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Viksit Bharat @2047

Governance Transformed

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Chapter 19. Social Justice and Affirmative Action

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Introduction

This chapter is an attempt to understand how the Indian Constitution has shaped public policies to secure social justice through affirmative action. It will look at the indicators of human well-being at the time of India's independence and how they have evolved across the decades of development. As poverty is multidimensional, any assessment of social justice must consider a range of indicators that capture the efforts made to improve the lives and livelihoods of deprived households and vulnerable social groups over the last 75 years. In doing so, it will examine the policies for affirmative action that have impacted social participation in India's nascent democracy. The chapter will also analyse the performance of Indian provinces and explore the role of devolution and education of girls in the relative performance of states. It will also consider social and political movements and their consequences for social justice. The deepening of democracy has translated into greater attention to social justice in the policies of competing political parties, aiming to secure better lives for our citizens. It will conclude with an assessment of where we have reached and what more needs to be done to

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ensure that every Indian citizen gets a social opportunity to develop their fullest human potential and live happy lives. It will also assess how efforts at affirmative action have enabled India to progress faster in political participation at all levels.

Need for Social Justice and Affirmative Action

India's journey in 1947 began with very unsatisfactory indicators of social development and economic progress. Colonial India had suffered the ravages of de-industrialisation, high levels of poverty, lack of universal education, unequal gender relations, and very severe forms of social inequality among the vulnerable social groups. Social inequalities in the form of caste and its consequences had aggravated during colonial times (Gallanter, 1989). The Constitution of India reflected the aspirations of every Indian (Khosla, 2012), and that is why the focus was on social justice and affirmative action to ensure not only equality but also equity. Equality and equity have taken on slightly different meanings in conversations around social justice. Equality, in this context, means that people are given the same access to opportunities, regardless of historical or other forms of injustice that may alter how much someone can access those opportunities. Equity, in contrast, tries to account for an imbalanced social system by providing the resources to create an equal outcome. Equity is a vital part of ensuring a just society, given the social inequalities of a hierarchical society.

Pursuing Equality in a Land of Hierarchy: The Constitution of India

Marc Galanter, in his famous 1986 essay "Pursuing equality in the land of hierarchy: An assessment of India's policies of

compensatory discrimination for historically disadvantaged groups,” remarked (Gallanter, 1989, pp. 185–230),

These compensatory discrimination policies entail systematic departure from norms of equality. These departures are justified in several ways: first preferential treatment may be treated as needed for personal fairness, a guarantee against the persistence of discrimination in subtle and indirect forms. Second, such policies are justified in terms of beneficial results that they will presumably promote: integration, use of neglected talent, more equitable distribution, etc. With these two—the anti-discrimination theme and the general welfare theme—is entwined a notion of historical restitution or reparation to offset the systematic and cumulative deprivations suffered by lower castes in the past.

The Indian Constitution paved the way for the incorporation of affirmative action in the public policies of India.

Understanding Social Justice

Social justice refers to a fair and equitable division of resources, opportunities, and privileges in society. It has come to be conceptualised as distributive justice that creates social institutions delivering access to economic benefits. John Rawls’ *A theory of justice* (1971), is perhaps the most famous examination of social justice (Rawls, 1971). Amartya Sen thereafter has looked at inequality and social justice from the perspective of the entitlements of the deprived (Sen, 1998). John Rawls outlined his vision of justice as fairness. Access, equity, diversity, participation, and human rights are the main principles of social justice.

Understanding Affirmative Action

Affirmative action refers to a set of policies and practices within a government or organisation seeking to benefit marginalised groups. Historically, support for affirmative action has been justified by the idea that it may help with bridging inequalities in employment and pay; increasing access to education; promoting diversity and social equity; and redressing alleged wrongs, harms, or hindrances. Reservation in India is a form of affirmative action designed to improve the well-being of Scheduled Castes (SCs) and Scheduled Tribes (STs) and other Backward Classes (OBCs), defined primarily by their caste. Members of these categories comprise about two-thirds of the population of India. According to the Constitution of India, up to 50% of all government-run higher education admissions and government job vacancies may be reserved for members of SC, ST, and OBC categories and 10% for those in Economically Weaker Sections, with the remaining unreserved.

