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Sri Rajarajeshwari Kala Mandiram Mumbai - 400016, INDIA.

email: srkm.mumbai@gmail.com

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Abbreviations

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BPL Below Poverty Line CBO Community Based Organization CDPO Community Development Programe Officer CSR Corporate Social Responsibility DOTS Directly Observed Treatment, Short-course FSI Floor Space Index HDI Human Development Index HIV/AIDS Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome ICDS Integrated Child Development Scheme ITI Industrial Training Institutes LIC Life Insurance Corporation of India LPG Liquefied Petroleum Gas MAVIM Mahila ArthikVikas Mahamandal MCGM Municipal Corporation of Greater Mumbai MHADA Maharashtra Housing and Development Authority MLP Micro- Level Planning MMRDA Mumbai Metropolitan Development Authority MRDP Mithi River Development Plan MUIP Mumbai Urban Infrastructure Project MUTP Mumbai Urban Transport Project NGO Non-Government Organization NTPC National Thermal Power Corporation OBC Other Backward Caste ORS Oral Rehydration Salts PAP Project Affected Person PDS Public Distribution System R&R Resettlement and Rehabilitation RIE Right to Education SC Schedule Caste SHG Self-Help Group ST Schedule Tribe T.B. Tuberculosis TDR Transfer of Development Plan Formulation and Implementation UTI Unit Trust of India	ASER	Annual Status of Education Report
CBO Community Based Organization CDPO Community Development Programe Officer CSR Corporate Social Responsibility DOTS Directly Observed Treatment, Short-course FSI Floor Space Index HDI Human Development Index HHV/AIDS Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome ICDS Integrated Child Development Scheme ITI Industrial Training Institutes LIC Life Insurance Corporation of India LPG Liquefied Petroleum Gas MAVIM Mahila Arthik Vikas Mahamandal MCGM Municipal Corporation of Greater Mumbai MHADA Maharashtra Housing and Development Authority MILP Micro- Level Planning MMRDA Mumbai Metropolitan Development Authority MRDP Mithi River Development Plan MUIP Mumbai Urban Infrastructure Project MUTP Mumbai Urban Transport Project NGO Non-Government Organization NTPC National Thermal Power Corporation OBC Other Backward Caste ORS Oral Rehydration Salts PAP Project Affected Person PDS Public Distribution System R&R Resettlement and Rehabilitation RtE Right to Education SC Schedule Caste SHG Self Help Group ST Schedule Tribe T.B. Tuberculosis TDR Transfer of Development Plan Formulation and Implementation UTI Unit Trust of India	BMC	Brihanmumbai Municipal Corporation
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MMRDA Mumbai Metropolitan Development Authority MRDP Mithi River Development Plan MUIP Mumbai Urban Infrastructure Project MUTP Mumbai Urban Transport Project NGO Non-Government Organization NTPC National Thermal Power Corporation OBC Other Backward Caste ORS Oral Rehydration Salts PAP Project Affected Person PDS Public Distribution System R&R Resettlement and Rehabilitation RtE Right to Education SC Schedule Caste SHG Self Help Group ST Schedule Tribe T.B. Tuberculosis TDR Transfer of Development Rights UDPFI Urban Development Plan Formulation and Implementation UTI Unit Trust of India	MHADA	Maharashtra Housing and Development Authority
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RtE Right to Education SC Schedule Caste SHG Self Help Group ST Schedule Tribe T.B. Tuberculosis TDR Transfer of Development Rights UDPFI Urban Development Plan Formulation and Implementation UTI Unit Trust of India	PDS	Public Distribution System
SC Schedule Caste SHG Self Help Group ST Schedule Tribe T.B. Tuberculosis TDR Transfer of Development Rights UDPFI Urban Development Plan Formulation and Implementation UTI Unit Trust of India	R&R	Resettlement and Rehabilitation
SHG Self Help Group ST Schedule Tribe T.B. Tuberculosis TDR Transfer of Development Rights UDPFI Urban Development Plan Formulation and Implementation UTI Unit Trust of India	RtE	Right to Education
ST Schedule Tribe T.B. Tuberculosis TDR Transfer of Development Rights UDPFI Urban Development Plan Formulation and Implementation UTI Unit Trust of India	SC	Schedule Caste
T.B. Tuberculosis TDR Transfer of Development Rights UDPFI Urban Development Plan Formulation and Implementation UTI Unit Trust of India	SHG	Self Help Group
TDR Transfer of Development Rights UDPFI Urban Development Plan Formulation and Implementation UTI Unit Trust of India	ST	Schedule Tribe
UDPFI Urban Development Plan Formulation and Implementation UTI Unit Trust of India	T.B.	Tuberculosis
UTI Unit Trust of India	TDR	Transfer of Development Rights
	UDPFI	Urban Development Plan Formulation and Implementation
WHO World Health Organization	UTI	Unit Trust of India
<u> </u>	WHO	World Health Organization

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This research and the report is a collective endeavor. Naming the persons who have contributed to it

is a herculean task by itself. The survey and the report was seen as a way to create a base line for a

transformative project and the process itself brought together many groups from within TISS and

also outside it. We wish to acknowledge the contribution of

• Deans and Faculty from all the Schools and Centreswho shaped the research, piloted the

instruments, were involved in data collection and helped to analyze the data

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 $\bullet \ \ AND\ LAST\ BUT\ NOT\ LEAST\ \ all\ residents\ of\ M/E\ ward\ who\ wholeheartedly\ supported\ us,$

making available their time and trusting us with data and their experience.

The report has been long awaited and has been significantly delayed due to the multiple layers of data and

the scale of the exercise. We hope that the report is worth the wait and does justice to the indomitable

spirit of the communities in M ward who are making a space for themselves in the city amidst great

adversity. We hope this leads the way to a more humane and friendlier city for them.

Prof. S. Parasuraman

Director

Tata Institute of Social Sciences

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Preface

Cities and the Potential for Positive Transformation

Cities represent bundles of multiple contradictions. The skewed pattern of urban development in India has produced growing and transforming mega cities with inadequate infrastructure and large proportions of urban poor citizens with little or no access to basic services. Mumbai, with over 42 percent¹ of the population living in slums, is a case in point. The urban dynamics in Mumbai appears to be a mix of perpetually expanding global city, with new ideas, institutions and opportunities, and persistently emerging complex forms of poverty and yawning deficits in human development. While propitious facets of growth seem to be concentrated in the elite core and overlapping subsystems in the city, going by human development indicators, slums as spatial units epitomize intersecting complex-cumulative disadvantages and deficits, enveloping multiple generations, identities and cultures. Yet slums also represent ongoing struggles of assertion and of staking claims to city despite adverse conditions.

The M (E) Ward in Mumbai is a microcosm of the city: it is an extreme example of skewed development in the metropolis, with virtually all indicators showing an urgent need for action that is multidimensional, comprehensive and strategic to serve its burgeoning population. It has been the most neglected ward from the point of view of infrastructure and human development and poses a huge challenge to a city already struggling to provide basic amenities to the majority of its citizens. Located in the North Eastern edge of the city, the neglect of the ward, the historically low land values, and the presence of undeveloped lands has resulted in the ward being a refuge for several thousand slum families. Currently, over 72.5 % of the M Ward population lives in slums². While slums are highly heterogeneous in terms of their quality of life, they have become an epithet for persistent urban poverty. M-East ward has the lowest Human Development index for the city of Mumbai (0.05)³, reflecting the overall extent of deprivation in multiple dimensions of life. Concomitantly, slums are also the site of highly organized and vibrant community action. Several NGOs and CBOs operate in the M ward and have contributed to improvement of several aspects of life in the poor settlements and strengthened the capacity of inhabitants to cope with hardship and find new opportunities. Such grassroot initiatives demonstrate models for scaled up development of the ward- one that can be more inclusive and hence sustainable. This requires strategic support through data, research, leadership building and education.

The platinum jubilee year for TISS ie 2010-11, signaled a time to both celebrate and embrace new opportunities, to pioneer and demonstrate new generation thinking and its transformative application on the ground. TISS has a strong tradition of responding to field needs, especially those of disadvantaged

^{1.} Census 2011

^{2.} TISS M-Ward Survey 2011

^{3.} MCGM Union Development Report 2009

and marginalized groups and supporting initiatives that are critical from this perspective. In keeping with this tradition, TISS decided to initiate a project titled "transforming M east Ward" or M POWER (People's Organization, Education and Research) so as to dedicate its multidimensional knowledge, experience and research expertise to bring about social change in its immediate neighbourhood ie the municipal ward where TISS is located.

Cities contain within themselves not only the forces that generate exclusion but also immense resources-financial, human for inclusion. Several such experiments exist in the country as well as in different parts of the world. Communities are often the harbinger of such ideas, powered by their own aspirations for change and bettering their conditions of living. The project seeks to create linkages between ideas and resources for positive change and ensure their deliverance to the communities in M ward. The M ward is not the universe of change, but it is hoped that making a beginning with an area that represents the maximum challenge will also make a positive difference to polices pursued in the rest of the city and create a model for such work in urban areas of the country.

