act as the catalyst for change in the private sphere. Thus, in general, in the present scenario, we find an increasing reluctance to engage with the traditional structures of the household and community. This abdication, though subtle, is significant as it marks a radical break in the ideological thrust of state policy.

By elevating the family and household to a sacrosanct position, we risk relegating women to an intractably hierarchical space. The neo-liberal influence on global and state policy also does not allow for the household to be opened up for analysis, because it looks to the household to act as a buffer during the period of adjustment. Undoubtedly, the household stands as a buffer ensuring survival for those vulnerable members whose livelihoods are threatened by the changes in the nature of society and evolves new means of solving the problems of development.’ (Scott; 1996; pg 5)
production. However, the household is also the site where women must,
unconditionally, work harder and longer to ensure that survival.

As Uberoi notes “The family – as a concept, as an ideal- is now being addresses with
some urgency and much publicity in social development policy statements for the
simple reason that that it is expected that the family will increasingly have to take on
itself an augmented burden of social welfare. This is presumably what was
highlighted in the original focus of the IYF (International Year of the Family) on
“resources and responsibilities in a changing world” and it is if inexplicitly so – a
gender issue of major importance for the simple reason that, in almost all societies
the major burden of ‘care’ falls unevenly on women. That is, to shift the burden of
social welfare provisioning from the state to the family must affect women much more
than it affects men, adding to their household responsibilities and reducing their
competitiveness in the employment market. (Uberoi; 1999; 278)

While it is evident that even the conventional development strategies adopted in the
first three decades of independence were also largely gender blind, there had been a
space to critique the strategies and formulate alternatives. An important precondition
for this was the existence of the state as a key player, which could be exhorted, to
intervene actively and proactively in the interest of women. Significant areas for
intervention were programmes for especially rural, development and social welfare. As
the role of the state of these spheres diminishes, (regardless of whether actual funding
and allocation has declined), the opportunity for distinguishing women’s interest from
that of the household has been lost.

It is in this context that women’s role in the household is undergoing change, even as
the basic inequity in the institution of the family is maintained. Women, thus, seek
out paid employment to provide the werewithal for survival or the means to maintain
a certain standard of living. On the other hand, they intensify their effort in the realm
of unpaid work to cope with crises and to compensate for the decline/instability in
wage and non-wage incomes.

Employment of women

Among the most consistent trends in women’s employment has been the increasing
participation of women in wage labour. The proportion of female workers in both
agricultural and non-agricultural labour is rising steadily. The entry of women in the
urban informal sector has also been quite substantial. Women workers are largely
being absorbed into the lowest strata of wage-work in the manufacturing sector,
community services and petty trade. Women are being employed in large numbers in
small informal sector units (e.g. in export production) in the manufacturing sector.
There has been an increase in putting out system and subsequent increase in home-
based workers (engaged in manufacturing, rather than traditional crafts).

Women, in general, are very unlikely to receive formal education and training in skills
that command a high wage. Highly skilled work, such as stitching or cooking, when it
enters the monetised economy, automatically gets redefined as unskilled labour.
These skills, which are learnt at the cost of the household, are widespread and,
hence, have very low economic value. Apart from the fact that there is an abundant
supply of female labour, the fact that women’s paid work is seen as an extension of
domestic role provides justification for classifying women’s work (which is
traditionally unpaid) as unskilled.

Women are compelled to enter the workforce in order to compensate for the loss of
traditional livelihoods (such as cultivation and handicrafts) and to supplement the
incomes of male workers who have themselves, been pushed into the informal sector.
Nonetheless, the social organisation of the household, which evolved around the
ownership of land by the male head of the household or the concept of the single male
breadwinner, has not undergone change. The assimilation of women’s wage work into
the existing social organisation has been facilitated and undoubtedly also necessitated the informalisation of industrial sector, which relies on sub-contracting and home-based work. The fragmentation of the production process, which results out of the above-mentioned organisation of production enables manufacturers to absorb women workers without having to invest in skill enhancement or giving them full worker status.