Reservation in Electoral Processes, Education, and Employment

Reservation in electoral constituencies in local, state, and national elections has led to the active participation of hitherto vulnerable social groups in electoral politics. Access to education and employment has improved access for individuals from vulnerable communities. It has also mainstreamed vulnerable social groups into the governance and administration of departments. These changes over the decades have aided the processes of social integration, though challenges still remain. Compensatory discrimination has led to redistribution, representation, integration, acceptance, integrity, incubation, mobilisation, stimulation, self-liquidation, fairness, secularism, and development. There are a few counter arguments with regard to stagnation, self-perpetuation, over

protection, etc., but overall, compensatory discrimination has strengthened mainstreaming of all communities in the democratic process of the country. The Constitution of India has triumphed.

Political, Social, and Economic Democracy

Dr. B. R. Ambedkar, one of the principal architects of the Constitution of India, was aware of the challenges of social justice. He expected universal adult suffrage to secure political, social, and economic democracy. His apprehension was that democracy itself would collapse if political democracy is not accompanied by social and economic democracy (Dr. B. R. Ambedkar in Constituent Assembly Debates; quoted in Sinha, 2003). Given that the glass of human well-being is only half full, some coalitions and new partnerships have let political democracy survive despite insufficient social and economic democracy. Affirmative action for elections, education, and employment of the scheduled castes, scheduled tribes, and other backward classes created an interest among all social groups for the survival of political democracy. As Sudipto Kaviraj remarked, while caste was on the decline in terms of “purity–pollution” and other social forms of discrimination, it was on the ascendancy in the Indian democratic experiment and politics (Kaviraj, 1997).

Assessing Social Justice and Affirmative Action

In assessing the success of social justice and affirmative action, one has to bear in mind the extreme disadvantage from which India began her journey. Our social indicators were dismal and stagnant at the time of independence. We were further saddled

with hunger and drought, epitomised by the 1943 Bengal famine and the religious riots on account of the partition of India in 1947. Turmoil defined our tryst with destiny, and social justice through affirmative action was also seen as a way of holding the country together, in spite of its contestations and conflicts.

The Severity of India's Challenges

The severity of India's challenges is reflected in the 32 years' life expectancy and an infant mortality rate of 146 in 1950–1951. Even in 1986–1987, regarding the educational situation, the 42nd round of National Sample Survey (NSS) presented a very dismal picture (National Sample Survey Organization, 1986–1987):

- In rural areas, 42.79% males and 69.23% females aged 6 and above never enrolled in any educational institution. The comparable figures for urban areas were 17.15% and 36.31%, respectively.
- In rural areas, 47.61% males and 68.38% females were non-literate. Only 6.52% males and 1.98% females had reached matric (secondary and above) in rural areas.
- Ever-enrolled female SC/ST/others who discontinued at the primary level reveal social group-wise levels of drop-out.
- In Andhra Pradesh, the drop-out rate at the primary level in rural areas was 100% for ST girls, 82% for SC girls, and 71.63% for other girls.
- In Bihar, drop-out rate at the primary level in rural areas was 149.64% for ST girls, 100% for SC girls, and 78.51% for other girls.
- In Kerala, drop-out rate at the primary level was 64.16% for ST girls, 38.50% for SC girls, and 32.27% for other girls.

As the data above reveal, while the social justice and affirmative action thrust facilitated faster progress, there was still a lot of ground to cover.

The Impact of Sarva Shiksha Abhiyan on Social Participation

The results of the 2014 NSS 71st round are significant. It also marks a decade and a half of implementation of the Sarva Shiksha Abhiyan for Universal Elementary Education. There is no difference in net attendance ratio of girls and boys up to the elementary school level (Class 8) in rural and urban areas. Ninety-nine per cent children enrolled in schools, with primary school within 2 kilometres of 99% households and upper primary schools within 2 kilometres for 86% households in rural or urban areas. Universal school participation has become a reality. The participation of girls and children from vulnerable social groups is also near universal in elementary school education (De et al., 2006). The challenge of quality and learning remains daunting, as a large number of those who enrol and attend schools are not able to attain learning and writing competencies commensurate with their schooling years. We need to understand how “all children in school” will also lead to “all children learning.” The Nipun Bharat Mission becomes critical in this journey (Sinha, 2024a).

Improvement in Health Indicators

The National Rural Health Mission (NRHM) was launched on April 12, 2005. It sought to provide accessible, affordable, and quality health care to the rural population, especially the vulnerable sections. NRHM recognised the leadership role of the states. It proposed flexibility to the states to take care of local needs. States, in turn, were expected to decentralise planning and implementation arrangements to ensure that need-based and community-owned District Health Action Plans become the basis for interventions in the health sector (Sinha, 2024b).

