CIVIL SERVICES ACHIEVERS' POINT

CSAP's SMART BOOK

SOCIAL JUSTICE

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CONTENT

CHAPTER 1
POVERTY

What is poverty?

Poverty is a state or condition in which an individual or group lacks the resources necessary to meet basic needs and enjoy a decent standard of living. These basic needs include food, shelter, clothing, healthcare, and **education**.

Poverty can also mean lacking access to basic amenities such as clean water, sanitation facilities, and electricity.

Status of poverty in India

- **Global MPI 2022**: 415 million individuals in India were able to escape multidimensional poverty in the last 15 years between 2005–2006 and 2019–21, with the incidence of poverty exhibiting a sharp drop from 55.1% to 16.4%.
- **MPI report by NITI Aayog, 2021**: National MPI score of India is 0.118. In India, 25.01% of the population was multidimensionally poor.
  - o Kerala has turned out to be the state with the lowest rate of poverty in India. (only 0.71% of Kerala's population is poor).
  - o Kottayam of Kerala is the only district in India without poverty.
  - o Bihar, Jharkhand, and Uttar Pradesh have registered the highest poverty rate across India.
  - o 51.91% of the population in Bihar is classified as poor, followed by Jharkhand (42.16%) and Uttar Pradesh (37.79%).

What are the various outcomes of poverty?

Some of the important outcomes of poverty include

- **Lack of access to basic necessities**: People living in poverty often lack access to basic necessities such as food, water, shelter, and healthcare.
- **Poor health**: Poverty is associated with poor health outcomes, including malnutrition, higher rates of disease and illness, and limited access to medical care.
- **Poor education**: Poverty often leads to poor educational outcomes, with individuals from low-income households having limited access to quality education and training.
- **Limited job opportunities**: Poverty can limit job opportunities, with individuals from low-income households often facing discrimination and limited access to employment opportunities.
- **Housing insecurity**: Individuals living in poverty may struggle to afford adequate housing, with many living in overcrowded or substandard housing conditions.
- **Social exclusion**: Poverty can lead to social exclusion, with individuals from low-income households facing discrimination and stigma.

What is poverty line?

The minimum expenditure (or income) required to purchase a basket of goods and services necessary to satisfy basic human needs is called the poverty line.

- Poverty line estimation in India has been **based on the consumption expenditure** and not on the income levels due to difficulties in assessing incomes rural and informal economy of India.
- The basket of goods and services necessary to satisfy basic human needs is the **Poverty Line Basket (PLB).**

Limitations of poverty line estimation

However, the poverty line approach also has several limitations

- **Inadequate measurement**: It is based on a consumption-based approach, hence may not capture all aspects of poverty, such as access to healthcare, education, and other social services.
- **PLB components:** Determining components of PLB has been one of the challenges due to price differentials (of constituents of basket) which vary from state to state and period to period.
- **Limited coverage:** It only covers those households who fall below the poverty line,

leaving out households who are just above the poverty line but still face significant challenges in meeting their basic needs.

- **Lack of regional variation:** Since it is based on a national average, which may not reflect the differences in the cost of living and poverty levels across different regions in India.
- **Lack of consideration for vulnerability:** It does not take into account vulnerable groups, such as women, children, and the elderly, who may face additional challenges in meeting their basic needs.

How has poverty estimation evolved in India?

Poverty estimation in India has evolved in the following ways:

- In the pre-independent era, Dadabhai Naoroji, in his "**Poverty and the Un-British Rule in India**" was among the first to estimate poverty in India linked to British rule.
- Later, the **National Planning Committee (1938)** and the **Bombay Plan** (1944) formulated their respective poverty lines.
- The **Alagh Committee** (1979) developed a poverty line for rural and urban areas based on nutritional requirements. Also, **DT Lakdawala** (1993) suggested calculating consumption expenditure based on calorie consumption and constructing state-specific poverty lines that could be regularly updated.