Women, who enter the workforce, ideologically as supplementary earners more readily, accept the conditions of work in the informal sector. The low prospect of skill enhancement, uncertain tenure and fluctuations in income (as experienced by piece rate workers) do not inhibit women workers as much as male workers. The fact that women do not regard wage work as a permanent or even predictable phase plays an important role in their decision-making. As Elson notes in the case of women workers in the export production units in the developing countries, 'Women are considered not only to have naturally nimble fingers, but also to be naturally more docile and willing to accept tough work discipline, and naturally more suited to tedious, repetitive, monotonous work. Their lower wages are attributed to their secondary status in the labour market, which is seen as a natural consequence of their capacity to bear children... Indeed the phenomenon of women leaving employment in the factory when they get married or pregnant is known as 'natural wastage' and can be highly advantageous to firms which periodically need to vary the size of their labour force to adjust to fluctuating demand for their output in the world market.' (Elson; 1997; pg 193). While, in India, export production does not constitute a large proportion of the manufacturing sector, 'flexibility' is required even for manufacturers producing for the domestic market in the face of increasing competition and to evade the labour laws that apply to units employing more than ten workers (as permanent workers).

Marriage, motherhood, illness in the family or even reasonable stability in the income of the male workers could signal the end of a particular phase of employment. Thus, labour intensive, but highly routinised and fragmented operations are well suited for employing female labour. There is a floating population of women workers who periodically seek employment and periodically drop out of the labour market, which the employers can draw upon at will.

Apart from the fact that women may not identify themselves as workers, the social organisation of such production is an extension of the household. Not only does this limit the opportunities available to individual women, it also makes it logical for the patriarchal structure of the household to be transplanted to the work sphere.

The social construction of women’s employment as an extension of domestic work promotes an ideological conservatism that leaves gender relations and the sexual division of labour in place. This belies the hope that increase in women’s employment would on the one hand necessitate a shift of the burden of domestic work to male household members and, the experience of paid work and modern social structures would engender more equality in the workplace. There has also been no clear indication that individual income increases the welfare of women through an increase of allocation of household resources (food, leisure, land) for women. Women’s employment has inevitably led to the widely recognised phenomenon of ‘double burden’ which essentially involves the intensification of work due to the combination of paid and unpaid labour. While this phenomenon is not unique to the phase of globalisation, the phenomenal growth of women’s workforce participation in this period has brought significantly more women into the lower rungs of the wage market as semi-skilled, highly substitutable, low value workers.

The importance of employment for women can never be denied. The opportunities for wage work outside the agricultural sector may have other liberating aspects, especially freedom from customary obligations associated with caste. Even women workers in the urban areas may prefer wage work in the ‘modern’ sector to being domestic workers because it offers them a higher social status. The employment
opportunities for women, in whatever form, also ensure the physical survival of the household. It has also been widely observed that increase in incomes of women tends to have a positive effect on the survival of children, and girl children in particular. However, it is still regrettable that absorption of women into the workforce neither provides any substantial security of income nor shows any significant potential for personal advancement.

The household

Although the burden of unpaid work falls disproportionately on women, the survival of women is inextricably linked to the fate of the household. During the period of transformation, pressure is exerted on the household by external forces. Traditional wage-earners may get displaced or their incomes may declines, while sources of non-wage income, through subsistence farming, access to free goods (forest produce, medicinal plants, common pasture land, water resources etc.) may be denied or these may get commodified, even while opportunities for employment may arise for women and children, with a resultant increase in cash income. Households may, on the one hand, gain access to the commodity market and women may have the choice to purchase goods and services, that hitherto, had to be produced in the home. (For e.g. processed food such as bread is more readily available.) On the other hand, women may have to travel further to gather fuel and fodder, free of cost, if the rights to these are acquired by private parties for commercial exploitation.