The project envisages the involvement of students and faculty drawn from multiple Schools in TISS and all M Ward stakeholders in a coordinated effort to create synergistic and strategic action. Transformation of the ward is seen as a cumulative process which is a result of engagements in some critical arenas. To be transformative, the process needs to simultaneously work on the micro initiatives at the ward level on one hand, and practice and policy level on the other. The substantive focus of the project will be to create visible differences in certain critical parameters of human development. These parameters are —

- a) Child mortality rate
- b) Access and quality of elementary education
- c) Enhanced livelihood opportunities and employability
- d) Security and dignity of life and
- e) Infrastructural deficit and environmental improvement

The other project components are interwoven around these to enable convergent and synergetic action. The project has a particular focus on vulnerable sections of people within these communities. These include communities that are highly insecure and deprived of basic services, children, women and people who are discriminated against due to particular identities such as being Muslim, Dalit or belonging to a denotifed tribe.

This sets the backdrop of the base line survey initiated by Tata Institute of Social Sciences (TISS), Mumbai, to unravel patterns emanating from constituents of socio economic status, household and demographic features, amenities in living space, education, livelihood and earning, basic contours of health and multiple vulnerabilities in the habitat.

The Survey: Lending Visibility to the 'Invisible'

Several aspects of the life of low income communities continue to be invisible, their contribution to the city unrecognized and their aspirations and voices unheard. In the context of the wide-scale transformations discussed earlier, such invisibility is also one of the major causes of threats to even the marginal existence of the communities. Making the presence of low income communities visible and enabling them to articulate their aspirations for development thus acquire strategic value. The lack of grounded information is also one of the major obstacles to policy development and implementation for inclusion. Hence, the survey, as an initial step in the M ward project was envisaged as a critical step to transformation of the ward. The situation analysis would thus create a base for synergetic action by actors in M ward including government, NGOs and CBOs. Another important objective of the survey was to place this knowledge at the hands of communities who could use it as a lever to pursue their goals at a juncture of socioeconomic transformation with the concomitant opportunities and threats that these processes represent.

TISS conducted an extensive enumeration of all households in M (E) ward, excluding resettlement colonies and some pockets where there were immediate threats of displacement. This enumeration was considered important as there was no reliable data on particular settlements and the number of households in them. The next stage was the baseline survey which was done in two phases from October 2011 to June 2012. The survey had multiple objectives. The most important objective was to generate a comprehensive situation analysis of poor communities in M ward. This would enable a sense of the differing vulnerabilities, and an insight into the status of human development of each community. The household survey thus assessed the Socio, Demographic, Economic, Physical and Environmental conditions of the households in M (E) ward. Further, amenities in slum pockets in the area were studied through qualitative methods. This report brings together the findings of both these studies along with key findings from a micro-level planning process undertaken in several communities of the ward in 2012.

In addition to this study, the project has conducted several studies in parallel. These include a study of homeless populations, oral histories of select communities, needs assessments of resettlement colonies, barriers to health care access for expectant mothers, gaps in early childhood care, assessment of child-friendliness of schools etc. The findings of many of these studies, including the current report have already been fed into various interventions being carried out by the project and projects being implemented by other organizations in the ward. However, there is a special pleasure in releasing the report of the comprehensive study of the ward, as it represents the fruits of significant effort of students, faculty, project officers of TISS along with several community researchers, community based organizations and non-governmental organizations. The delay in publication of the report have largely to do with the complexity and scale of the exercise and our ambition for a credible analysis. We present this report to the communities in M ward and to the other stakeholders in the ward in the hope that this becomes the base for convergent action for the years to come.

Executive Summary

While rapid urbanization has created stark contrasts within urban spaces, the complexities within these contrasts require attention, especially in terms of glaring human development disparities that it invariably reproduces. This report highlights the overall spatial inequality in Mumbai and focuses on inequalities within the M-East administrative ward, its areas and social groups.

Recording a slum population of 77.55 percent and a Human Development Index of 0.05, M-East ward ranked lowest in the Mumbai Human Development Report 2009. This apart, the 256 plus slum settlements and 13 large resettlement colonies in this ward are reflective of the creation of a ghetto in a global city.

The report highlights the vulnerabilities faced by the urban poor with respect to four main indicators—education, livelihood, health, and habitat. It illustrates the extent of deprivation within demographic differentials, and the multiplicity of interconnected issues. Though the issues have been addressed separately in four broad chapters, they are interconnected and immensely important to secure human development progress. This report is the narrative of socio-economic conditions of people residing in the other half at the time of transformation. It is a call for another kind of transformation—one that is humane, people-led, and inclusive.

The report begins with an introduction to the ward. This section draws the historical trajectory of the ward beginning from 1896; it then provides an illustrated overview of the demographics of the ward, followed by a brief overview of each of the six geographical areas.

Summary of Introduction (Chapter 1)

In an interconnected world, cities across the world are linked in a circuit where they perform various roles in an interconnected global economy. Yet, it is in cities that one finds the expressions of the contrary nature of contemporary globalization processes—prosperity and poverty, multiculturalism and narrow parochialism, global and local scales of economy and governance. Slums represent one such contradiction. Long viewed as a planning aberration, slums are now recognized as a global challenge faced by multiple nations. While analyzing cities and slums in a global world, the Introduction chapter provides an overall context to the city and the ward and issues addressed.

Certain key features of the ward that have policy implications have been highlighted in detail. These include—implications of the geographic position of the ward (ward on the edge); reasons for low development (ward of low housing and infra development); the ward as a site for welfare services and institutionalized populations from the 1950s, followed by a home for resettled populations of the city from the 1960s (ward characterized by huge incoming resettlement); the ward as a site with an unfair

loading of polluting and hazardous uses, the social burden of which is borne by Dalit and Muslim communities (a case of environmental injustice); impacts of new and increased connectivity to Pune, Navi Mumbai, and the South of the city (ward of emergent opportunity due to expanding urban corridor); nature of political fragmentation in the ward that has several implications for the prospects of a political will to transform the ward (a politically fragmented ward).

Slums in Mumbai can be seen as being intricately tied to national and regional processes of growth, development, and urban planning. The dynamism of these processes also means that the nature, meaning and form of a slum are constantly changing. Some of these processes are simultaneous, overlapping in terms of time, and as a reflection of the same, the slum means multiple things at once. This section of the report attempts to trace some of these dynamics, exploring and explaining the slum multiple; slums as uniform/heterogeneous; slums as vulnerable/secure; slums as opportunities/threats; slums as organically/market generated; slum as informal/unorganized economy; slum as subalternaeity/perpetuation of clientilist politics; and slums as invisible.

The survey is an attempt to develop a comprehensive data base of all slums within the ward. The survey is based on recognition that visibility is critical when the ward itself is undergoing a transformation in its economic geography. This can be a source of opportunity but also one of enhanced vulnerabilities and threats to the lives and livelihood of people in the ward. It sees data as a critical lever for the transformation of the human conditions in the ward by catalyzing important changes and synergistic action in sectors, such as education, vocational skills, and health.

The survey is based on a systematic sampling method. Several findings of the survey have been reiterated and deepened through ongoing interaction with several slums communities in the ward through processes of micro-planning and consultations. The nature of the data is designed to lend itself to being converted into positive interventions for change.

Summary of Education (Chapter 2)

According to the Census 2011, the average literacy rate in Mumbai was 89.21 percent. As compared to the city average, M-East ward has more than double the rate of illiteracy. The survey reveals illiteracy at nearly 21 percent in the slums and gauthans of M-East. Baiganwadi, a Muslim majority slum, has the worst scenario with respect to illiteracy (above 25 percent) and educational attainment. Mankhurd and Govandi too report illiteracy at above 20 percent. The gender differential in levels of illiteracy in the slums of M-East is a significant 20 percent. Nearly 30 percent women have been reported as being illiterate which is twice the average for the city.

With respect to the educational attainment of respondents above 23 years of age, a higher percentage of women reported having completed education up to Middle level (Class 7) in school, that is, 3 percent more women than men. In the Secondary level (Class 10), the picture changes drastically with a 13

percentile difference between the educational attainment of men and women, in favour of men. According to the Census reports this trend of more girls in educational institutions in the lower classes to more boys at higher education levels, has been observed across the country. However, the percentile difference is far more pronounced in the M-East ward as against the country, where the difference is around 2-3 percent.

Of the total population surveyed, the number of graduates is less than 4.5 percent as against the national average of 6.7 percent⁴. For the whole sample representing all the slums and gauthans studied in the ward, the median year of schooling is 8. Disaggregating data for male and female we see that while the median year of school for males is 9, the same for females is 7. While Vashi Naka and Mankhurd report highest years of schooling (9), Baiganwadi reports the least (7).

Findings on the Educational Attainment of Respondents Below 23 years of age

Of all the children between 3-5 years in the sample, only 54 percent attend pre-primary schools while the remaining 46 percent (nearly half the population) do not go to any pre-school, missing out on the essential foundation of education.

