



POOR WOMEN IN URBAN INDIA

ISSUES AND STRATEGIES



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BACKGROUND

The proportion of urban population in India is less than the global average of 54% (2014). However, urban population is set to expand dramatically in the next few decades. In India, the urban population is growing at a much faster rate than the rural growth rate over the last 100 years (Census 2011). The process of urbanization historically, across nations, has been associated with other important economic and social transformations, which have brought greater geographic mobility, lower fertility, longer life expectancy and population ageing.

In India, there have been several changes that have contributed to increased mobility and migration. Some of these factors include shift of workforce from agriculture to industry and tertiary activities, progress in the field of education, better transport and communication facilities and modernization of norms and values¹. Further withdrawal or displacement of workforce from rural economy and their absorption in urban sectors have created serious stress in receiving regions. The capacity of the cities and towns to assimilate the migrants by providing employment, access to land, basic amenities etc. are limited². This has led to growth of slums and currently the slum population in India stands at 65.4 million (2011).

It is generally recognised that poverty is experienced differently according to their gender, age, caste, class and ethnicity and within households. Income levels, food security and indeed life choices, are invariably influenced by these factors. The main burden from these inequitable power relations falls on women, the elderly, the disabled and young children, especially the girl child. If one looks at the economic activities of the urban poor, most are engaged in informal activities and women generally fall at the bottom and of the sub-contracting chain, performing the lowest paid activities such as home based prices and domestic services³. In urban settings, the family support chain often breaks down with women facing particular stresses as they attempt to balance their work and domestic tasks. The impact of media, alcohol, drugs etc. on conditions of worsening deprivation of women tend to exacerbate harassment and physical abuse within the households, the community and from employers. The health status of women and children, is also particularly bad in relation to men. CARE India, as part of its long term strategic programs focusses on empowering women in urban slums.

As part of this effort, CARE India carried out a field-based participatory research (2012-2013) to understand the status of livelihoods and empowerment of poor women in the slums of Delhi. This brief describes the findings from the research. In 2009-2014, CARE India carried out an intervention among poor migrants in urban spaces in Delhi/NCR, Mumbai and Kolkata. This brief also highlights some of the key learning from the intervention.

¹GOI (2009) India: Urban Poverty Report 2009, Min of Housing and Urban Poverty Alleviation, GOI

²Kundu, Amitabh. (2006): Trends and Patterns of Urbanization and their Economic Implications, Chapter 2, India Infrastructure Report 2006

³DFID, (2001) Urban Poverty and Vulnerability in India, August 2001.

DELHI SLUM INITIATIVE STUDY	EMPHASIS PROJECT
<p>Methodology:</p> <p>The study adopted the sustainable livelihoods framework (adapted) as the analytical framework and qualitative and participatory research as the methodology for this study. For the purpose of this study, we defined a ‘slum’ as ‘a marginal space’ and included Jhuggi Jhopri Clusters (JJC), Unauthorized Colonies (UCs), Resettlement Colonies (RCs), and Urban Villages (UVs) in our definition of ‘slums’. A total of 31 ‘slums’, comprising 10 JJC, 8 UVs, 8 UCs, and 5 RCs were selected, adopting a parallel sampling design and using an intensive Global Positioning System based sampling process. The study findings were validated and augmented with stakeholder consultation and further analysed to yield key areas for intervention.</p>	<p>Project Background:</p> <p>The project (2009-2014) worked with poor migrants in urban locations of Delhi/NCR, Mumbai and Kolkata/adjoining areas. Over a five-year period, the project reached about one hundred thousand migrants in the urban locations mentioned above. The project, though initially focussed on HIV and Health outcomes, kept the concerns and aspirations of the migrants at the core of its work and therefore worked on a number of issues, important to the communities. This included access to health, legal, livelihood, banks and education services.</p>
<p>Macro Trends and Context</p> <p>Demographic shift to double-income and nuclear households has generated increased employment opportunities for migrant and poor women who want to take up work as women domestic workers (WDWs) and childcare personnel. At the same time, this shift in their own households is reducing their social safety network and increasing a sense of isolation among them.</p>	<p>Key Strategies:</p> <p>Drop-in centres, community resource centres and helpdesks were located at strategic locations across the mobility continuum (source, transit and destination).</p> <p>Standardised, yet multi-lingual and context-specific, Social and Behavioural Change Communication materials (SBCC) were disseminated across the mobility continuum.</p>
<p>Migration is a reality and sexually transmitted infections (STIs) including HIV and AIDS pose a persistent threat among mobile communities who face lot of socioeconomic pressures and experience distress at destination. Over-supply of cheap labour in popular destinations like Delhi is also driving down wages and moving industrial work to informal spaces like colonies and to private residences. At the same time, emerging focus on sustainable business practices globally and greater concentration of manufacturers on their suppliers’ value-chains in developing and under-developed nations have increased the potential and possibility of recognition of informal sector and casual labour (including HBWs) who, till now, have remained largely invisible and devoid of living wages and worker benefits, as workers.</p>	<p>A network of 100 peer educators and volunteers was established that reached out to individuals, households and communities to inform and empower migrants and their families by providing information about referral services and safe mobility in the urban locations mentioned above.</p> <p>A referral network was rooted in the outreach strategy and in the mobilisation of existing service providers (public and private sector, nongovernment organisations and other stakeholders).</p> <p>Scope and scale was expanded through social mobilization strategies.</p>