The implications for women is an intensification of time and effort contribution to domestic work. Women may be compelled to put in more efforts to increase the household production of goods and services, both for self consumption and for sale. When household face a financial crisis, even of a short duration, This may be done for e.g. by substituting market goods such as clothes with home-made goods and by constructing/repairing the house or their own (because there is no money to pay professional masons). Women may extend their domestic work to produce for the sale in the external market For e.g. through participation in income generation schemes and micro-credit programmes.

The withdrawal of state finance for social and physical infrastructure may result in an intensification of domestic work to cope with the deterioration/ withdrawal of access to the infrastructure. This process may be particularly pronounced where the physical environment is undergoing transformation, for e.g. from rural to semi-urban. Newly developing areas are provided with only the basic facilities, while private capital is expected to provide for the remainder. In order to facilitate economic production, certain facilities may be developed by the private sector. These may also be made available to the households in the neighbouring area. Certain amenities such as water may, in fact, be made more readily available. However, it is very unlikely that certain 'public goods' such as sanitation and preventive health measures, such as water purification, are unlikely to be developed through private investment. Thus, the urbanisation of the area may lead to increase in the density of dwellings and may cause drainage systems or toilet facilities to collapse under the burden of more intensive use. Access to open space may get considerably more restricted.

Apart from the physical infrastructure, the primary objective of social welfare may be increasingly difficult for households and women to attain. Although the welfare provisions in India were never extensive, the promise that, at least, the most basic health and education services will be provided is being reneged. Health and education programmes, in as much as they are free of cost and at least overtly do not discriminate between men and women allow women to survive in the face of neglect within the household. For e.g. a supplementary nutrition programme may bridge the vital gap and, at least, partially compensate for the differential food allocation in very poor households. Girls may get immunised as part of a mass drive, where households do not have to incur costs on travel and in terms of time.
In addition to this, social sector services directly aid women to improve the standard of living of the household and their own prospects. As Ranadive notes, “The sum total of direct of the welfare effects lies in their capacity to aid the poor household to cope with survival. It also lies in the issue related to the quality of life. When the reach of the social sector services is inadequate, shortfalls are made up for within households, since families generally look after their own”. (Ranadive; 2000; pg 20)

However, the subsequent adjustment of priorities may adversely affect women. When education is free and easily accessible, girls are more likely to be sent to school. However, imposing a cost, no matter how nominal make weaken the households’ commitment to girls’ schooling. The effect of uncertainty in household income may be similar. 'Most poor people are forced to restructure their family budgets on account of lack of availability of sustained subsistence level employment throughout the year. It has been noted that the first victims in such restructuring are usually the needs of the female members of the family, their needs are generally perceived as low priority needs. Girls are either kept away from schools or are left to fend for themselves in the schools. Most such girls tend to drop out on account of lack of sustained support to stay on in the schools.' (Bhatia; 1994; pg 227)

The proponents of globalisation themselves insist on the provision of social services to act as a safety net for households living in poverty and those that slip into the category of the poor as a result of the restructuring process. They also continuously highlight the pivotal role that women play in the household. However, given the low commitment to welfare, that aspect of the reforms package has been effectively sidelined. While there is a dire need to redirect more resources towards primary education and health, this should not be done at the cost of existing allocation to these sectors. There is a consistent move away from programme having a wide coverage to targeted, single purpose, single target group oriented programmes. The 'targeting' of women for such programmes may prove ineffective, as has been discussed above, unless there is a readiness to engage with the discrimination that women as a sex face in the private sphere. In the existing circumstances, the need for a comprehensive coverage of the entire population is very necessary, before specific groups are targeted and their needs addressed. In a situation, where different household members compete for the same set of goods or services, it is very unlikely that women will be able to retain control over their share of the resources.

On the other hand, the general thrust of the markets’ strategy (and its complementary rhetoric) lies in assigning economically unprofitable, but indispensable welfare functions to the household, while integrating other traditionally non-economic activities into the market. For e.g., there is an interest in introducing automation into daily domestic chores for the development and marketing of household gadgets and appliances, but it reiterates that the care of the elderly and chronically ill, which is equally arduous, is an expression of feminine love, which is the basis of family life. Thus, women's unpaid work, subordination and lack of control over resources can be conveniently simultaneously obscured and highlighted.