The enrolment at the primary level is above 95 percent across all groups. Muslims however show a lower enrolment rate compared to all other religious groups in higher education, with the difference being one percent lower (as against the average of all areas studied) in the 6-14 year age group and 6 percent lower (than the average of all areas studied) in the 15-18 year age group. The gender differential in enrolment follows the same trend along all religious groups in the ward. Almost 83 percent of children in the age group of 5-17 attend school. However, the enrolment rate in higher education for the age group 18-23 is a mere 23 percent.

While Trombay Cheeta Camp reports the highest enrolment rates in schooling and higher education, enrolment rates for Baiganwadi and Govandi are the lowest. These areas come across as the most vulnerable with respect to education. Mankhurd and Vashi Naka show a greater gender differential in educational attainment. It is important to note that even though Vashi Naka reports overall better educational attainment, within the area, educational attainment varies. Areas such as Banjara Tanda and Hasina Nagar in Vashi Naka are the worst performing areas. Hasina Nagar is located is at the top of the hillock with little connectivity to the other parts of the area. Children here have to walk a long distance to school.

Banjara Tanda too faces problems of connectivity. It has proximity to a school in the nearby slum, which however does not have the capacity to absorb students.

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⁴Census 2001

Concerns regarding Education

School dropouts

The inability to spend on education and disinterest in education are the major reasons cited for dropping out of school. Financial constraints and domestic responsibilities lead more girls to drop out than boys; boys drop out to supplement the family income. The lack of school facilities in the neighbourhood affects more girls than boys. All of M- East has 70 Government primary schools (up to class 7) and three Government secondary schools (up to class 10).*

Preference for private education

Added to the problem of the huge shortfall in government schools, is the perception of lack of quality education in government-managed schools. Many parents prefer sending their children to private schools. However, there is no evidence that private schools are better than public schools. Rather, private schools are known to employ underqualified teachers at low salaries. These schools are also poorly equipped with infrastructure. Many schools in the slums in the ward are run in multiple locations in the absence of a school building to accommodate all the standards. Barring a few, most of the private schools in the ward do not have playgrounds. On the other hand, every government school in the ward has some open space where children can play.

Financial concerns

The survey also reveals that the highest percentage of borrowing is for educational expenses. Approximately, Rs. 10,000 is spent annually on education related expenses in families with a median income of Rs. 64,000. This expenditure includes expenses incurred on tuition outside of class. Just 2 percent of the surveyed students get any scholarship to attend school, while the proportion that gets scholarship to pursue higher education is 3 percent. It is important to note that principal components of benefits other than scholarships include books, meals, uniforms, and a school bag, which are all limited to children attending government schools.

Summary of Livelihood and Economy (Chapter 3)

Over 40 percent of the population in the slums and gauthans of M-East is in the 'productive' age group. The findings of the survey help us understand why the ward is unable to reap the advantages of this demographic dividend. In the working age group of 20-55, less than 50 percent of men and less than 20 percent of women are reported to be in some form of income-generating activity. Muslim women report the highest rate of unemployment (close to 90 percent) among religious categories.

^{*} At the time of the Survey

Nature of employment

The findings from the survey reveal that casual employment in the informal sector is the principal employment category for both males and females, followed by self-employment, with regular employment coming last. Almost 46 percent of the workforce in the ward is employed as casual labour, 33 percent are self-employed, and 20 percent have some formal employment. Close to 85 percent of the workforce have no employment related benefits. The low incomes and the absence of employment related benefits that characterize the sector in which majority of the workers find employment ensure that in the event of health-related emergencies, not only do they lose out on paid leave but also have to borrow for the expenses. The social security of majority of the workforce remains a concern to be addressed.

Levels of educational attainment and livelihood options

Findings show that a majority of those who completed college were employed in the formal sector. Data also reveals that a number of graduates are found to be employed in jobs that do not require a college degree. Most graduates have taken up teaching, followed by computer-related work, accountancy, and other office-based work. As against this, the majority of those who reported being illiterate or having attended primary school are casual labourers, followed by domestic workers, drivers, and tailors. With a few more years of education (upto middle and high school), the highest reported employment is found to be drivers, followed by casual labourers and tailors.

The major occupations in the ward are drivers, casual workers (*naka kamgaars*), tailors, street vendors, *kirana* workers, domestic helpers, mechanics, salespersons, and security guards.

Vocational Skills and Livelihood

In the absence of completion of formal education, vocational training fills some of the gap. Almost 22 percent of the respondents had taken some kind of vocational training towards employability. Of these, 61 percent have taken formal vocational training of which 74 percent have used the skill for employment. Govandi and Mankurd report lowest proportion of people with vocational skills training.

The fields that show the highest frequency for vocational training correspond to the highest sources of livelihood in the areas, with driving topping the list. This is followed by tailoring, embroidery, electrical work, mechanic work, carpentry, painting, welding, and computer-related work in order of preference.

The data with regard to women vis-a-vis vocational training is in keeping with the trend in education. Less than half the number of women as compared to men reported to have taken a vocational skills course making a strong case for the need to address this gap. For women, the top five skills include tailoring, computer training, beautician training and *mehendi* art, and teaching.

Concerns regarding Livelihood

Insufficient income

Forty percent of the respondents reported a household monthly income of Rs. 5,000 to Rs. 10,000. The median income for the ward is Rs. 8,000. Only 8 percent of the households have a monthly income above Rs. 200,00. Nearly 23 percent of the household have a monthly income below Rs. 5,000. There are no clear differences between different areas with respect to the monthly income. Given the inadequacy of incomes, only 38.5 percent of households are able to save. Nearly 49 percent of the households have to borrow—mainly for health related emergencies and consumption loans—the repayment of which stresses the already low incomes that people have.

Lack of access to credit

Nearly 70 percent of the respondents in the survey reported having bank accounts, 70 percent also reported keeping their savings in banks. However, the bank account does not result in access to credit. Eighty five percent of households who borrow money source loans from relatives or neighbours, while the count of households obtaining loans from banks is less than 6 percent. This signifies the reliance and importance of social capital in the lives of people living in these communities. In Trombay Cheeta Camp close to 18 percent of households who borrow avail loans by pawning jewelry or assets; this pattern is discernibly different from the rest. One point five percent of the respondents of Govandi borrow by pawing their ration cards, which is a means to access food at subsidized prices and an important entitlement document for the poor living in slums.

Women's participation in the workforce

Only 7 percent of the women respondents participated in income generating activity. At present the most common avenues for employment of women are *papad* making, *zari* or *badla* embroidery, *dhaga* cutting or any piece rate work, *bhisi* (cooking food at home for the migrants in the area), managing one's own grocery shop run from within the house, tuition classes, and tailoring. All of these are home-based. This can be attributed to a number socio-economic and religious reasons. Young women face resistance from families in taking up employment outside the home on account of safety concerns.

Men harassing women on the streets also act as a deterrent to women taking up employment. Patriarchal mindsets prevent women from working outside of the house, thus limiting opportunities. Moreover, domestic responsibilities are such that women prefer earning while being able to attend to household chores and child care.

Summary of Health (Chapter 4)

This chapter on health deals with the current status and concerns regarding nutrition, and children and women's health.

Overall health status

The survey findings have fever, cold, and coughs, topping the list of minor illnesses, followed by malaria, typhoid, diarrhea, stomach pain, and jaundice. Of major illnesses, more than 50 percent respondents reported to have what are known as lifestyle illnesses such as heart disease, diabetes, respiratory ailments, blood pressure, followed by tuberculosis (TB). Respondents from Shivaji Nagar, Mankhurd and Baiganwadi report the highest number of TB cases. Forty of the 49 cases reported in Baigawadi are from three areas within Baiganwadi, with Baiganwadi plot reporting maximum cases. Within Mankhurd, 50 percent of the cases are limited to the two areas of Mandala and Sathe Nagar. Rafiq Nagar has a high incidence of 13 cases. These areas, which report high incidence of TB, are also areas devoid of a number of basic services on account of their tenure status.

For treatment of minor illnesses, 75 percent people rely on private services. This is probably on account of the many private doctors available in the neighbourhood. For major illnesses, only 70 percent of those who said that they needed hospitalization had sought hospitalization. Nearly 50 percent of those seeking hospitalization choose government hospitals.

Lack of finances is the topmost reason for not seeking treatment among those who believed they needed treatment. Data on household expenditure reveals health as being one of the highest expenses incurred by households. It is also the topmost reason for borrowing across all households. The poor need affordable health care, which should be a priority of the government. With a majority of the population in the informal economy, not only do they incur direct expense on health, but also lose out on their daily wage on account of taking leave.

Disability

Of those surveyed, 972 respondents reported some kind of disability. The ward has limited facilities for people who are differently abled. Those with multiple disabilities need special services that are not available in the ward. There is only 1 special school, 1 organization for orthopedically challenged, 1 school for hearing impaired, 1 for spastics and none for visually impaired or multiple challenged. Only 16 percent have a disability certificate that allows them access to government benefits.

Nutrition

Children's Health as indicated by Anthropometric Measurements

Almost half (45 percent) the children under 5 are stunted and a little over one-third (35 percent) are underweight. It may be noted that the proportion of children severely undernourished (more than minus three standard deviations below the median of the reference population) is quite high—almost one-quarter of children under age 5 years are severely stunted, over one-tenth (14 percent) are severely underweight, and one-fifth are wasted.