<p>Summing up</p> <p>Overall, the study revealed that there has not been much development of human capital of economically active women in Delhi's slums – they remain low-skilled, face deteriorating health and physical well-being, and are burdened by household chores and economic pursuits for survival. Their limited financial assets continue to be drained, and their participation in the formal economy restricted to being consumers rather than producers. The build-up of social and political capital is low due to high mobility and time poverty. Assets are being built up at an excruciatingly slow pace, one generation at a time. Lack of access to entitlements and subsidies strains limited incomes of households, forcing women to work in exploitative set ups. Social barriers to women's mobility and participation in markets have eased to varying extents in different types of slums.</p>	<p>Key Outcomes:</p> <p>The project worked with poor international and national migrants in the urban areas of Delhi/ NCR, Kolkata and Mumbai. The project was evaluated on a number of parameters related to awareness and practices related to HIV & AIDS, access to health services, access to various non-health services and on gender roles.</p> <p>The final evaluation concluded "The project, when measured by its key project and outcome indicators, which align with the program log-frame goals, is overwhelmingly successful. These findings are robust when comparing baseline to end-line impact groups (longitudinally) and end-line control to end-line impact groups (cross-sectional) with traditional t-tests, propensity score matched average treatment effects and propensity score matched average treatment effects of the treated. The impact population community environment which has been strengthened and enabled by the project, when evaluated on the bases of impact population knowledge, attitude and practices, is strong and growing⁴."</p>
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Profile of Women in Slums

The key characteristics of the economically active poor women in the slums, as found in the DSI study are mentioned below.

- Poor women in slums are more often than not, first generation migrants who moved to the city with their husbands, driven by financial needs and aspirations.
- Women have generally been educated upto middle school, that too in their source villages. None have got the opportunity or taken an initiative to continue their education at the destination.
- Though slums in Delhi represent a caste-cauldron, the studied women belong largely to the Scheduled Castes (SCs) and Other Backward Castes (OBCs).
- A majority of the studied women started engaging in economic activities only after migrating to the city. Formally acquired vocational skills are rare; informal networks help them to access work opportunities in the informal sector and/or of an informal kind; and many end up doing low paying and exploitative Home Based Work or Colony Based Work (HBW/CBW - as part of informal work-groups) and hence, are Casual Labour. Some also toil as Women Domestic Workers (WDW) in residential areas and *kothis* within 10 km of their slum.
- Women are engaged in economic activities largely due to the financial duress faced by their families in these inflationary times in a metro-city like Delhi. They consider their earnings as essential, even though supplementary to their spouses'; however, in the same vein, they confess

⁴Lloyd and Banworth, EMPHASIS Endline Study, 2014

that their current work is giving them neither sufficient returns nor work satisfaction. In certain communities (esp. Muslims), women are prevented from working and their earning is considered *haraam* (or forbidden).