- **Tendulkar Committee (2009)**: The Tendulkar Committee recommended changing monthly household consumption into consumption expenditure per person per day.
  o The national poverty line for 2011-12 was estimated at Rs. 816 per capita per month for rural areas and Rs. 1,000 per capita per month for urban areas
- **Rangarajan Committee (2014)**: It recommended separate consumption baskets for rural and urban areas which include food items that ensure recommended calorie, protein & fat intake and non-food items like clothing, education, health, housing and transport.

  o It recommended monthly per capita consumption expenditure of Rs. 972 in rural areas and Rs. 1407 in urban areas as the poverty line
- **Socio-Economic Caste Survey (SECC), 2011**: It was based on the committee chaired by Dr. N. C. Saxena to propose a new methodology for identifying below poverty line households. The committee recommended a three-fold classification of households: Automatically excluded, automatically included and Others
  o Government has also being using SECC data for identification of beneficiary households while implementing its social welfare programmes
- Currently, poverty estimation in India is carried out by NITI Aayog Task force. It uses data collected by the National Sample Survey Office (Ministry of Statistics and Programme Implementation (MOSPI)) to calculate the poverty line.

What are the various indices to measure poverty?

Global Indicators
Some of the indices used to measure poverty are:

- **Global Multidimensional Poverty Index (MPI):** It is released by the United Nations Development Programme (UNDP) and the Oxford Poverty and Human Development Initiative (OPHI).
  o MPI integrates two factors of poverty
    ▪ **Incidence of poverty:** It is the percentage of people who are poor. This is the headcount ratio of multidimensional poverty (H).
    ▪ **Intensity of poverty**: It takes into account the average percentage of dimensions in which poor people are deprived(A).
    ▪ The MPI is calculated by multiplying the poverty headcount by the intensity of poverty, MPI = H x A (Incidence x Intensity).
  o **Global MPI 2022**: India has the largest number of poor worldwide at 22.8 crore. Also, the incidence of poverty has fallen from 55% in 2005/06 to 16.4% in 2019/21 in India.

Dimensions (Weightage)	Indicators (Weightage)	Dimensions (Weightage)	Indicators (Weightage)
Health (⅓)	• Nutrition (⅙) • Child mortality (⅙)	Health (⅓)	• Nutrition (1/6) • Child and Adolescent mortality (1/12) • Antenatal Care (1/12)
Education (⅓)	• Years of Schooling (⅙) • School attendance (⅙)	Education (⅓)	• Years of Schooling (⅙) • School attendance (⅙)
Standard of Living (⅓)	• Cooking oil (1/18) • Sanitation (1/18) • Drinking Water (1/18) • Electricity (1/18) • Housing (1/18) • Assets (1/18)	Standard of Living (⅓)	• Cooking oil (1/21) • Sanitation (1/21) • Drinking Water (1/21) • Electricity (1/21) • Housing (1/21) • Assets (1/21) • Bank Account (1/21)

- **World Bank Poverty Line**: At the international level the World Bank has set the international poverty line at **$2.15 per person per day using 2017 prices.**
- **Poverty Gap Index**: Developed by the World Bank. It measures the intensity of poverty by calculating the amount of money required by a poor household in order to reach the poverty line.
- **Poverty and Shared Prosperity Report, 2022:** It is released by the **World Bank**. According to it, in 2020 alone, the number of people living below the extreme poverty line rose by over 70 million

National Indicators

- **National Multidimensional Poverty Index:** It is released by NITI Aayog. The baseline report is based on the National Family Health Survey 4, which was conducted in 2015-16.
  o Bihar: Highest proportion of people multidimensionally poor
  o Kerala: Lowest proportion of people multidimensionally poor

- **Bare necessities Index (BNI):** It is constructed by Economic Survey 2020-2021 using data from National Statistics Office (NSO). It aims to quantify the basic needs approach to economic development.
  o The BNI summarizes 26 indicators on five dimensions, viz., water, sanitation, housing, micro-environment, and other facilities.

'**National Multidimensional Poverty Index: A Progress of Review 2023'**, was released by Niti Aayog.