The proportion of children who are stunted or underweight increases rapidly with age. About one-tenth each of children lesser than 6 months are stunted and underweight—the percentages for both these indicators increase rapidly with age. Almost half the children who are less than 2 years old are stunted and about two-fifths are underweight. The wasting indicator decreases with age. Hence even in the early stages when children are supposed to be exclusively breastfed, under-nutrition is prevalent and increases rapidly to reach a peak among children who are above 2 years, when being weaned from breast milk.

Women's Health as indicated by Anthropometric Measurements

More than half (58 percent) of women in M-East Ward have a normal Body Mass Index (BMI). However, one-fifth of women have a BMI less than 18.5 kg/m² (total thin) and more than one-fifth (23 percent) of women are overweight or obese. Thus, there is a dual burden of malnutrition with almost half of the women being either too thin or overweight.

Food Consumed

Nearly 59 percent of the households have only two meals a day. The consumption items common across household include milk (83 percent), pulses (78 percent), leafy vegetables (67 percent), other vegetables (59 percent), fruits (10 percent), eggs (8 percent), mutton or chicken (3 percent), and fish (2 percent). Items like fish, meat, eggs, and fruit appear to be consumed daily by less than one-tenth of the households. While 83 percent report consuming milk, it does not mean that each family member gets a glassful of milk; milk is often only consumed for tea, unless a family member is ill.

Access to Food

One-sixth of households in the sample did not have a ration card at the time of the survey. Three-fifths of households in the sample reported that they utilized their own or others ration cards to purchase goods through the Public Distribution System (PDS). While the utilization is highest in Govandi (70 percent), it is lowest in Vashi Naka (52 percent). Of the ration card users, 86 percent of the sample uses the ration card to purchase kerosene, while 46 percent use it to purchase food grains. A similar pattern is prevalent

across areas. Baiganwadi reports highest percentage of users buying kerosene (92 percent) from the PDS, while Vashi Naka reports lowest proportion (73 percent). Less than 50 percent use it to buy food grains, the percentage of other items being less than 20. One-sixth of the respondents said they do not buy from ration shops as the items are not of good quality. The other reason stated is that of inadequacy of rations.

The government mandates one Anganwadi for every 250 households. The survey did not include the thousands of resettled households in the ward which, if counted, point to a woefully inadequate coverage by the Anganwadis.

Mid-day meals are limited to students studying in government schools, which are inadequate in number. Students rely on the low cost private schools where not only do students pay fees, but they also do not get the nutritional supplements that are given in government schools.

Children's Health: Immunization, Illness And Child Mortality

A little over one-fifth (21 percent) of children under the age of 2 had diarrhea. There are considerable differentials in areas with Trombay Cheeta Camp which reports the highest percentage (32 percent) of children with diarrhea in the two weeks preceding the survey, and Vashi Naka reporting only 13 percent. In other areas 16-25 percent of the children had diarrhea in the two weeks preceding the survey. Treatment was sought for almost all (95 percent) cases and oral rehydration salts (ORS) was the most common treatment administered.

Women's reproductive health

The mean age of marriage reported is 18 years for the ward, with Mankhurd and Vashi Naka reporting marriages under the legal age. Since the mean age of marriage is 18 years across the ward, it implies that a number of women are married before the age of 18. Marriage by 18 years of age also implies that women have not completed higher education and/or explored their potential towards financial independence. Often, early marriages result in early pregnancies in the absence of being able to negotiate family planning at that young age.

The mean number of pregnancies recorded for the slums and gauthans in M-East Ward is high at 2.88. By area, the mean number of pregnancies is highest for Baiganwadi (3.46), followed by Shivaji Nagar (3.05). In other words, a married woman in these areas undergoes about 4 pregnancies in her lifetime. She bears, on an average, 3.8 live-births, out of which 3.6 survive. The area-wise differential in mean number of abortions is slightly different. It is the highest in Shivaji Nagar (0.33), followed by Trombay Cheeta Camp (0.32) and Vashi Naka (0.31). In all other areas, the mean number of abortions is close to 0.20 and for the ward as a whole it is 0.24.

The mean number of Children Ever Born (CEB) and mean number of living children decline with

increased rates of education. It is highest at 3.23 among illiterate women and drops to less than 1.5 among women who have a higher secondary and above level of education. Educational attainment seems to have a significant impact on family size and the health of the woman and family. Muslim women have the highest mean number of living children (2.77) followed by Christian women (2.31), Hindu women (2.21), and Buddhist women (2.19). The mean does not vary by employment status and is about 2.5 among both working and non-working women.

Contraceptive use increases with the number of surviving children. Contraceptive use is relatively high in Trombay Cheeta Camp, Govandi, and Mankhurd where one-third of the currently married women in the reproductive age-group use family planning. The use of contraception is extremely low in Vashi Naka where only 19 percent of women use family planning. Use of contraception is relatively higher among Hindus (33.5), followed by Muslims (28.2), Christian (25), Buddhist (24.7), and others (11.1). Sterilization is the most preferred method among Hindu women.

Critical facets of fertility revealed through the survey:

- a) The average age of marriage is not significantly impacted by the urban environment and is at 18 years.
- b) The mean number of pregnancies is above 3 and the child survival rate is around 2.
- c) Critical factors affecting fertility and family planning seem to be level of education and son preference.

Contraceptive use is very low among the younger age group—only 8 percent of currently married women aged 15-19 use family planning methods. The contraceptive use increases steadily in the prime child bearing age of 20-25 and then decreases again among women older than 35. Permanent methods like female sterilization are preferred to temporary methods which require mutual understanding between a couple. Fears and issues women face with IUDs impact the decision to go for a permanent method. Male sterilization is nearly absent and low condom usage points to the fact that it is the woman who has to bear the responsibility of using contraception.

Maternal Health

Antenatal Care

The survey found that women in the younger age groups are more likely to receive antenatal care (ANC). Almost all (95 percent) women age 15-19 with a recent live birth received antenatal care and about four-fifths of women in the age groups 20-24 (80 percent) and 25-29 (82 percent) received antenatal care for recent births. However, in older women at least three-quarters of women received antenatal care. Ninety percent or more women reported that they received the services in M-East Ward. A slightly lower

percentage of women reported that they received advice with regard to proper nutrition, institutional delivery, and expected date of delivery.

While it is obvious that the younger generation of women access ANC services, a large number among them have to access the same through an institution (hospitals, maternity homes, and so on) rather than at the community level through community health care workers. The preference for institutional care is higher and women do make an effort to reach these services, even though they are far away.

Among women who had a recent live birth or were more than 4 months pregnant, 47 percent reported that they received antenatal care services in a government hospital in Mumbai, and almost one-third (30 percent) women received these services in a private hospital in Mumbai. As is evident, a substantial proportion of women in the ward received these services in Mumbai itself. A little over one-tenth reported that they received the services from government or private hospitals outside Mumbai. Several women prefer to spend at least part of their pregnancies in their respective hometowns where other support systems are available; this explains the location of access for antenatal care being outside Mumbai for about 10 percent of the women. It is clear that institutional linkages through antenatal care have been created irrespective of the location.

Utilization of government hospital is higher in Vashi Naka, Mankhurd, and Trombay Cheeta Camp, where more than half (68 percent in Vashi Naka, 63 percent in Mankhurd, and 51 percent in Trombay Cheeta Camp) the women reported that they received these services from a government hospital. In Baiganwadi an equal proportion of women reported use of government and private hospitals (45-46 percent). Utilization of private hospitals is highest in Baiganwadi and lowest in Vashi Naka. Almost one-tenth of women reported that they received antenatal care services at home by health staff and in terms of area this is highest in Govandi where more than one-fifth (21 percent) reported that they received the services at home followed by Vashi Naka (17 percent) and Trombay Cheeta Camp (14 percent).

Place of Delivery

More than two-thirds (67 percent) of women across all the six areas who had a recent live birth delivered in Mumbai. About one-fifth (21 percent) delivered outside Mumbai and a large majority (77 percent) of these women delivered in rural areas. It may be noted that place of delivery information is missing for 12 percent of women. Eighty percent of these deliveries took place in health institutions and 8 percent took place at home. Among this 80 percent, nearly 51 percent of the deliveries took place in a government health institution and the remaining 29 percent took place in private hospitals. Out of the 8 percent home deliveries, only 1 percent was conducted by health personnel. Most of the home deliveries were conducted either by a *dai* (midwife) or a relative or neighbour. The extent of institutional deliveries ranges from 90 percent in Trombay Cheeta Camp to 77 percent in Baiganwadi, Govandi, and Mankhurd.

More than half of the women who had an institutional delivery have delivered in a government hospital. The exception is Shivaji Nagar, where more women delivered in private hospitals. More than half the women in Vashi Naka (64 percent), Mankhurd (55 percent), and Trombay Cheeta Camp (53 percent) have delivered in a government hospital and this percentage is slightly lower in the other areas, at about two-fifths each. The percentage of women who delivered in private hospitals is highest in Shivaji Nagar (42 percent) and least in Mankhurd (19 percent).