- Most women have the *streedhan*⁵ jewellery and tools of trade (like *khurpis*, scissors, sewing materials, etc.) as their only assets. Few have any cash savings, spending all they earn (investing in their children's education, food and cooking fuel) and taking informal loans from friends, employers and neighbours whenever there is a cash deficit or emergency cash requirement. Women in Urban Villages and some Unauthorised Colonies also rear poultry and small ruminants they call their own as they can sell them at their own will. A key asset of most women in the Impact Group is mobile phone which they use to remain in touch with other women in their slum or work group, with their family members and to call the Police for help when they are being assaulted by their husbands. Usage of a mobile phone to report VAW cases against their own husband is unique to JJC women.
- Women in the impact group bank largely on informal networks to receive and pass valuable information pertaining to work opportunities and availability of services, to seek interest-free loans, and for watch-and-ward of children and household while the woman is away from home, working.
- A majority of impact group women are affected by violence – at the household level, in their colonies and in public places –both physical and verbal.
- Women generally harbour one or more of these three aspirations: (i) good education and career of their children; (ii) well-being of their spouses; and/or (iii) a house of their own in the city. They do not aspire or wish for anything concerning their personal well-being or advancement.

The EMPHASIS intervention also found dignity and security as a major issue among the migrants. Women migrants in the urban space faced harassment, often fuelled by gossip. The women solidarity groups were concerned with stamping out gossip that fuels suspicion and violence against women migrants. Rekha's story exemplifies the kind of harassment they face.

Malti: A garment factory worker

Malti was a bright student at her school, but was able to complete her schooling till fifth standard. After her father's death, her mother could not afford her along with having taken care of five children by her.

Malti was married at the age of 19 years by her mother and two brothers. Her husband is a private driver with irregular work. They have three girls and a boy. Two of her daughters stay with their grandparents in Aligarh. To support and run her family she works in a thread factory in Noida, she works for almost eleven long hours every day and earns Rs.3500/- per month. Her work involves standing throughout the day. She has difficulty in completing her work as her legs swell-up from the continuous standing. She does not get leaves either. When her children fall ill and she has to stay home her salary is deducted. Women doing thread cutting in garment factories face deduction of Rs. 116 for each day of leave.

Her day starts early morning at 5:30 with she has to clean the house; and cook food. She has to report to her job on time else her salary is deducted. She walks 6 km every day to get to the factory. She faces domestic violence at home. All she wishes is for her children to be educated and well settled and a permanent job for her husband. However, in the current situation even that is difficult to achieve.

⁵*Streedhan* covers all articles (movable and immovable) that a woman's parents, relatives and friends give to her when she gets married.

“I lived with my two children in Shalimar Garden. If any woman from our community went out in the evening there would be catcalls and lewd remarks. The male youth in the neighbourhood did this regularly. The only option was to look down and try to ignore... to say nothing, even though I felt ashamed. After we organised ourselves into a group, this was one of the first issues we decided to take up. One day we went out together and confronted them. We spoke reasonably, telling them about how we felt when they called out like that. After that, the catcalls stopped. This has made me feel confident about standing up for my dignity”.

Similarly, in urban spaces, traditional support structures are not available and poor migrants are often left on their own. In many of the groups, the starting point of solidarity was to support each other. While talking about this, Nirmala talks about the reasons for starting the group.

“We knew from our experience that there was no one to help out when there was any kind of trouble. So we formed a women’s group to work together and fix our own small problems... There was one time when a pregnant woman was sick for 7 days, and there was no one to help her. So ...we all joined hands to get some money and took her to the hospital where she had a safe delivery. That got me thinking ...about how we could help each other and that we could motivate other women and men to unite for collective action and mutual support. Slowly the group has grown... there are now 23 members”. Similarly, “The women lack knowledge about their rights. They are not economically empowered... they depend on their husbands. Some men have extra marital affairs and beat their wives. The women don’t feel they have a voice. The women’s group provides a space for them to speak out”.

Further, as informal networks are more effective in creating awareness and enabling utilization of services, the project utilized a peer education approach. The network of outreach workers and peer educators played an essential role in disseminating information and education materials, facilitated linkages with service providers and utilization of health, education and other services. The Peer Educators, were chosen by the community, and had wide acceptance among the community. They connected with newly arrived migrants, as the more seasoned migrants helping the others to settle in and to learn about how to be supported in their new location. By the end of the project, 86% of all migrants in the project locations received information and services. Among the “at risk to HIV” migrants, there was a statistically significant change (at 1% level) for all the indicators related to condom use.