Multidimensional Poverty- Poor people face daily deprivations such as poor health, lack of education, inadequate living standards, disempowerment, poor work quality, violence threats, and living in hazardous environmental areas, among others.

Global Multidimensional Poverty Index (MPI): The United Nations Development Programme (UNDP) and the Oxford Poverty and Human Development Initiative (OPHI) launched a program in 2010.

The study measures health, education, and standard of living using three broad indicators and 10 sub-indicators, including nutrition, child and adolescent mortality, years of schooling, and living standards.

Findings of Global MPI: *Around 18% of the 6.1 billion people in 110 countries, including India, are living in acute multidimensional poverty, with India's poverty figures dropping from 645 million in 2005-06 to 230 million in 2019-21.* India's multidimensional poverty figures dropped from **645 million in 2005-06 to 370 million in 2015-16,** and further to 230 million in 2019-21.

National Multidimensional Poverty Index (NMPI)- The national MPI model adds two indicators, namely Maternal Health in the health category and Bank Accounts in the standards of living category, while keeping the ten indicators from the global MPI model. To capture the different aspects of poverty in India, data from the National Family Health Survey (NFHS-5 (2019–21)) are used.

Findings of National MPI: In India, 13.5 crore people were able to escape multidimensional poverty between 2015–16 and 2019–21, which represents a 9.89% decline in the number of such cases. Multidimensional poverty declined most quickly in rural areas.

Committees to estimate the poverty in India

Committees	Methodology
V N Dandekar and N Rath (1971)	Consumption Expenditure for 2,250 daily calories.
Y K Alagh Task Force (1979)	Expense for consumption 2,400 calories in the rural 2,100 calories per day in urban areas
D T Lakdawala Expert Group's (1993)	Consumption costs determined by the number of calories consumed.
Tendulkar Expert Group (2009)	The study proposes a uniform poverty line basket for rural and urban India, considering the Mixed Reference Period and private expenditure on health and education.
Rangarajan Committee (2014)	The Tendulkar poverty line has been revised by establishing distinct consumption baskets for rural and urban areas.

CHAPTER 2
NUTRITION AND SANITATION

The Global Hunger Index (GHI) 2023, released by Concern Worldwide and Welt Hunger Hilfe, is a report by non-governmental organizations from Ireland and Germany.

Key findings of the GHI

- **Global trends -** Since 2015, there has been minimal progress in reducing hunger due to various crises such as the COVID-19 pandemic, the Russia-Ukraine war, and climate change impacts.
- South Asia and South of the Sahara have the highest hunger levels globally, with GHI scores of 27.0 each.

India related findings (GHI, 2023)

- **India ranks 111th out of 125 countries with a GHI score of 28.7,** classified as Serious on the GHI Severity of Hunger Scale, slightly improving from its 2015 GHI score of 29.2.
- The report reveals that 16.6% of children suffer from undernutrition, while 35.5% experience child stunting, 18.7% experience child wasting, and 3.1% experience child mortality.

India's government has expressed objections to the Global Health Index (GHI) due to methodological issues, inadequate sample size, and inappropriate data sources.

ABOUT GLOBAL HUNGER INDEX 2023

Objective:
To comprehensively measure and track global, regional, & national hunger.
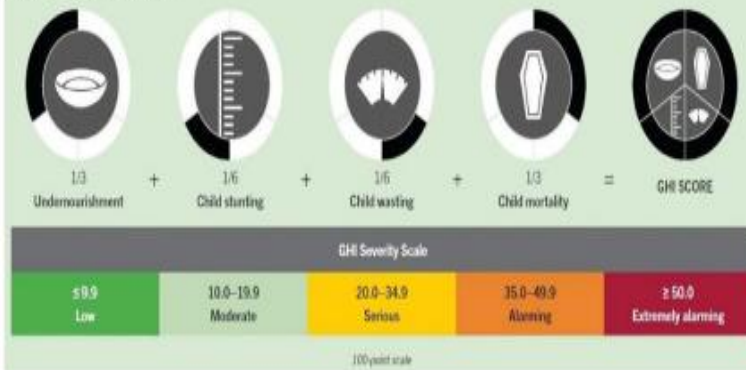
Published by:
Concern Worldwide & Welt Hunger Hilfe