NRHM aspired to reach 2% of Gross Domestic Product (GDP) on public spending by 2012, in partnership with States. “Communitisation,” flexible financing, monitoring progress against Indian Public Health Standards, improved management through capacity, and innovations in human resource management were the five key approaches adopted by NRHM. The National Health Systems Resource Centre (NHSRC) was set up to drive reforms by building human resource capacity at all levels. Strengthening the public system of primary health-care delivery with some partnerships as per need was its avowed thrust. NRHM recognised the need for crafting a credible public system, whose need is felt even more strongly post-COVID.

NRHM has reached all three quantifiable targets of IMR (infant mortality rate), MMR (maternal mortality ratio), and TFR (total fertility rate), much after 2012, with public spending barely a little above 1% of GDP. Primary health care has many wider determinants that make attribution very difficult. The ability to conduct vaccinations during COVID-19 (2021) in the remotest locations—with the active community connect role played by the Accredited Social Health Activists (ASHAs) and with adequate cold chain and vaccinators at the cutting edge—is a tribute to the investments from 2005 onwards in strengthening the public system.

Table 1 highlights the variations across states. Several state-specific factors play a critical role: social movements for justice, a focus on human development, and a progressive acceptance of entitlements for all contribute to better functioning systems of primary health care in states. Kerala and Tamil Nadu had strong social movements that recognised the access to public services for all, including the scheduled castes, the scheduled tribes, other backward classes, and women. The focus on women as a constituency, the promotion of small families, and education for all were part of large social movements in these states, contributing to a faster progress. In northern Indian states like Uttar Pradesh and Bihar, while there were many

political movements, there were very few impactful social movements that improved human development indicators.

*Table 1: Improvement in IMR and MMR: NRHM Led**

	<i>IMR 205</i>	<i>IMR 2020</i>	<i>MMR 2007-9</i>	<i>MMR 2018-20</i>
<i>India</i>	58	28	212	97
<i>Kerala</i>	14	6	81	19
<i>Tamil Nadu</i>	37	13	97	54
<i>Assam</i>	68	36	390	195
<i>Odisha</i>	75	36	258	119
<i>Uttar Pradesh</i>	73	38	359	167

** Based on Sample Registration System data of respective years released by Registrar General of India, Census of India.*

Lessons on Devolution and Development

There have been three key evidence-based lessons for an inclusive India in recent studies and reports. The Reserve Bank of India's 2023 *Report on the role of panchayats in economic development* concludes, on the basis of the Devolution Index, that States with higher Devolution Index scores (Kerala, Karnataka, Tamil Nadu, Maharashtra) are found to have better quality of socio-economic development. It illustrates this by comparing under five mortality and higher secondary transition rates with greater devolution. The Ministry of Panchayati Raj's Devolution Index of States (2015–2016), meticulously constructed, provides evidence across the human development sector of such a correlation.

The report of the United Nation Development Programme in 2022 and Niti Aayog's Multi-Dimensional Poverty Report in 2022, based on the National Family Health Survey-5 (2019–2021) data, also brings out how states like Kerala, Tamil Nadu, and

Karnataka report much lower incidence of multidimensional poverty. A comparison with Gross National Income per capita for 2021–2022 for states also shows that while incomes are important in reducing poverty, Kerala has only 0.55% multidimensionally poor persons despite being 11th on per capita income alone. Kerala and Tamil Nadu are also at the top in Monthly Per Capita Consumption Expenditure (MCPE) 2022–2023, released recently. Mission Antyodaya’s annual ranking of Gram Panchayats on 209 localized Indicators, in accordance with the Sustainable Development Goal (SDG) parameters, by Panchayats themselves, validated by women’s self-help groups (SHGs) as well, presents a similar picture of devolution contributing to better performance of panchayats.

Six Factors for Faster Poverty Reduction in Southern Indian States

The contribution of six factors to a faster decline of poverty in southern Indian states has been documented in my recent book, *The last mile: Turning public policy upside down* (Sinha, 2023). The six key factors are (i) adolescent girls in higher education, (ii) decline in fertility rates, (iii) improved primary health care, (iv) formation of women’s SHGs, (v) women’s participation in skill and vocational courses, and (vi) access to collateral free lending for women’s SHGs. Performance in female literacy and access to credit for SHGs is also linked to the devolution index, making a women-led, decentralised social development thrust, the most inclusive approach to creating a developed India.

Need for Convergence for Human Development Outcomes

There is evidence to show that outcomes in human development (education, health, nutrition, skills, livelihoods) do not lend

themselves to narrow departmentalism, as there are interconnected needs and a large number of wider determinants for outcomes. Community connect, use of technology as a means, and professionals to supplement the institutional arrangements for planning and implementation, along with a local government-led initiative of leaving no one behind, are the only way forward for a more equal society. Allocations for human development have to be as per national norms, and, clearly, states with greater deficits will need more resources. For everything else, allocation can be absolutely transparent and based on equitable principles. Human development is integral to a common minimum level of well-being.