Women’s Access to Resources, Services and Opportunities

The key findings from the DSI study is mentioned below.

- Product and service markets are key resources for the impact population, esp. because access to subsidised services and entitlements is restricted for the migrant poor in urban spaces.
- Land ownership among migrant households is low, and is rarely vested in women members of poor households in the slums of Delhi. Joint house ownership is found in some cases in RCs and UCs; more frequently, adult women members of house owner’s household collect rent from migrants and student-tenants in these colonies and also in some UVs.
- Women’s dependence on and access to natural resources like land (for agriculture, habitation, defecation and cattle rearing), water (for drinking and household purposes) and fuelwood is more in case of households residing in UVs, though resource availability in these areas is also fast shrinking due to high pace of urbanisation and settlement.
- The ‘illegality’ associated with JJs as living spaces limits the entitlements of slum dwellers; the biggest brunt in such cases is borne by women. For a service as basic as sanitation, women are forced to risk their lives and limbs and defecate along railway tracks, in insecure forest scrublands or on isolated plots.

- Information as a resource is both accessible and valued when coming from informal contacts – friends, neighbours, and co-villagers – this information pertains to availability of job-work or any informal employment opportunity, availability of water, and perceived safety and risk to life and property.
- Nearness to industrial areas and to residential colonies offers economic engagement opportunities to the largely unskilled and semiskilled workforce in JJsCs, UCs and RCs, in the form of Home Based Workers (HBWs) and Women Domestic Workers (WDWs). Women in UVs continue to toil as economically un-valued or undervalued labour on farms owned by men if their own or other households.
- Except for women belonging to migrant tenant households, women generally vote regularly during the elections to various bodies in Delhi. Their choice of candidate and party is largely influenced or even dictated by menfolk in their household.

In the EMPHASIS project, Drop-in-centres (DICs) / Community Resource Centres (CRCs) were set up in the project as safe spaces for migrants to meet and discuss their concerns. The centres provided access to multi-lingual and context-specific information and education materials on; HIV vulnerability, safe migration, available health, education and other services as well as on government policies and legal frameworks. The DICs/CRCs were manned by Peer Educators, who facilitated linkages of the community with relevant service providers as well as maintained documents. The centres also provided counselling services and made referrals to other NGOs addressing trafficking, violence against women and legal support. Community-led Management Committees ensured the Drop-in Centres and Community Resource Centres remained in tune with community concerns, which promoted ownership and sustainability. The community used the centres for a variety of purposes that they thought



important, such as, a place for community gatherings and decision making, for serving as informal employment exchanges, and for rest. These centres were instrumental in enabling collective action by the community.

A referral network was rooted in the outreach strategy and in the mobilisation of existing service providers (public and private sector, nongovernment organisations and other stakeholders along the mobility continuum). Supporting migrant-responsive services was a focus of the capacity building initiatives with service providers. Peer educators documented referrals to health and non-health services and continuously provided feedback to the service providers. Over the project period, the number of people actually accessing general health and other services, from those who were referred rose to 80%, much higher than the targeted 50%.

The project engaged with the youth, young girls and boys, in creating awareness about various health and non-health issues. The project supported groups of youth in pursuing their interests (dance groups, football tournaments, etc.) while fostering a gender equitable attitudes.

Livelihood Strategies Adopted by Women

The DSI study also looked at the livelihood strategies of the economically active women in the slums. Some of the key findings are mentioned below.