Maternal Death

The site of maternal death is more often than not a hospital, that is, an institutional site. However, there could be multiple factors that explain the hospital as a site of death. On one hand it could be indicative of quality of care available in maternity homes—government and private. There could also be other factors that lead to an emergency situation when the hospital is approached when it may be too late to do anything.

Postnatal Care

Given that a majority of the deliveries are institutional, it is to be expected that postnatal care should be available. In M-East ward less than three-fifths (58 percent) of women received postnatal care within one hour of birth and another 16 percent received it within one day of birth. Almost one-fifth of women did not receive any postnatal care. Shivaji Nagar emerges as the area having the highest percentage (65 percent) of women receiving postnatal care within 1 hour of birth. The areas where a slightly higher percentage of women reported not having received postnatal care are Vashi Naka (18 percent) and Govandi (13 percent).

Summary of Housing (Chapter 5)

The ward presents a range of varied housing conditions and illustrates the nuances that the term 'slum' can take. Each of the areas of study represents a set of different conditions under which settlement has taken place, its acceptance by law, the modes and the extent of access to amenities and infrastructure facilities.

In M-East ward even those areas which are land based resettlements are characterized as slums. Further, there are a substantive number of settlements (at least 17), which are not recognized as slums, but are considered encroachments—residents of these areas are vulnerable to repetitive evictions. In between lies a range of settlements that have struggled to gain recognition as slums to obtain amenities and infrastructure. The specific housing conditions are significantly shaped by these characteristics of the locations.

Duration of Stay

Just about 50 percent in the sample representing M-East Ward have been living in the given location for more than 16 years and 37 percent for not more than 10 years. Interestingly 63 percent of the samples drawn from Vashi Naka have been living there for more than 16 years, while just 35 percent of Mankhurd report that they have been residing there for 16 years. Notwithstanding the contrast between above extremes, other areas report higher proportion of residents living for more than 16 years—ranging between 51 to 62 percent.

We have disaggregated the duration of stay for legal status of habitat, classifying it to four categories: legal, part legal, transit camp legal and urban village legal. There are stark contrast between urban village legal and transit camp legal; while the former reports three-fourths of the sample living more than 16 years in their habitat, three-fourths of the sample representing transit camp have been living there for not more than 10 years. Quite importantly, slightly below two-fifths of the settlements characterized as part legal report staying there for more than 16 years.

Quality of Housing

The quality of housing has been categorized as fair, average, and inadequate, based on aggregation of some of the variables comprising the structure of houses, number of rooms, availability of private taps, and availability of toilets inside the houses. Details of how the composite variable was created are given in the appendix.

The highest proportion of households that stay in fair housing conditions is at 57.5 percent, that is, just about half. This means that at least 50 percent households in every area stay in average or even inadequate housing conditions. Cheeta Camp is an area where the maximum consolidation of housing has been made, closely followed by Govandi and Shivaji Nagar. Vashi Naka is a locality, which corresponds in age to Cheeta Camp, Shivaji Nagar, and Govandi but only 35 percent households in the area have a fair housing condition. Better housing conditions are thus found to be more linked to layouts created by the government, rather than the age of the settlement. The vulnerability of Mankhurd stands out. It has the least proportion of households with fair housing conditions and the highest proportion of households with inadequate housing conditions.

State Policy, Legality and Provision of Basic Amenities

State policy conflates the importance of years of stay in a locality by linking it to legality, and to the provision of amenities. An extension of this logic would be that the improved housing conditions would be linked to years of stay in the locality with greater the stay—greater the improvement in housing conditions. Conversely those who have less duration of stay would be expected to suffer from more housing deprivations. A clear pattern emerges where households developed after 2000 suffer several

deprivations relative to the overall population in the settlements. This is not to say that life in settlements developed prior to 1995 is not harsh, but brings out the manner in which state policy conflates the overall access to amenities. Settlements posts 2000 are also vulnerable to repeated evictions, adding more layers to the vulnerability of these households.

The 'legality' and 'illegality' of settlements has a direct impact on the provision of basic amenities. Just above one-fourth of the sample have an individual tap (inside or outside the house) to obtain water, while 44 percent use a public tap for getting water. Quite importantly, 13 percent purchase water from private sources. Compared to legal and urban village legal, part legal and transit camp legal appear to depend much more on private sources rather than own or shared taps for drinking water. While coverage of tap water for the former varies from 78 percent to 95 percent, coverage for the latter is in the range of 48 to 53 percent. A similar trend is consistent with water for other purpose as well.

The findings show that the quality of housing has an impact on a number of human development indicators. Those in inadequate housing conditions are able to participate in elementary and higher education the least, and have the lowest educational attainment. The incidence of minor illnesses is significantly higher in households with inadequate housing quality. Households with inadequate housing quality also prefer public health services the most.

Summary of Conclusion (Chapter 6)

M-East Ward of Mumbai has evolved as a periphery to the city; one that is expected to be the location of several elements that it considers undesirable—polluting activities such as industries, dumping ground, abattoir, as well as people; slums in the city that come in the right of way of cars and other infrastructures essential for a global city. This character contrarily lends it an accommodative character, with several migrants opting to settle in this area with low land values in the 1970s. The ward has emerged as an expanded poverty space. The findings of the base line survey need to be seen as the implications of a large geography that has almost exclusive occupation of the poor. The baseline survey examines the various human development parameters of this expanded poverty space.

Each of the parameters is examined in relation to city level parameters and comparatively among various locations in the ward in the base line survey. A comparison between locations enables an insight into relative levels of poverty and the interplay of various factors such as caste, religion, and income, with facets of human development. However, when compared to city level parameters, the parameters in M-East Ward are substantively low. In fact, the lowest parameters in the ward are comparable to some of the poorest regions in the world and have no place in a modern city, leave along one that aspires to be a global city.

The report points towards measures that can redress gross inequality, stresses on the need for collective action, and the need to respond adequately and in a holistic manner. In this regard, action needs to be

Introduction

Cities and Slums in a Global World

Cities have emerged as the loci of globalisation. In an interconnected world, cities across the world are linked in a circuit, within which they perform various roles in an interconnected global economy. There are cities which may occupy a 'strategy and command' position in the world economy, there may be others which perform production roles, and so on. Several scales—local, sub-national, national, and global—thus operate simultaneously in contemporary cities. It is in cities that one finds the expressions of the contrary nature of contemporary globalization processes—prosperity and poverty, multiculturalism and narrow parochialism, and global and local scales of economy and governance. Slums represent one such contradiction. For long viewed as a planning aberration, slums are now recognized as a global challenge faced by multiple nations. In 2002, the United Nations Centre for Human Settlements produced a report titled "The Challenge of Slums". The report focuses attention on slums as a global urban issue, intricately tied with processes of growth, development, and urban planning. The report urges multifaceted strategies to take on the challenge of slums. Such strategies seek to a) improve the conditions of life of slum dwellers and b) reduce the proportion of people living in slums. The Millennium Development Goals (MDGs) took a further step in this pragmatic approach to the challenge and urged the international community to improve the living conditions of at least half of the world's 100 million slum dwellers.

Mumbai, with its legacy of being an *urbs prima* since colonial times and the country's commercial capital is the subject of multiple and often contradictory forces of change in recent times. At the empirical level, these changes are seen in the form of an economy transiting from industrial to service-based, demographic movement towards metropolitanization, launch of extensive infrastructure and especially transportation projects in the city, changes in governance institutions, and a cumulative restructuring of space in the city. Several of these moves are directed at transforming Mumbai's reality as a third world city with significant poverty, informality, decay, and squalor to a world class city which is a focal point of an "emerging" world economy, with advantages of a demographic dividend and a large and expanding market. These changes have tremendous implications for the other half of Mumbai which lives in slums and has contributed to the co-production of the city as much as the forces of private capital and state policy. This other half represents another side to multi-scalar globalisation. This report is the narrative of socioeconomic conditions of people residing in this other half at this time of transformation. It is a call for another kind of transformation—one that is humane, people-led, and inclusive.

Focus—M Ward

The M-EastWard of Mumbai represents a particular concentration of slums and urban poverty. The historic pattern of growth of the ward in relation to the city and the contemporary restructuring of space has generated particular trajectories of thesephenomena, expressed in the lived realities of the people here. These call for serious policy attention and transformative imperative. The following features of the ward need to be noted in this context:

Ward on the Edge

The ward is located on the north-east edge of Mumbai. It has a coastline and a high mountain on one side. A lot of the land in the ward is marshy and under mangrove cover. These features of the ward made it a suitable location for polluting and hazardous industries. Thus, the refineries, the fertilizer plants, and the atomic energy plant are located here. Urban plans saw this area as a low density, unfit for dense development. The planned settlements in the ward, thus, comprise of employee housing and sporadic high-end developments linked to the wooded, green nature of the terrain. On the other hand, these very features made the ward an area where poor migrants could settle in and create a life amidst hostile environments.

