



DOMESTIC WORKERS AND SOCIAL PROTECTION IN DELHI NATIONAL CAPITAL REGION

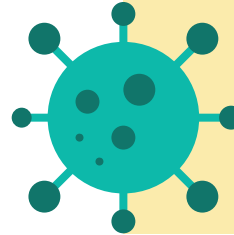
This fact sheet provides results from a survey completed in Delhi, Faridabad and Gurgaon in 2019 with 176 domestic workers.

POLICY CONTEXT

In Delhi, domestic workers are not covered under the Minimum Wage Notification, and so are not technically recognized as workers in the state's schedule of employment. Moreover, the state has not implemented the provisions of the Unorganized Workers Social Security Act (2008), meaning that domestic workers have not been registered with the Unorganized Sector Social Security Board (USSSB). This is despite a 2017 Supreme Court directive that ordered the state to ensure that registration takes place. While other Indian states such as Maharashtra and Tamil Nadu have welfare boards for domestic workers, this is not the case in Delhi.

Delhi has a number of health schemes available to domestic workers, which include the Ayushman Bharat Yojana, which provides subsidized health insurance to the poor, the Delhi Arogya Nidhi, a state level scheme providing financial health assistance, and the Aam Aadmi Mohalla Clinics, set up by the Government of Delhi to provide free basic medical care to poor and underserved communities.

RESPONSES TO COVID-19



During 2020, it was estimated that **80 to 90 percent** of domestic workers in Delhi have lost their jobs, according to a survey conducted by the Institute of Social Studies Trust (ISST). The crisis facing domestic workers was exacerbated by the fact that domestic workers in Delhi are not registered under the USSSB. This resulted in their exclusion from emergency cash grants.

LONGER-TERM RISKS TO INCOME SECURITY

INR14,842 (USD199) / month
DELHI STATE MINIMUM WAGE
 typical domestic worker earns
INR9,332 (USD125) per month
 for a 40-hour work week

Occupational safety and health



Most **50%** due to an injury/illness resulting from their work
 work was missed due to illness or accident

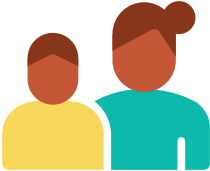
Care responsibilities

3% reported that they had access to child-care facilities



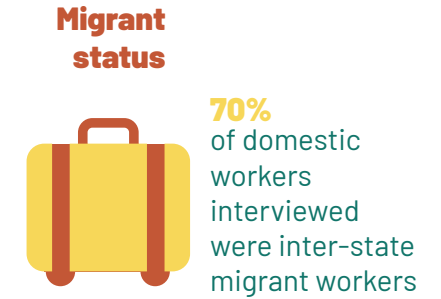
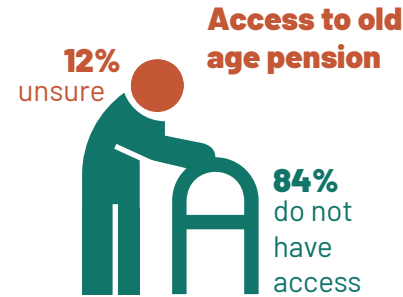
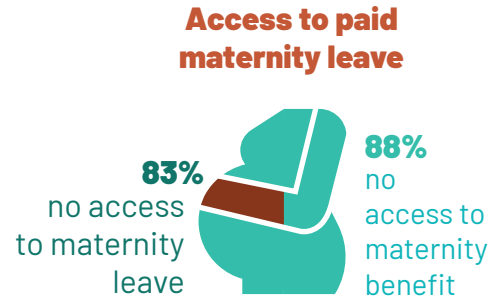
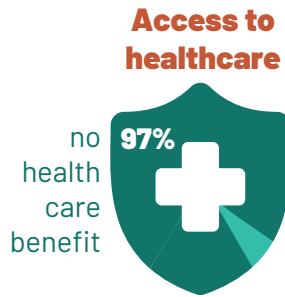
30% reported leaving their children without care while they were at work

30% reported relying on a family member for care

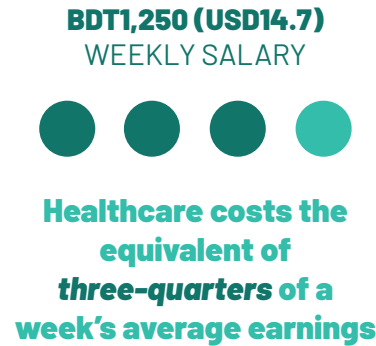


23% had taken children to work with them

ACCESS TO SOCIAL PROTECTION



COST OF HEALTHCARE ACCESS



RECOMMENDATIONS



Child-care support through community-based creches should be considered a key measure to support the

livelihoods of domestic workers. There are many good examples within India of how to build and sustain such creches.



Domestic work must be recognized within the Delhi schedule of employment. This should be accompanied by a minimum wage notification for the sector.



Fast track the registration of domestic workers under the Unorganized Sector Social Security Board.

Documentation requirements for the accessing of social protection should be simplified to facilitate better access.



The lengthening of Mohalla Clinic opening times should be extended to all clinics in the city. The Mohalla Clinics are to be commended for providing free health care to Delhi's citizens.

However, it is also clear that the limited opening times restrict access for the working poor. Extended hours would also help in reducing issues of wage cuts owing to leaves taken for seeking medical treatment by the domestic worker.