The constitutional mandate, reflected in the 29 transferred sectors in the Eleventh Schedule for rural areas and 18 sectors in the Twelfth Schedule for urban areas, needs to be implemented as a priority. The state legislatures have been mandated by the Constitution to bring about the devolution to local governments. No one wishes to lose authority over financial resources, whether central or state. It is time for the Sixteenth Finance Commission not only to settle the vertical and horizontal distribution of taxes, it must mandate central and state governments to ensure complete devolution in the sectors assigned to them as a precondition for receiving some of the grants.

Urban Devolution

Urban devolution will need a major reform to provide for elected *basti*-level leaders in the urban local bodies. The current ward size is huge in many large corporations (30,000–300,000), making muscle power overtake community organisations and connections. It is time we built strong and resilient community organisations from the *basti* upwards in urban areas. Like the

Rural Livelihood Mission, there is a very strong case to create social capital for human development outcomes in urban areas.

Local government-led human development also determines private sector investments in manufacturing and services as human capital is at the core of enterprise development. Tamil Nadu, Maharashtra, Delhi, Hyderabad, and Bangalore get most of the private sector jobs, as that is where human capital is. Gujarat, besides its own human capital, is able to attract human capital for its private sector growth from other states in large numbers. Migration is a national need, but critical local skill availability does influence investment decisions.

It is time for learning outcomes in schools, employable skills in courses and colleges, quality of services in health, and a drastic reduction in stunting and wasting through a convergent community-led action to become the topmost priority. Crafting credible public systems should be the focus for public goods. Untied funds in proportion to the gap, with local governments and under community oversight, can get us outcomes. Recruitments must be professional by Public Service Commissions.

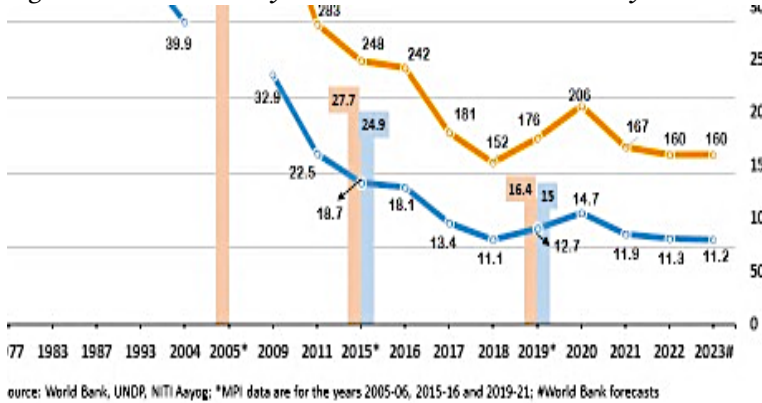
Income Poverty and Multidimensional Poverty

Decline in poverty has speeded up since 2005–2006, even when we look at Multi-Dimensional Poverty (NITI Aayog, 2022; United Nations Development Programme, 2022a). Social development indicators and asset deficits of the poor, seen in terms of housing, toilets, electricity, roads, bank accounts, immunisation, cooking on LPG, and membership of SHGs in the Livelihood Mission, etc. have improved.

The below figure from Dr. Ashok Gulati's piece on poverty in *The Indian Express* sums up the historical movement on income poverty and multidimensional poverty (Gulati and Ghosh, 2024). It is obvious that the dislocation of human lives and livelihoods

due to COVID adversely impacted the income of poor households across the world. India was no exception. Dr. Gulati, therefore, argues how income poverty may have increased due to the COVID dislocation. That the economy has grown well thereafter may have started settling this set back, but one has to acknowledge that multidimensional poverty improvement rates during COVID can never be what they were prior to COVID. There is a sobering case for evidence-based appreciation of the ground realities. The PRICE Survey 2022 also captures the challenge to incomes in the last two quintiles (People's Research on India's Consumer Economy, 2022).

Figure 1: Income Poverty and Multi-Dimensional Poverty



The United Nations Development Programme's Multidimensional Poverty Report 2022 clearly highlighted how India had successfully lifted 415 million people out of multidimensional poverty between 2005–2006 and 2019–2021 (United Nations Development Programme, 2022b). The southern Indian states had shown a remarkable reduction. Even in the northern Indian states, the declines were significant.