Ward of Low Housing and Infra-Development

M Ward, for some of the reasons mentioned above, was considered a low density ward. In fact even when the Floor Space Index(a measure for vertical development potential) for the rest of the city was upwardly revised, that of the M Ward was kept low at 0.75 while that of the rest of the city was revised to 1.0. The Development Plan of the ward shows the presence of large undeveloped spaces. The ward has one of the lowest land and housing prices in the city. Concomitantly, the infrastructure development in the ward was also low. In terms of local rail connectivity, the ward was connected by the Harbour Rail, a branch of the central railway which had low frequency, which terminated at Mankhurd. There was only bus depot till the 1990s, located at Anushakti Nagar, and few bus routes. Most of the ward is not connected by sewer lines and water supply is via a high level reservoir at Trombay, as an ancillary of the larger supply line from Ghatkopar. The ward also has low levels of social infrastructure such as educational and health facilities.

Ward Characterised by Huge Incoming Resettlement

The ward was seen as a site for welfare services and institutionalised populations since the 1950s. Thus, the beggar's home, the homes for destitute, and children placed under the welfare system have been located here. Since the 1960s, the ward has been considered a home for resettled populations of the city. The first of such settlements was Shivaji Nagar, which was established by the municipal corporation. Shivaji Nagar was planned as a settlement for slum communities which were displaced from the inner

city areas and allotted plots for self-development. Cheeta Camp was subsequently established in 1976 as a settlement to house evictees from Janata Nagar, which was located on land which was later used for developing quarters for atomic energy corporation employees. In more recent years, the scale of resettlement in the ward has only increased with over 60,000 homes spread over 13sites for the project affected persons from various parts of the city being constructed here. The ward has, thus, historically, been a site where the state has housed poor populations and reflects the changes and continuity in resettlement policies of the state.

A Case of Environmental Injustice

If a city is seen as a site of contesting uses and users, then M Ward may be seen as a site with an unfair loading of polluting and hazardous uses. Besides the industries mentioned earlier, the shifting of the abattoir from Bandra and the dumping ground from Dharavi to the ward enhanced the burden of environmental hazards further. Socially, this burden of adverse environment is borne by Dalit and Muslim communities who are the primary occupants of the slums and the resettlement colonies in the ward. Furthermore, the lives and livelihoods of several of these communities are dependent on these uses, making them further vulnerable to the adverse health impacts of the same.

Ward of Emergent Opportunity Due to Expanding Urban Corridor

The geographical positioning of M Ward as a low development ward on the north-east edge of the city slowly began to change in the 1990s, with greater connectivity to Navi Mumbai via road and railways. Towards the end of the millennium, the trend towards the formation of a Mumbai—Pune urban corridor has meant that M Ward has a strategic positioning with respect to new growth opportunities. This has partly begun to reflect in the advent of major transport projects in the ward such as the monorail that connects the island city to Chembur, the Eastern freeway that opens up the Eastern waterfront of the city, and the announcement of the new metro corridor from Mankhurd to Charkop. This new increase in connectivity may open up new economic opportunities in the ward. On the other hand, it also threatens the lives and livelihoods of the poor communities here, who are largely invisible in data and policy.

A Politically Fragmented ward

The ward has experienced a tremendous rise in the informal settlement population since the 1970s. The Census of 2011 records a population of roughly 8,00,000, with over 77percent residing in slums. The ward is characterised by a high degree of political activity, but has been unable to consolidate with respect to the same as it is politically fragmented. The administrative ward was itself divided into 2 divisions—M-East and M (West) in 1997. Further, in the recent reconstitution of electoral boundaries, the ward has become a part of four assembly constituencies (no. 171, 172, 173, also some part of 174) and two parliament constituencies (28 Mumbai North East and 30 Mumbai South Central) as well. This

political fragmentation has several implications for the prospects of a political will to transform the ward.

Slum Multiple

Mumbai has, since the colonial times, been a destination for poor migrants across the country in search of livelihoods. The first slums in the city are recorded since colonial times. The pace of growth of slums only grew in the post-independence years. The Census of 2001 recorded that about 48.9 percent of the city's population stays in slums. Slums in Mumbai can be similarly seen as being intricately tied to national/regional processes of growth, development, and urban planning. The dynamism of these processes also means that the nature, meaning, and form of a slum are constantly changing. Further, some of these processes are simultaneous, overlapping in terms of time and as a reflection of the same, the slum means multiple things at once. The following is an attempt to trace some of these dynamics-

Slums as Uniform / Heterogeneous

There are certain common features of the slums in M Ward that are linked to the overall history of the ward and its development as well as the physical location and features of the ward. Such common features include the overwhelming proportion of Dalits and Muslims in the slums, the relatively low penetration of slum redevelopment schemes, and the low level of basic infrastructure development in the ward. On the other hand, the slums in the ward are highly heterogeneous in terms of the processes of their formation, the population profile, the security of housing and legal sanctity, the physical availability of infrastructure, the degree of vulnerabilities and the consolidation of activity, and the level of organization and voluntary or political activity within and across. Thus, Shivaji Nagar and Cheeta Camp face very different issues from the peripheral slums in Bainganwadi and Mankhurd and these in turn are very different from the issues faced by Jai AmbeNagr or Maharashtra Nagar and Mandala. This heterogeneity has several implications for transformative action. It suggests that action will have to be at least at tow scales—at the ward level to deal with the overall lack of infrastructure and targeted as particular slum communities to redress the highly particular nature of their vulnerabilities.

Slums as Vulnerable/Secure

There are about 226 slums in the M Ward. Their characterisation as slums makes them perennially vulnerable to the changing policy orientation of the state. Thus, even the most settled slums in the ward and the resettlement colonies created by the government are also vulnerable to some or the other form of displacement and to a quantitatively and qualitatively poor supply of amenities. However, some of the slums are so insecure in terms of housing that they experience evictions multiple times a year. These slums are zones of speculative interest, as well as violence, and often stories of human misery of multiple kinds. Currently, policy does not distinguish between slum areas and address their particularities.

Often, the better organised slums are the ones where most of the investment happens. The most vulnerable slums are often out of reach of welfare services.

Slums as Opportunities / Threats

The M Ward absorbed a big chunk of the inward migration to the city in the 1970s, as a result of the recurrent drought situation in Maharashtra and large parts of the Deccan plateau. They made their homes in hostile environments using ingenuity and social networks. They struggled to make the areas habitable and to improve their settlements. The resettled communities, too, struggled to make a new life in the ward with few opportunities available. Slums have, thus, afforded poor migrants the opportunity to make the city their home and to eke out a life that would be free of some of the burdens that a traditional life in the village meant. The communities have also struggled to create a more secure future for their children, a future that would be different from their own present, one in which education has a tremendous role. On the other hand, slums have also meant life in a harsh, violence-filled environment where there are several risks to living in peace and improving living environment without threat of eviction, health, peaceful marital and community relations, and rearing children with positive values.

Slums as Organically Generated/Market Generated

Several stories of earlier residents of the slums in the ward are about homes created through self-enterprise and effort with very little investment of money. Land was organized and distributed through linkages with local goons. Most of the land development was for occupancy and settlements that took shape consisted of people from similar castes and villages with kinship ties. As a ward on the edge, M Ward even now sees several settlements which are in their formative stage. The dynamics of settlement have substantially changed. Land development is a much more organized enterprise with linkages between political actors, service providers, and speculators. Transactions are money-led and sales and rentals are through brokers, though all of this is informal. There is also a linked industry for producing relevant government documents to secure the settlement. The occupants come in as isolated households in need, stay on rental basis, and are highly vulnerable to violence of evictions as well as that of land lords, service providers, and goons. Transactions in resettlement areas and other protected slums also mimic the formal market and operate through a complex economics that is linked to the formal market at certain points.

Slum as Informal/Unorganised Economies

The slums in M Ward emerged at a stage of late industrialisation in the city. The particular economic geography of the ward presented few sources of employment. The abattoir and the dumping ground provide for a substantive chunk of livelihoods in the ward, most of which are informal. Ancillaries to the public sector and the contractual and temporary work opportunities in the industries in the ward are the

other major source of employment in the ward. The slums in the ward, thus, contain elements of an informal economy as well as the unorganized economy. The newfound links to Navi Mumbai have given rise to another informal economy in the form of vending and services.

Slum as Subalternaeity / Perpetuation of Clientilist Politics

Certain studies of slums portray them as "shadow cities", where occupants assert their right to be in the city, which is otherwise characterised by a dominance of property relations and capital. They, thus, contribute to a subaltern discourse by their very presence, a silent revolution that co-produces the city. Seen in the context of M Ward, it is evident that while there may be certain elements of subalternaeity in the act of settlement formation and consolidation; the realities of slums are extremely harsh. This not only has implications for lives in these settlements, which are often wasted, but also poses very little challenge to the prevalent political economy. Rather they help to perpetuate a politics that revolves around vote banks, clientilism, and partisanship that is bereft of any transformative content. There is considerable civil society presence in the slums in the ward; there is also considerable political activity. Yet the overall outcome as seen in the material conditions of living seems to be insignificant.