Significance:
The report attempts to **"raise awareness of United Nations' Sustainable Development Goal 2 (SDG 2)** that endeavors to achieve **'Zero Hunger' by 2030.**

FIGURE A.1
COMPOSITION OF GHI SCORES AND SEVERITY DESIGNATIONS

Note: All indicator values are standardized

1/3 Undernourishment + 1/6 Child stunting + 1/6 Child wasting + 1/3 Child mortality = GHI SCORE

GHI Severity Scale				
≤9.9 Low	10.0–19.9 Moderate	20.0–34.9 Serious	35.0–49.9 Alarming	≥50.0 Extremely alarming

100-point scale

KEY INDICATORS OF GHI:
- 'Hunger': It refers to the **undesirable sensation caused by insufficient consumption of calories** daily to lead a normal and healthy life.
- **Wasting** is children's **weight relative to their height.**
- **Stunting** is the share **of children** under **age five** with low height for age.
- **Child mortality:** It refers to the death of a child under the age of five.
- **Undernourishment:** It measures the proportion of the population facing chronic deficiency of dietary energy intake.

KEY FINDINGS: INDIA SPECIFIC
- India has a score of **28.7,** indicating a **serious level of hunger.**
- **Performance on Various Parameters:**
  - **Rate of undernourishment:** 16.6 percent
  - **Under-five mortality:** 3.1 percent
  - **Prevalence of anemia in women aged between 15 and 24 years:** 58.1 percent
  - Child wasting rate in the world: 18.7
- India's **score improved from 38.4 in 2000 to 35.5 in 2008 and 29.2 in 2015,** over the past eight years, the country has advanced on the GHI by only 0.5 points.

The Swachh Bharat Mission (Grameen) has successfully achieved ODF Plus status in 75% of Indian Villages up to September 2023.

About ODF Status
ODF is the termination of faecal oral transmission, defined by –
- The surroundings and village were free of visible faeces; and
- All homes and public/community institutions dispose of their waste using safe technology.
- A village that has maintained its ODF status while also putting in place liquid or solid waste management systems is known as an ODF Plus village.

ODF Plus Model village is one which is sustaining ODF status and
- has arrangements for both Solid Waste Management and Liquid Waste Management; and
- observes visual cleanliness, i.e., minimal litter, minimal stagnant wastewater, no plastic waste dump in public places; and
- Displays ODF Plus Information, Education & Communication (IEC) messages.

CHAPTER 3
HEALTH AND WELLBEING

Rural Health Statistics report published by the Union Health and Family Welfare Ministry shows a lack of doctors at the CHCs across India.

Findings of the Report:
- An existing CHC can be declared a fully operational First Referral Unit (FRU) if it can offer round-the-clock emergency obstetrics and newborn care services.

Rural Healthcare Infrastructure in India:

- Sub-Center: Sub-Centre is envisaged to serve up to 5,000 people.

- Primary Health Centres: Serve up 20,000-30,000 people.

- Community Health Centres: Covers approximately 80,000-120,000 people.

Antimicrobial Resistance (AMR)
As the acute COVID-19 phase subsides, the enduring, harmful pandemic of Antimicrobial Resistance (AMR) necessitates a swift global response.

Threats posed by AMR:
1. The emergence of microbial resistance to antibiotics has significantly impacted the treatment of infections like pneumonia, TB, septicaemia, and various foodborne diseases.
2. AMR significantly impacts patients' health by causing longer hospital stays, health complications, and delayed recovery.
3. The Muscat Manifesto underscored the necessity to expedite political commitments in implementing One Health measures to curb the spread of AMR.
4. India plans to enhance private sector engagement and data reporting to the WHO Global Antimicrobial Resistance and Use Surveillance System (GLASS) and other standardized systems.