The 2022 World Bank Report on India states that extreme poverty in India in 2019 was 12.3% lower than in 2011 (falling from 22.5% in 2011 to 10.2% in 2019). Poverty reduction was higher in rural areas (declining from 26.3% to 11.6% between

2011 and 2019). The study also found that farmers with small landholding sizes have experienced higher income growth.

Pro-poor Public Welfare and the “Labharthi Varg”

The present government’s approach post-2014 has been to improve the ease of living for the poor. Such efforts were previously called the Minimum Needs Programme, social safety nets, and so on, albeit many of them did not aspire to universal coverage in a time-bound manner. Since 2014, the focus has been on removing the asset deficits of poor households, seen in terms of access to cooking gas, electricity, safe housing, individual household latrines, availability of electricity, bank accounts for women, accident and life insurance, access to credit, women’s collective and diversification of livelihoods, etc. Many of the initiatives launched since 2014, like Ujjwala, Ujala, Pradhan Mantri Awaas Yojana, Saubhagya, Swachh Bharat Mission, Mudra loans, and the renamed Deen Dayal Antyodaya Yojana–National Rural Livelihood Mission, were all meant to establish the dignity of a deprived household by improving the asset base of such households. It was argued that this would automatically lead to better access to public services, education, and health, and ultimately to higher-order employment and incomes.

The 2022 Multidimensional Poverty Index of the United Nations Development Programme (UNDP) brings the good news of about 415 million persons in India coming out of multidimensional poverty between 2005–2006 and 2019–21. It also shares the concern of the largest number of poor persons living in India. While the World Bank studies also recognised the reduction in poverty in India at a faster pace until 2019, the impact of COVID on incomes and employment seems to have dented some of the gains, considering the sharp contraction of the Indian economy in the first COVID year. While there has

been a restoration of the lost growth phase and early signs of recovery are very discernible, a world on the verge of recession is throwing up fresh challenges.

The Fifth National Family Health Survey (NFHS-5, 2019–2021), when compared with NFHS-4 (2015–2016), clearly highlights the progress of asset-based focus in the pro-poor public welfare thrust of the Government. A series of well-researched articles have been published, bringing out the success of the “new pro-poor public welfare” seen in terms of improved access to sanitation, electricity, safe cooking gas, bank accounts, improvement in immunisation, and so on. The basic data and its analysis are already in the public domain; therefore this chapter will only examine how the new pro-poor public welfare has been crafted to deliver results and what the approach of the government has been. By doing so, it hopes to answer some questions regarding the critical necessity of identifying the deprived households in a transparent manner. This is a major public policy challenge as we move towards universal access to a basic quality of life, leaving no one behind.

A replacement level fertility of 2.1, 96.8% population living in households with electricity, 70.2% with improved sanitation facilities, 58.6% households using clean fuel for cooking, 88.6% institutional births, 76.4% children fully vaccinated, and 78.6% women with bank accounts all highlight the rapid progress made since 2015–2016. It clearly brings out the meticulous last-mile planning to address all the implementation challenges. NSS data 69th round (2011–2012) and 76th round (2018) have shown significant improvement in safe and pucca housing. Similarly, access to health and family welfare services, age at marriage, and health indicators are all registering significant progress.

Unsatisfactory Progress on Under Nutrition

The pace of achievement in under nutrition and anaemia needs to substantially improve in the years to come. Many more elements of community connect, decentralisation, and holistic and convergent care need to be fully operationalised in these sectors. India has been embarrassed by high levels of stunting, wasting, and underweight children. While successive governments have emphasised a need for a breakthrough, substantive success still eludes us. Science is certain that the persistence of under-nutrition creates irreversible changes in the learning abilities of many infants, besides susceptibility to disease as they grow. The first thousand days are the key to reversing changes and ensuring proper nutritional development of every infant and mother. The Fifth National Family Health Survey (NFHS-5, 2019–2021) reports 35.5% children under age 5 are stunted, 19.3% are wasted, and 32.1% are underweight. These are unacceptable levels for the present and for our future generations. It irreversibly compromises the learning abilities of such children and their adult health.

The challenge of under-nutrition is no rocket science. It can be tackled effectively over a short period if the thrust is correct. The recently released NFHS-5 highlights the unfinished agenda and the slow rate of decline in under-nutrition. It also shows how Sikkim, Uttar Pradesh, and Bihar did better than some other states in reducing stunting and underweight children during this period. The women's collectives have already shown their impact in the southern states. Punjab and Haryana suggest how food and prosperity alone, without gender equality, are inadequate. The role of the community in Sikkim, the Jeevika SHG women in Bihar, well-trained ASHAs and their role in Uttar Pradesh, and an improved community understanding of behaviour change do make a difference. Nutrition as a subject does not lend itself to narrow departmentalism. It actually calls for a whole-of-government and whole-of-society approach.