- Cash strapped as their households are, women first try to access open access resources as well as public resources available free or at subsidised rate; for example, encroachment of public land for housing, defecation, and garbage disposal, use of public taps and hand-pumps for water, enrolling children in Government schools and accessing rations from Fair Price Shops (FPS) are commonplace.
- The next strategy is entering into informal transactions (or bribes) with public functionaries (esp. Policemen), FPS dealers, hospital staff and water tanker drivers.
- Only in desperate situation do women (and men) in slums get together to interact with local authorities and demand basic services esp. water and rations. This mobilisation, however, is issue based and dissolves once the purpose is solved.
- Women exercise control over the assets and income they generate from their earnings. It is only when the menfolk are rendered unemployed and take to liquor consumption that they try to snatch the woman's earnings by force. Economically active women invest most of their earnings in their children's education (books, stationery, food and supplementary teaching or tuitions) or on household nutrition and cooking fuel. Their investments in children also enables them to leverage some space in household decision making as children back their mothers' decisions and actions and can also be expected to financially support them when the parents grow old.
- Women in UVs have, since long, tended to agricultural land and cattle, but they find themselves helpless in the face of land acquisition and conversion for non-agricultural use and administrative orders preventing maintenance of cattle and dairies within city limits.
- Women may not exercise any control over their spouses' incomes but they are in charge of the budget allocated to them for running the house. Major cuts are usually made by women in their own travel budget (sometimes walking up to 12 km a day to save on travel expenditure), in their own desires for clothes and jewellery and in their own share of food consumption.
- Children, esp. girls are often engaged by their mothers in home-based economic activities (and not just household chores); girl-child school drop-outs are also high in such slums.

Table 1

Livelihood of women from the DSI study	Nature of employment	Number of hours per day	Average earning per day / month
Daily wage worker	Daily	8- 9	300-350
Construction worker	Daily	8-9	250-300
Sweeper in MCD	Monthly	8	5000
Sweeper at home	Monthly	2	150
Domestic help	Monthly	6	2500
Rag picker/ waste cloth-sorting	Daily	8	150
Stitching and embroidery	Daily	4	100-150 per day
High skill job- teaching, bank, private services	Monthly	4	3500
Labour at factory/export company	Monthly	9	3500
Agriculture labour	Daily	8	150
Garment work	Per piece	1	Rs 10 per piece
Making paper envelope	Per Kg	6	73
Packing work at home	Daily	8	200

In the EMPHASIS project, efforts were made to facilitate solidarity groups. A total of 25 women groups evolved in the urban locations of Delhi, Kolkata and Mumbai. These solidarity groups, composed of migrants, were based on the principles of women-centred decision making, self-help and mutual support. Interventions included awareness raising and discussions about HIV and safe mobility; group savings and financial literacy classes to encourage women and their families to open up bank accounts and to use money transfer agencies; income generating activities; linkages to government health and nutrition services and social welfare schemes; and (in collaboration with the state government Gender Resource Centre) strategies for reducing violence against women. In Delhi, for example, and with the support of the government's Gender Resource Centre, migrant women participated in campaigns to encourage community members to create safe environments for women and girls (the *Awaz Uthao* campaign) and to encourage families to celebrate the birthdays of girl children (the *Chuppi todo age bado* campaign). Initially the focus at the urban locations was on forming women-only groups, but over time mixed groups and men's groups emerged, with the men actively promoting gender equality and non-violence in families. Table 2 summarises the range of groups formed and results achieved. It also describes the role that the project played, which was generally to facilitate group formation, to provide training inputs as needed and then to accompany the group until it was able to self-lead.

Table 2: Types of women’s groups

Types of group and purpose	Project role	Results
<p><u>Delhi / NCR</u></p> <p><u>Four</u> female self help groups formed in Rajiv Gandhi Camp, New Delhi</p> <p><u>Purpose</u></p> <ul style="list-style-type: none"> ▪ To promote savings and group loans ▪ To minimise outside money lending process 	<ul style="list-style-type: none"> ▪ Facilitated group formation ▪ Facilitated earlier meetings on HIV & related issues ▪ Facilitated linkages to services ▪ Accompanied group to become self-leading 	<ul style="list-style-type: none"> ▪ Group savings and bank accounts were established <u>and</u> the women stopped taking loans from outside money lenders <p>Women:</p> <ul style="list-style-type: none"> ▪ Led monthly meetings and celebrated cultural events; ▪ Made joint decisions about how loans were disbursed and used; ▪ Shared information on HIV and health, safe migration etc. with other community members
<p>A female dance group with 8 young women in Kapashera</p> <p><u>Purpose</u></p> <ul style="list-style-type: none"> ▪ To provide a platform for female youth to talk about sexual and reproductive health and migration ▪ To promote self-esteem and community attachment 	<ul style="list-style-type: none"> ▪ Facilitated group formation ▪ Provided training / capacity building ▪ Supported planning and execution 	<ul style="list-style-type: none"> ▪ The young women began earning income through performing at cultural events in their community and in other communities
<p>A women’s CBO that included both Nepali and Indian internal migrants</p> <p><u>Purpose</u></p> <ul style="list-style-type: none"> ▪ To promote women’s empowerment ▪ To build awareness and uptake of available services ▪ To minimise stigma 	<ul style="list-style-type: none"> ▪ Facilitated formation ▪ Provided follow up and accompanying ▪ Training and capacity building 	<ul style="list-style-type: none"> ▪ Group started saving money ▪ Group led monthly meetings to discuss community issues and take decisions on how to resolve the issues ▪ Group spearheaded campaign to make the community safer for women

