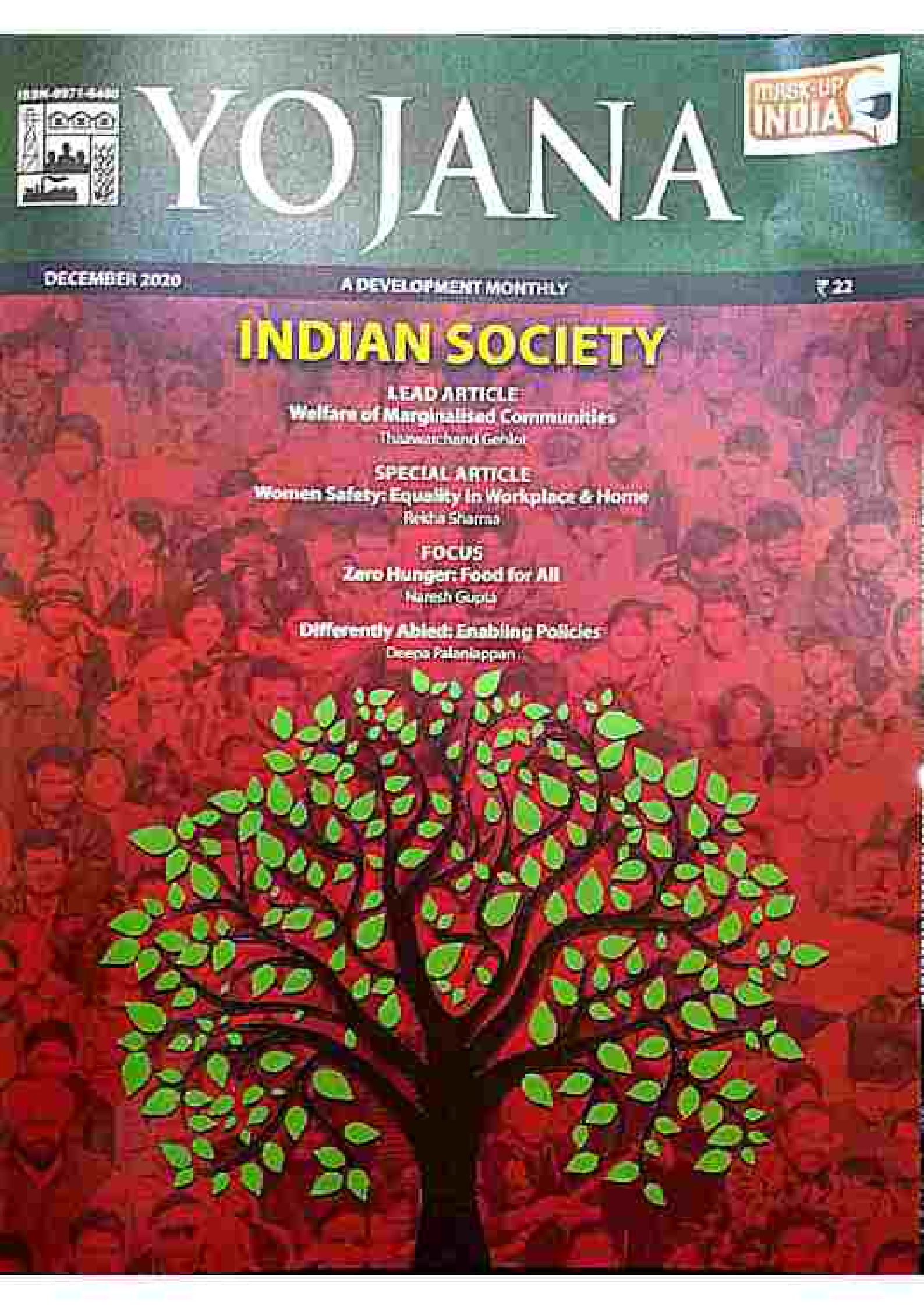
ISSN-0971-8400

YOJANA

MASK UP INDIA

DECEMBER 2020 | A DEVELOPMENT MONTHLY | ₹ 22

INDIAN SOCIETY



Tele-Law: Mainstreaming Legal Aid

Tele-Law primarily aims to address issues at the pre-litigative stage. It digitally connects marginalised and poor people with a Panel Lawyer, a practising advocate selected by Department of Justice and CSC-e Governance Services or registered on the Panel of State/District Legal Services Authority, to seek legal advice and consultation through the use of video conferencing and telephone service available at the Common Services Centers situated at the Gram Panchayat level.