Technology can at best be a means, and monitoring too has to become local and community led. Panchayats and community organisations are the best way forward. The nutrition challenge is also a women's empowerment challenge. It is an important behaviour change challenge in favour of exclusive breastfeeding, natural foods instead of junk food, clean water, sanitation, and food diversity.

Gram Swaraj Abhiyan in 2018 in 63,974 villages

The government's declared policy has been on an integrated, decentralised, whole-of-government and whole-of-society approach with Janbhagidari, in consonance with the objective of "Sabka Saath, Sabka Vikas, Sabka Vishwas, and Sabka Prayas." Universal access to basic necessities and subsidised access for those who need it most but cannot afford it has been the overarching framework. The government has emphasised the whole-of-government and whole-of-society approach with primacy to community participation, use of technology, and convergence. The Gram Swaraj Abhiyan 2018, with its mandate to provide saturation of access to seven public services—electricity to households, LPG connection, LED bulb, immunisation, bank account, accident insurance, and life insurance—to 63,974 purposively selected villages with over 50% population of Scheduled Castes and Scheduled Tribes, reflects the approach. The panchayats; the livelihood women SHG members and other community organizations; the frontline workers; the line departments of local, state, and central governments dealing with the subject; the use of technology in village-specific monitoring; the deployment of central- and state-level monitors to ensure actual achievement on the ground were all part of the approach. This intensive and organised community connection with solutions to all challenges

translated into manifold improvement and increase in the seven services in the most deprived villages.

Socio Economic and Caste Census 2011 for Deprivation-Based Beneficiary Selection

The Department of Rural Development has focused on the development and diversification of livelihoods of poor households during this period. The Socio Economic and Caste Census (SECC) 2011, released in July 2015, provided evidence-based criteria for the selection of beneficiaries under various government programmes. The application of deprivation criteria of SECC to the provision for LPG gas connection under Ujjwala, free household electricity connection under Saubhagya, selection of beneficiaries under Pradhan Mantri Awaas Yojana–Gramin, and now selection under Ayushman Bharat for National Health Protection have ensured that the benefits of development reach the most deprived on a priority basis. The use of SECC in the finalisation of labour budgets to states under the Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS) and insistence on enrolment of all women from households with deprivation under SHGs of Deen Dayal Antyodaya Yojana–National Rural Livelihood Mission (DAY-NRLM) have also ensured that poor regions with a larger number of poor households receive priority in programmes of rural poverty. The Sumit Bose Committee, set up to suggest ways of using the SECC 2011 data in rural development programmes, paved the way for its extensive use across programmes, ministries and sectors. Table 2 highlights the kinds of deprivation.

The numbers indicate some of the challenges in rural India. They also provide household data for interventions. For example, 7.16 lakh Divyang with no able-bodied adult member could be taken up immediately for need-based interventions,

and 68.98 lakh female-headed households with no adult male member between age 16 and 59 could be taken up for livelihood diversification on a priority basis. Over 4.21 crore households with no literate person above age 25 raise the issue of many older persons without skills, who are non-literate as well. It makes a strong case for interventions for market-linked assured old-age pension to the eligible. A very large number of households of Scheduled Castes and Scheduled Tribes are present. The women's collectives made special efforts not to leave a single household with deprivation out of the livelihood mission. This was a Cabinet decision regarding saturation to be accepted only when no deprived household was left out. The data on landless labourers could be used for the finalisation of labour budgets of states. The Sumit Bose Committee provided a variety of points for action.

Table 2: Deprivation Under SECC 2011

<i>Particular</i>	<i>Deprived households</i>
Only 0 room or 1 room with kutcha walls and kutcha roof (D1)	23,731,674
No adult member between 16 to 59 (D2)	6,515,205
Female-headed households with no adult male member between age 16 to 59 (D3)	6,896,014
Disabled member and no able-bodied adult member (D4)	716,045
SC/ST households (D5)	38,582,225
No literate adult above 25 years (D6)	42,147,568
Landless households as manual casual labour (D7)	53,701,383
Another 16 lakh households have been automatically included as the poorest of the poor households.	

Some critics point out that deprivation data and poverty data are not identical and that some households were left out. As mentioned earlier, there are ways of inclusion. The rural SECC data quality was far better than the urban one, and when we

limit ourselves only to rural poverty, there is a relationship between poverty and deprivation.