<p>Kolkata / Adjoining areas</p> <p>Rajabazar cultural group (self help group / since December 2011); Kolkata</p> <p><u>Purpose</u></p> <ul style="list-style-type: none"> Group members expressed a desire to form a self-help group 	<ul style="list-style-type: none"> Facilitated group committee formation Facilitated meetings Enhanced their knowledge about project activities. 	<ul style="list-style-type: none"> Group disseminated information within the community related to HIV and health Providing support in response to cases of harassment
<p>Women's groups formed in each of the 10 project locations</p> <p><u>Purpose</u></p> <ul style="list-style-type: none"> To provide women with an opportunity to come together to discuss issues and solutions 	<ul style="list-style-type: none"> Facilitated group committee formation Facilitated meetings Enhanced their knowledge about project activities. Engaging with the group on solution making 	<ul style="list-style-type: none"> Women no longer dependent on high-interest loans from 'outsiders' Women supported each other to address domestic violence and harassment Women generated awareness among the wider community
<p>Mumbai</p> <p>5 groups – two groups opened up bank accounts for the group's savings fund</p> <p><u>Purpose</u></p> <ul style="list-style-type: none"> To motivate women to become more engaged in migration-related issues To set up group savings to provide loans to members and non-members 	<ul style="list-style-type: none"> Facilitated group formation Vocational training Supported opening bank account Linked stakeholders to facilitate ICTC testing and to address domestic violence and alcohol abuse 	<ul style="list-style-type: none"> Increased knowledge of HIV, STIs and safe mobility Personal development / confidence developed Skills gained for micro-business activity resulted in increased income levels



Over time, the project focussed on another key concern of the women domestic workers. These issues related to lobbying for decent work for domestic workers in New Delhi. Discussions with community members in Shalimar Garden, Delhi, revealed that female Bengali-speaking domestic workers were working in poor conditions and for long hours, for as little as US\$30 per month (which is less than minimum rate set by the Government). The majority of the women had got their jobs through brokers, who continued to exploit the women, controlling and often delaying their monthly salary, or making deductions if a woman asked for time off to deal with family needs. Abuse and harassment and violence and molestation were also common.

The project facilitated a series of sensitisation meetings with the women that included discussion of rights and entitlements as well as decent work. Following on, joint employer-employee meetings were set up. Initially the employers were unreceptive. But after consistent follow up meetings, the employers agreed to increase the monthly payment to US\$40.00 per month. Issues related to providing medical facilities to the workers and insurance remain unsolved. The group persisted though and was able to build on the energy generated in the State elections in 2013, to bring their situation into focus for a wider group of people. After a lot of discussion and persuasion, their pay was again increased to US\$65.00 per month and they were granted an 8-hour flexible working day. Thus they were able to negotiate flexible working hours and increased wages with their employers.

While there is still much more to be achieved to ensure all migrants are able to gain decent working conditions, this case study clearly demonstrates that it is possible to advocate for migrant workers' rights. Other areas for attention include focusing on healthy work environments, living wages (that met government standards), regular work hours and health insurance and medical benefits.

CONCLUSION

The status of the economically active women in slums reveals a lack of development of human capital of economically active women in Delhi's slums – they remain low-skilled, face deteriorating health and physical well-being, and are burdened by household chores and economic pursuits for survival. Their limited financial assets continue to be drained, and their participation in the formal economy restricted to being consumers rather than producers. The build-up of social and political capital is low due to high mobility and time poverty. As the EMPHASIS intervention shows, it is possible to improve the condition of the poor woman in slums through simple strategies, enable their empowerment, provided the poor woman's challenges, solutions and aspirations are a central part of programming.



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