Under this programme, smart technology of video conferencing, telephone/instant calling facilities available at the vast network of Common Service Centers at the Panchayat level are used to connect the indigent, down-trodden, vulnerable, unreached groups and communities with the Panel Lawyers for seeking timely and valuable legal advice.

Especially designed to facilitate early detection, intervention and prevention of the legal problems, the Tele-Law service is proactively outreached to groups and communities through a cadre of frontline volunteers provided by NALSA and CSC-eGov. These grassroot soldiers have been additionally equipped with a mobile application to pre-register and schedule appointment of the applicants during their field activity. Dedicated pool of lawyers has been empanelled to provide continued legal advice and consultation to the beneficiaries.

Tele-Law: Key Features

1. The programme benefits people entitled to free legal aid under Section 12 of Legal Services Authorities, Act, 1987 that include women, children, members of Scheduled Caste, Scheduled Tribes etc. to seek legal advice free of cost. Others can avail services at Rs. 30/- per consultation.
2. To ensure its seamless penetration in far-flung and remote areas, a Tele-Law mobile application has been developed to enable pre-registration of cases by PLVs.
3. Tele-Law web portal (http://www.tele-law.in/) providing key information about the programme is available in 22 languages. Tele-Law Dashboard has been developed to capture real time data on cases registered and advice enabled.
4. E-Tutorial on use of Tele-Law mobile application has been uploaded on Tele-Law portal.

Registered Cases	Advice Enabled	Unattended Cases	CSC Centres
423405	409432	13973	29660

As on November 06, 2020

New Milestone

Tele-Law has touched a new milestone on October 30, 2020 with 4 lakh beneficiaries having received legal advice. As against total 1.95 lakh advices given till April 2020 since the launch of the programme, 2.05 lakh advices have been enabled during the first seven months of this financial year.

Embarking on the "Digital India Vision" of the Government of India, Department of Justice has been harnessing "emerging" and "indigenous" digital platforms to accelerate and make access to justice a reality for all. In meeting this objective, Tele-Law programme was launched in 2017 to address cases at pre-litigation stage.

Visit https://tele-law.in/ to avail the services free of cost/at nominal charges.

ISSN-0971-8400

DECEMBER 2020

Volume-64
No. 12

Website: www.yojana.gov.in

YOJANA

Since 1956 A DEVELOPMENT MONTHLY

Let noble thoughts come to us from all sides.
Rig Veda

Chief Editor's Office:
Room No. 660, Soochna Bhawan, CGO Complex, Lodhi Road, New Delhi 110 003

Yojana (English): Room No. 647, Soochna Bhawan, CGO Complex, Lodhi Road, New Delhi-110 003
E-mail (Editorial): yojanace@gmail.com

YOJANA seeks to provide a vibrant platform for discussion on matters of social and economic development of the country through in-depth analysis of these issues in the wider context of government policies. Although published by the Ministry of Information and Broadcasting, YOJANA is not restricted to expressing the official point of view.

SUBSCRIPTION
1 year ₹ 230, 2 years ₹ 430, 3 years ₹ 610.

For grievances/complaints regarding non-receipt of Yojana, new subscription, renewal and old issues

Email: pdjucir@gmail.com
Phone: 011-24367453
(Monday-Friday, 9:30 am- 6:00 pm)

Postal Address: Gaurav Sharma, Editor, Journals Unit, Publications Division, Room No. 779, Soochna Bhawan, CGO Complex, Lodhi Road, New Delhi-110 003.