Evidence-Based Identification of the Poor

The use of the Socio Economic and Caste Census 2011 (SECC 2011) provided a unique opportunity for evidence-based identification of deprivation, free from the manipulation of locally prepared BPL (below poverty line) lists. Being a census outside the Census Act using the same listing of households as the National Population Register and the Census 2011, SECC, for the first time, provided household deprivation data that was caste, creed, and religion neutral. Deprivation was to be ascertained on the basis of easily verifiable indicators after automatically excluding those who had government jobs, three pucca rooms, a motorised vehicle, irrigated land, and so on. The application of SECC to development initiatives for housing, LPG gas connection, electricity connection, and Ayushman Bharat listing provided an opportunity to attend to the multidimensionality of poverty through a range of pro-poor public welfare programmes. Identification of the poor has been one of the greatest development challenges, and the use of SECC opened a new paradigm of beneficiary selection. This also ensured that hitherto uncovered regions with very high deprivation got many more beneficiaries to be supported. It was the less developed states that got the maximum support. Pursuit of a universal thrust based on a survey, as in the case of the Swachh Bharat Mission, also had the same impact, with hitherto backward regions getting the maximum support. The bridging of the inter-state disparity that Surjit Bhalla talks about is the result of a design rather than by accident (Bhalla, 2022, November 29). The government's thrust has been to ensure that not a single poor person should get left behind. It is for this reason that additions were permitted in programmes like

Ujjwala, and surveys were carried out to identify kutchha homes over and above those listed in the SECC.

Decline in Multidimensional Poverty in Poorer Regions and States

The figure and the table below on poverty reduction, as presented in the 2022 UNDP Multidimensional Poverty Index, also confirm the improvement on account of the adoption of the SECC. The reduction in absolute numbers is larger in states with a higher incidence of poverty. Deprivation-specific indicators have shown improvement in the 2005–2019 period.

Figure 2: Multidimensional Poverty Index in Various States

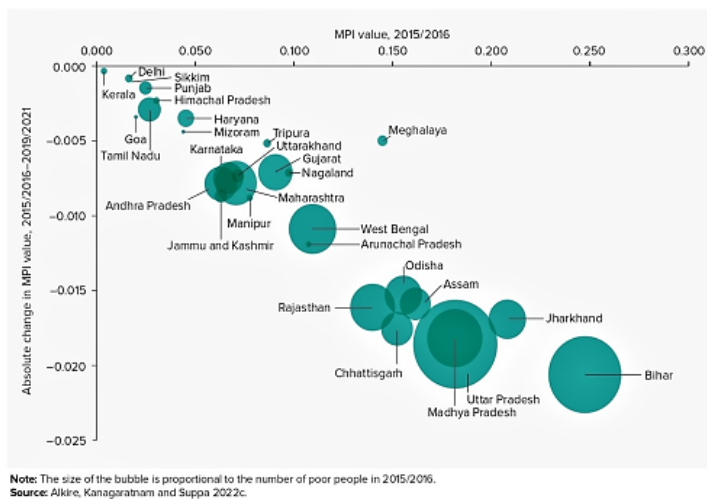


Table 3: Deprivation-Specific Headcount Ratios

	HEADCOUNT RATIOS			ANNUAL RATE OF DECLINE	
	2005-6 (NFHS-3)	2015-16 (NFHS-4)	2019-21 (NFHS-5)	2005-6 to 2015-16	2015-16 to 2019-21
HEALTH					
Nutrition	57.3%	37.6%	31.6%	4.1%	3.8%
Child mortality	4.8%	2.7%	2.1%	5.6%	5.7%
EDUCATION					
Years of schooling	25%	13.9%	11.4%	5.7%	4.2%
School attendance	21.3%	6.4%	5.3%	11.3%	4.2%
AMENITIES					
Cooking fuel	74.3%	58.5%	43.9%	2.4%	6.2%
Sanitation	70.9%	51.9%	30.1%	3.1%	11.4%
Drinking water	21.3%	10.9%	7.3%	6.5%	8.5%
Electricity	32.9%	12.2%	3.3%	9.5%	25.3%
Housing	55.9%	45.6%	41.2%	2%	2.2%
Assets	46.8%	14%	10.2%	11.4%	6.8%
Weighted average of 10 with "MP weights"	-	-	-	6.4%	6.4%
Multidimensional poverty	55.1%	27.7%	16.4%	6.7%	11%

*Weights: 1/6 each for health and education indicators, 1/18 each for amenities.

Source: global MPI Data Tables.