Slums as Invisible

Beyond the polemics of the above discussion, the enhanced policy attention to slums at a national level has brought about the realisation that the official understanding of slums and issues within is very low. The Census started accounting for slums as a distinct phenomenon in 2001 (with variances in definitions). The NSSO also has only 2 rounds of surveys of living conditions in slums. Both the census and the NSSO focus on habitational conditions, thus, offer us only a limited understanding of realities. Slums are invisible in city plans and in terms of governance data. There are attempts to collect some comprehensive data through central government schemes, but this is a process that has just begun.

In Mumbai, where it is estimated that over half the city's population stays in slums, comprehensive data of slums has been collected only twice: a) census of slums conducted in 1997 for the purpose of the enacting the slum law and issuing photo-passes to residents and b) a sample survey of all slums commissioned by the MCGM in 2002 to evaluate the sanitation conditions in slums. The existing landuse plan of the city, for the first time, recorded the outer boundaries of slums as an existing land-use category. It can be argued that in a city that is obsessed with real estate and speculation, the focus of data around slums is on housing. It, however, precludes an understanding of people's lives. There are several micro-studies of slums yielding very interesting findings (in the case of Mumbai, these include studies by Sandeep Pendse, Jan Nijman, Vandana Desai, Marie Saglio, Lisa Weinstein, and Lisa Bjorkman). These studies reflect the changes in slum realities and life and point to some of the contradictions in various aspects ranging from space to amenities and livelihoods, participation and community organization, and so on. Yet their nature, that of eclectic disciplinary orientations, do not enable action-

oriented knowledge, which can be generalised and applied. Overall, it can be stated that there is no comprehensive database of slum communities, the living conditions, the status of services, the patterns of life, the issues, the vulnerabilities, and the aspirations of people. The present study seeks to fill this important gap at the scale of a municipal ward, a critical step towards more inclusive planning and action at the ward level.

The Survey

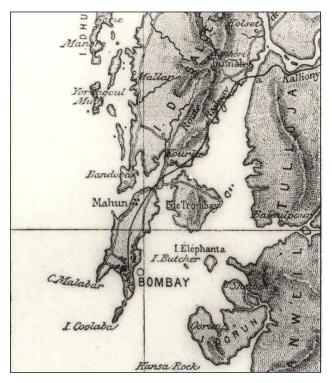
The M Ward survey is an attempt to develop a comprehensive database of all slums within the M Ward. The survey is based on recognition that visibility is critical when the ward itself is undergoing a transformation in its economic geography. This can not only be a source of opportunity, but also enhanced vulnerabilities and threats to the lives and livelihood of people in the ward. It sees data as a critical lever for the transformation of the human conditions in the ward by catalysing important changes and synergistic action in sectors such as education, vocational skills, and health.

The following are the key features of this survey:

- It is based on a systematic sampling method. Several studies of slums utilise a random sampling based on intervals, due to the lack of a systematic data base of the universe. The M Ward survey created a sampling frame as the first step through a listing of all slum households in the ward and then chose the sample. Admittedly, certain slums were left out from the listing and the survey but these exclusions are low. Thus, the survey offers a data set that is reliable, and reflects the varying nature of slums.
- The parameters of the survey are fairly comprehensive. Thus, it covers areas such as demographics, housing, health, education, livelihoods, and lifestyle. These go beyond census and NSSO parameters and include several aspects that could be considered as outcomes of service provision and policies towards slums.
- Several findings of the survey have been reiterated, deepened through an on-going interaction with several slums communities in the ward, through processes of micro-planning and consultations.
- The major objective of the study was to create a baseline of socioeconomic conditions of residents of slums in the M-East ward that would enable an effort to transform the ward from being one with the lowest Human Development Index into one that is more inclusive. The nature of the data, therefore, is designed to lend itself to being converted into positive interventions for change.

Introduction to the ward

Evolution of the Ward:



Mumbai: 1882



Mumbai: 1920

Pre 1896: Villages with orchards and paddy fields

1896: Plague epidemic in Island City and Fleeing of Population to Northern Suburbs

1906: Single Railway Line from Kurla-Chembur for garbage trains

1924: Kurla-Chembur Railway line opened for Passenger traffic –later extended to Mankhurd

1927: Deonar Garbage Dump set up- India's oldest and largest Dumping Ground 132 ha

1932: St. Anthony's school set up

1937: Bombay presidency golf club acquired land from St. Antony's home coop society, and shifted from Sewri 'The New Club ltd'

1940s: Areas "distinctly segregated as Hindu Colony (area near station), Christian Colony (roads 11-16th), and Gauthans, (pockets around paddy fields extending to Mahul in the south and Turbhe in the east"

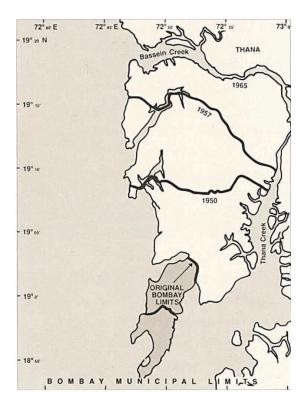
Population: 6398

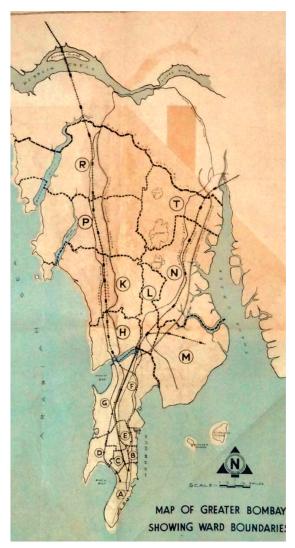
1943: Land to left of Golf Club given to the Military to house officers

1948: Modak Mayer Master Plan*

1950: Boundaries of Bombay extended to include suburbs which brought Chembur into greater Mumbai region & in 1957 it was further extended to current limits of Mumbai

Population: 18841





Ward Map Mumbai: 1964

1952: Morarji Desai, CM of Bombay Presidency, acquired Golf Club land to house refugees from Sind

1954-60: Naval Base set up at Trombay,
Atomic Energy Establishment – Trombay
Rashtriya Chemical Fertilizer
Tata Thermal power station – Trombay
NTPC sets up administrative and storage facility,
Burmah Shell largest refinery set up Academic
institutions such as TISS & IIPS Beggar's Home

Housing Board Colonies- StationColony (Subhash Nagar), Shell Colony (Sahakar Nagar), Township Colony (Tilak Nagar) Chembur transformed to largest residential colony

1964: FSI of m ward fixed to 0.5 when the first Development Plan for Mumbai

1970s: Sion Panvel expressway

in Asia

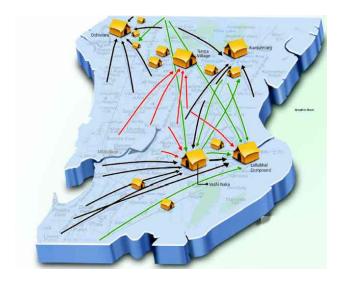
1971: Abattoir shifted from Bandra to Deonar to make way for a bus depot

1972-73: Relocation of poorer residents from Inner city areas to facilitate urban development there.

In this process of urban development occupants of those lands were relocated to Shivaji nagar, Baiganwadi and Lotus colony.

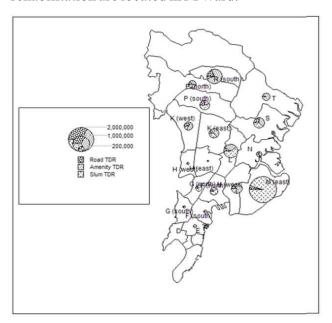
The ward also saw an influx of people (prominently Dalit) following the draught in Rural Maharashtra

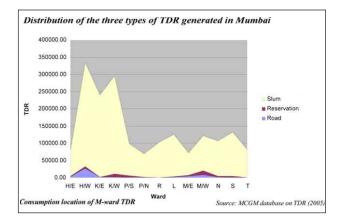
1976: The ward also witnessed internal relocation of people to accommodate industries e.g.: Residents of Janata colony, BARC were displaced and relocated to Cheetah camp



Relocation of people due to infrastructural projects

A ward-wide analysis of the locations where slum TDR were granted shows that 64% (around 2.2 sqkm) of all the TDR generated in lieu of slum rehabilitation are located in M Ward.