SUBSCRIPTION-RELATED DETAILS : Page 57

IN THIS ISSUE

REGULARS

NEXT ISSUE: INDIA@75

Number of pages: 60
Details of the Sales Outlets of the Publications Division on Page 23

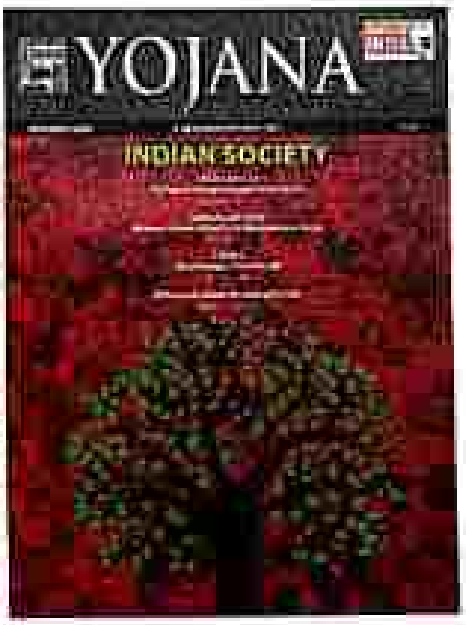
Website: www.publicationsdivision.nic.in
@DPD_India
@publicationsdivision

YOJANA is published in Assamese, Bengali, English, Gujarati, Hindi, Kannada, Malayalam, Marathi, Odia, Punjabi, Tamil, Telugu and Urdu.

YOJANA

Welfare State

"If you ask me, my ideal would be a society based on Liberty, Equality and Fraternity."
–Dr B R Ambedkar



Through the Directive Principles of State Policy, the Constitution of India laid out the social and economic conditions under which the citizens can lead a good life. These Principles also establish social and economic democracy through a welfare state. Articles 38, 41, 46 and 47 in Part IV of the Constitution are especially relevant in this regard. Article 38 directs the State to secure a social order for the promotion of welfare of the people, Article 41 deals with Right to work, to education and to public assistance in certain cases. Article 46 aims for promotion of educational and economic interests of Scheduled Castes and other weaker sections, and Article 47 lays down it as a duty of the State to raise the level of nutrition and the standard of living and to improve public health.

Equity and equality, both the concepts have fairness as a basis, but through different means. If a full-grown adult and a child are trying to reach out to something kept at a certain height. While the adult can simply lift the hand to touch it, the child would need the assistance of a pedestal to reach that level. Treating them both equal by not providing the pedestal to the child is what equality emphasises upon. Equity is giving equal opportunity to the child as well through an aid which will help attain the desired height. This equitable society is something which the vision of Sarvodaya—Welfare of All, Antyodaya—Reaching the last mile, and Sabka Vikas call for.

There is a large section of marginalised communities, which mainly include scheduled castes, scheduled tribes, other backward classes, senior citizens, differently-abled, nomadic- semi-nomadic, transgender persons and beggars. Since independence, society and governments have been making sustained efforts at every level to mainstream them. The Union Ministry of Social Justice and Empowerment was constituted to enable the same.

Lack of facilities and opportunities for individuals prevents them from developing their full potential and capabilities. India still faces a long road ahead in its quest to achieve Zero Hunger. Over 25 years since India ushered in its economic reforms, the country's economy has undergone significant structural transformations, encouraging planners to turn their focus away from agriculture and instead towards the service and manufacturing sectors. The priority now is to return attention to agriculture and its central role of providing food security, reducing poverty and generating employment.

Various interventions are in practice including the legislative measure to promote—with special care—the educational and economic interests of the weaker sections of the people, and, in particular, of the Scheduled Castes and the Scheduled Tribes, and protecting them from social injustice and all forms of exploitation. Endeavours have been taken to bring about prohibition of the consumption except for medicinal purposes of intoxicating drinks and of drugs which are injurious to health. New and more intervention strategies are needed in this regard. The system needs an approach that brings together the community and strengthens its collective response towards drug use.