The community

The emphasis on the community is an essential aspect of the strategy being recommended for poor households to cope with the impact of the SAP programmes. This emphasis is not merely on directly involving local communities in development programmes (as was also attempted earlier), but on conceptualising the community as a safety net for the poor. The emphasis on the community is also a logical corollary of the renewed enthusiasm for the institution of the family. Thus, there is an emphasis on the use of community resources to build infrastructures, provide social services and meet the needs of the new women workers. While, the community has traditionally contributed to the certain aspects of welfare such as childcare, the role of the community is visualised in much more comprehensive terms following the SAP. Multilateral and Bilateral agencies, which provide aid to governmental and non governmental organisations in the developing countries, have actively promoted the
implementation of community based initiatives and institutionalised the informal role of the local community. The ‘community’ as a vaguely defined entity is being legitimised as the true representative of the ‘people’s interest’ in contrast to the representatives elected through the formal democratic process and other political groups and organisations (e.g. trade unions). The effect of this move has not been entirely negative for women. These initiatives have created a space for women, which was not given to them within the more traditional forms of organisation (where considerable control over resources was involved). Women, for the first time, are getting a foothold in the public space and are able to foreground issues of local interest. They are getting experience and training in administration and organisation.

However, a completely uncritical view of the community as a panacea for all ills is totally unwarranted. Firstly, such a view obscures the conflict of interest that exist within any community structure. By constructing the community as largely consensual, fairly homogenous and independently capable of progressive action, the inherent contradictions of caste and class (let alone gender) are sought to be glossed over. Thus, it is important to note how much risk are players such as NGOs and funding agencies willing to take when women organise themselves and demand much more than limited developmental programmes.

Secondly, the stress imposed on the communities of the poor may, in fact, lead to their fragmentation. “What is alarming, however, is that globalisation seems to unleash forces that are likely to fragment communities. Studies have shown how important community and kin support are to the survival strategies of the poor, be they of the individual kind where relatives/neighbours look after children of women who go out to work or of the organised kind as illustrated above (a collective consumption group in Lima that runs a community kitchen). But with increased pressure on resources due to migration, inflation, unemployment, whether cohesiveness within communities will hold is anybody’s guess.” (Ranadive; 2000; pg 33)

The decline of the working class movement (whether as a result of the new economic order, or any other logic) and the depoliticisation of collective organisation, where the goal is to look inward for solutions rather than seek a legitimate share from the state or the economy, has created a space for the revival of more traditional identities. These identities are being viewed as more relevant because they not merely emphasise the existence of a collective identity but also form the basis for benevolent action. This process has fore-grounded the sustained importance of traditional communities, not merely for their role in building identity and social life, but also in the material provision of the essentials of life. However, the danger lies in the exploitation of these spaces for communal/ revivalist politics. The neglect to initiate reforms within the institutions may affect women very adversely. While women may receive material support from these groups, a revival of these identities threatens to push women into a more circumscribed space. While, it was earlier hoped that social change would result from the dissolution of these identities altogether, women must now engage with the orthodoxy of religious and caste institutions, which have shown remarkable resilience and antipathy to change. Significantly, such confrontations will have to take place without the context of a progressive mass movement.
Health

From the above analysis, it is possible to identify some specific effects that would have an impact on the health of women in the context of structural change. While, it is not aimed to outline the 'effects' on health resulting from the macro-level changes or household level strategies, certain pointers are being drawn to aid the analysis of the health impact.

Direct factors

Among the most significant determinants of health status is the availability of food and its quality. Households are very likely to alter their food composition in response to income changes the price and availability of food items. Apart from the fact that the economics of demand and supply may affect food purchasing and consumption, changes in the work schedule, cultural changes and the influence of the market on choices also determine food consumption. On the one hand, more cash income in the hands of women may lead to higher consumption of quality food in the household. In times of periodic crises, of course, actual consumption of food (luxury items such as meat and fruits) may decline periodically. On the other hand, an increase in the work burden of women may affect food preparation practices in the household. Women, who are too busy to cook, may be the worst victims of the subsequent decline in the quantity and variety of food consumed in the household.