1986-93: In order to 'clean' the city of its poor, another set of relocations and rehabilitations under special grant which was announced by the Prime Minister brought a large number of people to M ward

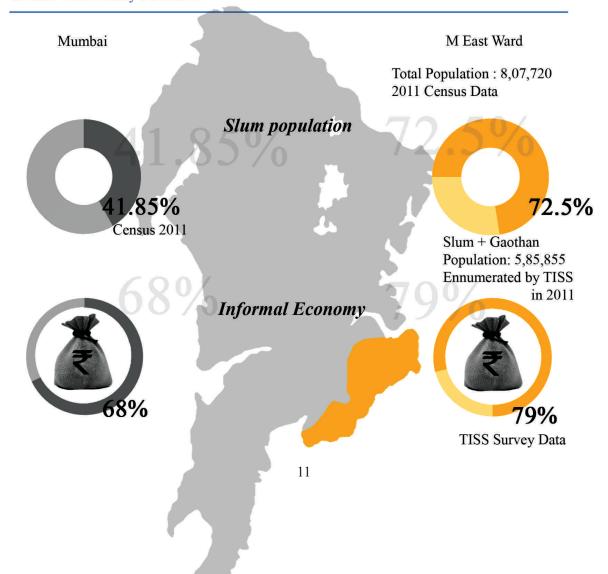
1991-94: Second Development plan for Mumbai, which Increased the FSI for M ward from 0.5, to 0.7 and then to 1.0, Further Introduction of TDR, for Amenities & Road and later even Slum TDR was introduced

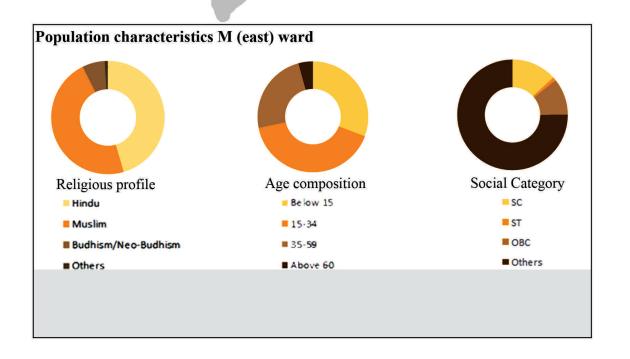
2003-06: Trend of relocation from all over the city continued with World Bank funded MUTP & MUIP infrastructure projects adding a large number of households,

Land parcels de-reserved from Industrial to Residential or commercial Highest TDR supplier

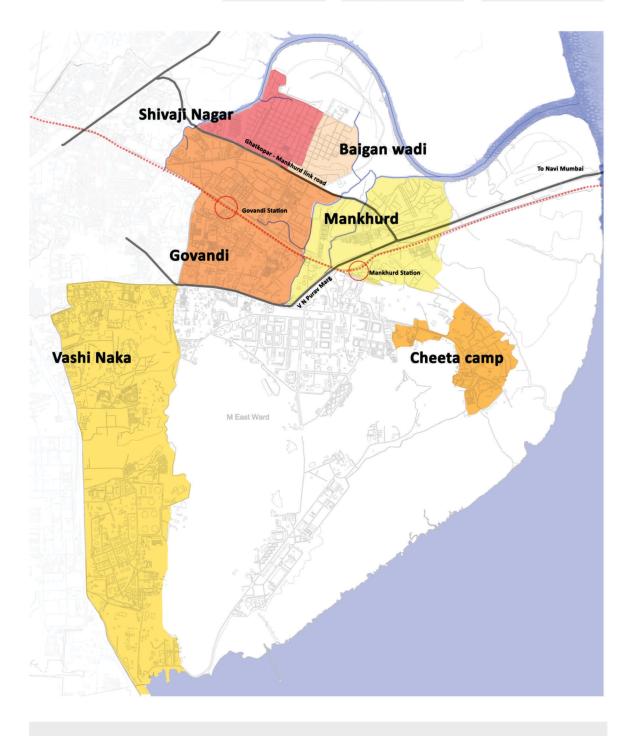
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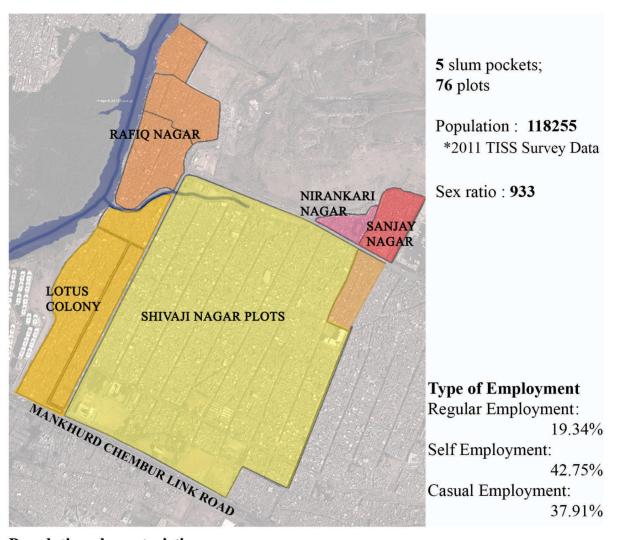
The Greater Bombay, C. Rajagopalan, 1962 (Malini Krishnankutty- Work in progress towards PhD, TISS, 2014)

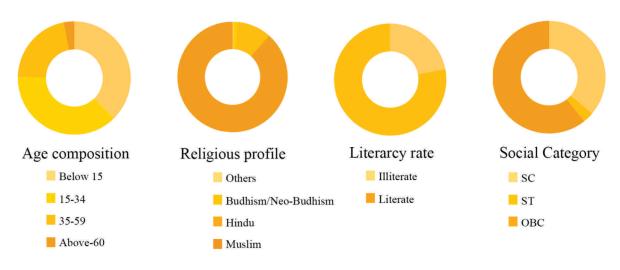


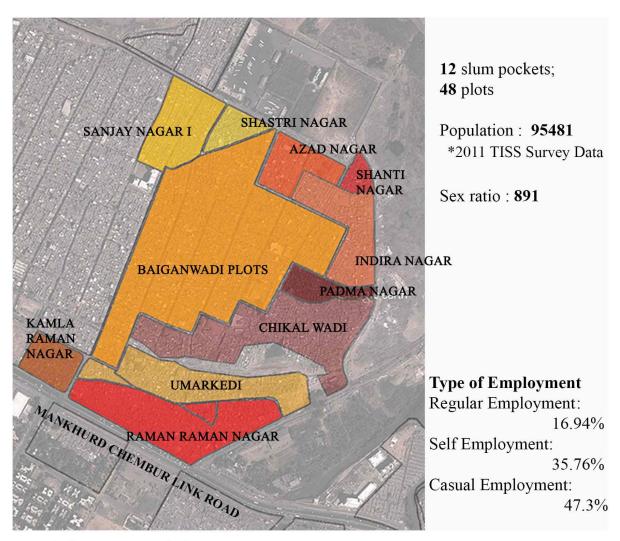


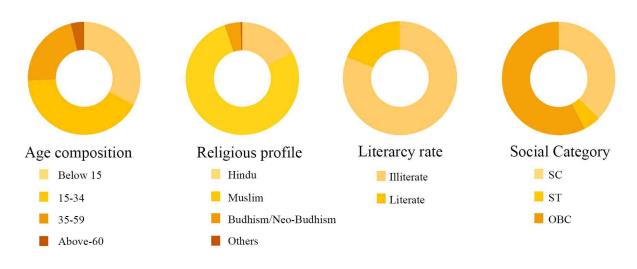
6 Areas → 74 Slums → 112347 → 20526 9 gauthans Enumerated Households Households

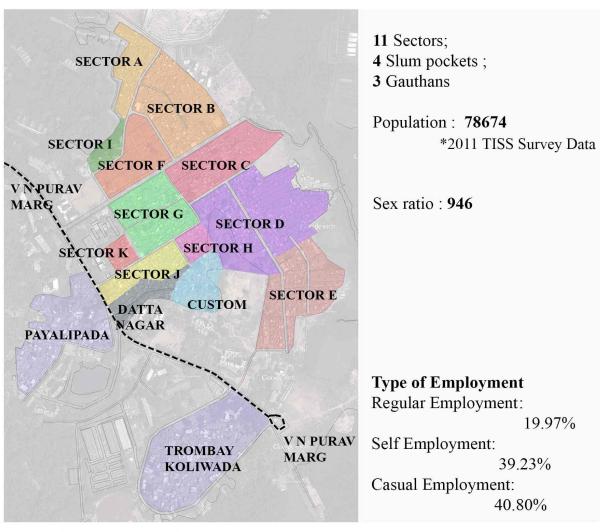


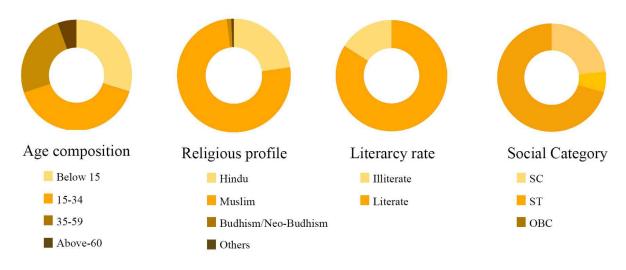


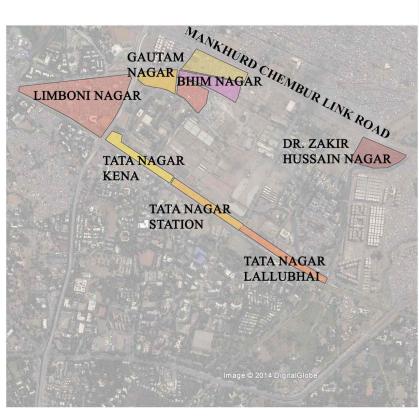












16 slum pockets;2 Gauthans

Population: **85815** *2011 TISS Survey Data

Sex ratio: 910

Type of Employment

Regular Employment:

19.98%

Self Employment:

32.55%

Casual Employment:

47.46%