Women's Collectives for Development

The expansion of the National Rural Livelihood Mission from 2.5 crore women in 2014 to nearly 10 crore rural women in its fold has strengthened the community connect, in partnership with the 31 lakh panchayat-elected leaders, 42% of whom are women. It is these women; their participation in high school and higher education; and access to credit, skills, and diversified livelihoods that make them key change agents. The 3-lakh-plus Community Resource Persons of the Livelihood Mission, who are women and who have come out of poverty, add weight to the social development agenda of age at marriage, access to services, etc. Improvement in family welfare, health, and nutrition indicators is also a function of the social capital of

the village. The power of the collectives and its role in transforming lives and livelihoods has been reported from different parts of the country in recent times. Women's collectives under the Livelihood Mission have brought about transformational changes in the lives of the poor. This has been possible due to the community connect, the access to credit, and handholding by the Community Resource Persons. These Community Resource Persons are women who have successfully won the war against poverty and are today transforming the lives of other poor women. From rejuvenating rivers to diversified livelihoods, from solid and liquid resource management to sustainable agriculture, these women have demonstrated their ability to come out of poverty. What started in the southern Indian states of Kerala and Tamil Nadu has now expanded to most parts of the country, with nearly 100 million women in SHGs of the Deen Dayal Antyodaya Yojana (DAY-NRLM). The improvement in indicators of women's empowerment, brought out by Meeta Rajivlochan, is on account of this mobilisation for pro-poor public welfare.

Concluding Remarks

The journey of **India for all** needs to learn from the lives of these women who have overcome deprivation and poverty. They have presented India with a model of shared growth, a model of community collectives that have access to credit, but are equally conscious of the need to use it effectively with negligible non-performing assets. They have offered the nation a model of enterprise among the poor, an enterprise nurtured by skill development, social capital, handholding, and, most of all, a confidence to interface with institutions of public services, banks, panchayats, and markets. Social and economic development is about opportunities for equitable development and opportunities for growth and well-being. With over 40% of elected representatives in panchayats being women, the

partnership of SHGs and Panchayats is also opening new frontiers of shared growth and well-being.

The explanation for population stabilisation and replacement level fertility rate will have to be seen not merely in the provision of family planning services. The increased participation of adolescent girls in higher secondary and higher education has a very strong correlation with the decline in fertility. The schooling revolution for girls, thanks to Sarva Shiksha Abhiyan and Samagra Shiksha, is making a difference as much as the improvement in family welfare services, courtesy of the interventions under the National Health Mission and Ayushman Bharat.

The gains are major and significant and are a tribute to the approach of new welfarism. The last mile challenges have been the basis for meticulous planning that has created a functional machinery for pro-poor public welfare across states. These are major steps forward in improving the asset base of poor households. This will, over time, improve the participation of these households in higher forms of economic activity, human development, skills, and livelihoods for even higher-order employment and incomes. The findings of the NFHS-5 (2019–2021) and the 78th round of NSS 2021 (see Tables 4 and 5) bear out the gains in an independent evaluation.

Table 4: National Family Health Survey Findings

	2015–16	2019–21
<i>Population living in households with electricity</i>	88.0	96.8
<i>Children 12–23 months fully immunised</i>	62.0	76.4
<i>Clean fuel for cooking</i>	43.8	58.6
<i>Women with bank accounts</i>	53.0	78.6

Table 5: 78th Round NSS Findings (2020–2021)

	<i>76th Round (2018)</i>	<i>78th Round (2021)</i>
<i>Households with access to latrines</i>	71.3%	78.7%
<i>Clean fuel for cooking (rural)</i>		49.8%
<i>18 years and above with bank account (rural)</i>		89.3%
<i>All weather road withing 2.5 km</i>		92.5%

In conclusion, it can be said that the use of the SECC 2011 played a critical role in the identification of the deprived. Its adoption across programmes created the constituency of the deprived. The success of the pro-poor public welfare owes its success, among other factors, to the evidence-based, easily verifiable indicators of the Socio-Economic Census as well. The mobilisation of women in collectives of the Livelihood Mission has also been a defining moment in the creation of a constituency of women that all political parties have associated with. The larger participation of women in elections and in the percentage of votes cast is also a reflection of the newfound role of women in India's democratic space. Universal adult suffrage is leading to higher women's participation and emergence as a key constituency for political parties at the local level. The pursuit of policies of social justice and affirmative action has made a difference to the lives and livelihoods of the deprived. The glass is still half full, and we have to improve performance on many parameters, especially on quality learning outcomes in schools, skills, nutrition, health care, and livelihoods, to enable households to be more productive and earn wages of dignity. The participation of women from vulnerable social groups needs to improve further in order to catch up to the overall average.

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