A similar process affects the intangibles such as leisure and rest. The intensification of work may lead to an increase in the standard of living, but may considerably curtail the time available for rest and leisure. As Duvvary notes, “(yet) this very participation in the outside sphere can contribute to the deterioration of the health status of women given the multiplicity of women’s roles. Therefore, even in the best of situations with a people oriented health system, changes in the macro-economic sphere can translate, where women are concerned, into greater constraints and intensify the conflict of allocation of time. The extent to which women are stretched will determine the overall health implications for them. (Duvvary; 1999; pg. 62)

The changes in the living environment may similarly affect women’s health. While on the one hand, the living environment may improve with the provision of basic amenities, women entering the workforce may be exposed to toxins and other occupational hazards. The more intensive use of natural resources and physical infrastructure may increase women's work burden and substantially diminish the quality of life of the household.

Indirect factors

Apart from the direct determinants of health, the provision of health services, both curative and preventive play a significant role. An experience of almost 50 years of modern health care has prepared the ground for a market led health care system. The fact the more than three-fourths of the services utilised by households is in the private sector is well known. However, apart from providing health services, the market also helps to build a health culture. There is an increased perception of ill health and a widespread awareness of the medical treatment options that are ‘technically' available. However, their availability to the poor is severely limited by the fact that they must be purchased like other commodities in the market. This, undoubtedly, puts a sever burden on the poor households’ resources.

There does exist the possibility of rationing health services in manner in which the non poor are prevented from using government services or are made to pay for them. This process, however, involves very sensitive methods of means testing, which may not be feasible in the Indian context. It must also be remembered that short term fluctuations in income make many households on the margins of the poverty
vulnerable. The use of health care, unlike many other items of consumption, can not
postponed or cut down without very serious consequences. Hence, poor households
may be forced to pay for services that they are ‘technically’ entitled to, free of cost, due
to administrative delays and shortages of medicine and equipment. Apart from this,
the actual process of proving ‘poverty’ is humiliating for most users, especially when
users are labelled as non-poor, unless they can prove otherwise. Health institutions,
such as tertiary care hospitals, are very stringent about granting ‘free’ status to
patients because they have been directed to raise their own resources.

The influence of private insurance on the health sector may also drive up health care
costs, making health care even less accessible to the poor. It is pertinent to note that
most estimates of the health insurance market in India include only the middle and
upper classes. These automatically means that the poor, whose health risks are too
high to insure profitably, are to be left to fend for themselves. However, the services in
the private sector which are used by the poor and the non-poor are not vastly
different. Thus, a general increase in the cost of care due to insurance may have a
disastrous impact on the poor. On the one hand, they may find access to free health
care curtailed, on the other, the cost of using private health services (which is the
most common strategy to cope with the poor quality and low access of public health
services) may become astronomical.

The pressure on households to meet these needs may lead to drastic cuts in other
items of consumption and a reallocation of resources, apart from incurring debts. The
household, however, much less the women, can hardly ignore these needs. Even while
the household fulfil its responsibility to ensure the survival of the vulnerable members
including the aged and children, its able bodied and active members may
considerably economise on their own health needs. Thus, women may ignore their
health problems till they begin to affect their ability to work, or till they become life
threatening.

Similarly, the workers of the households may consciously seek employment where the
working conditions pose health risks if it offers even marginally higher returns. Such
work opportunities abound, especially in the casual sector where women are
predominant.

Thus, we observe that the resilience of the household and the community may
prevent a complete breakdown (reflected by rising mortality). However, apart from
changes in income levels, the most commonly used measure of poverty, significant
changes amy occur in the non-monetary aspects of the household’s welfare. Women
may bear a disproportionately higher cost, even while they may not gain equally from
any improvement. Thus, it is important to document the more subtle changes that
affect the quality of life of the poor and the specific impact on women.

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