Public policy shifting towards social model of disability is the new way forward for building disability-inclusive societies. A disability-inclusive society will have public policies that are not merely accommodative of persons with disabilities but rather, they celebrate and welcome all individual differences, while being always sensitive towards the entire spectrum of human differences.

The world is going through an unprecedented crisis owing to Covid-19. It becomes even more imperative to build an inclusive society through educational, economic and social development, and rehabilitation wherever necessary. ❑

Welfare of Marginalised Communities

Thawarchand Gehlot

Today, the whole world is going through a crisis due to the Covid-19 pandemic, which has had a severe impact on India as well, and it has affected the marginal communities the most. But even in this difficult time, every possible effort is being made to ensure that the Ministry works diligently to provide the benefits of all its schemes to the marginalised population.

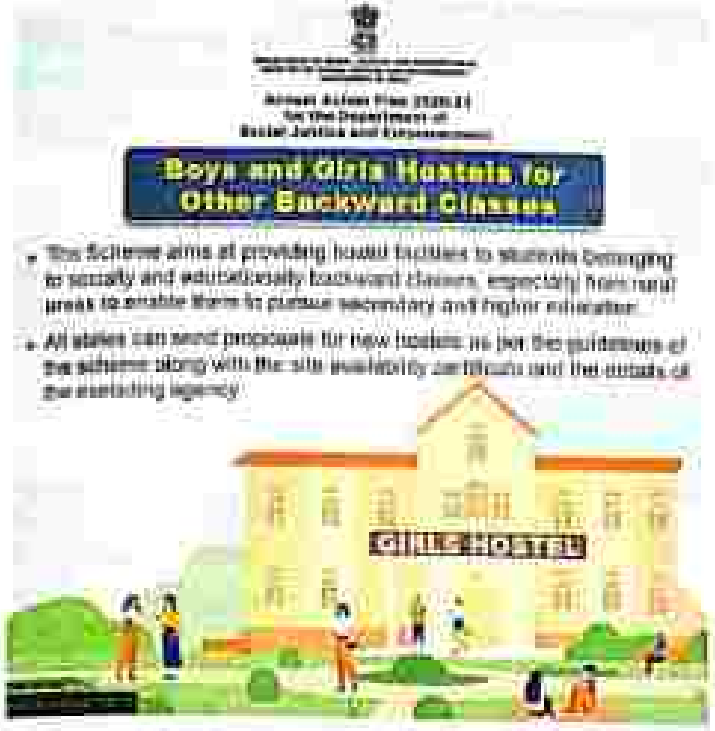
A marginalised population is a group of individuals or a particular cluster, who, due to various reasons, is socially, economically and educationally marginalised and thus deprived of joining the mainstream of society. There is a large section of such people, which mainly include scheduled castes, scheduled tribes, other backward classes, senior citizens, differently-abled, nomadic-semi-nomadic, transgender persons and beggars. Since independence, society and governments have been making efforts at every level to mainstream them. The Union Ministry of Social Justice and Empowerment was constituted to enable the same. The Ministry is mainly divided into two departments: 1) Department of Social Justice and Empowerment, and 2) Department of Empowerment of Persons with Disabilities.

Department of Social Justice and Empowerment

The Department of Social Justice and Empowerment is entrusted with the task of empowering the socially and economically backward target groups. It aims to create an inclusive society in which members of the target groups can lead an active, secure and dignified life through policy support for their development. In this endeavour, the Department is mandated to support and empower its target group, wherever necessary, through programmes for educational, economic and social development and rehabilitation. The target groups of this Department are:

1. Scheduled Castes,
2. Other Backward Classes.

The author is the Union Minister for Social Justice & Empowerment, Government of India. Email: officesjeworg@gmail.com



3. Senior Citizens,
4. Victims of Alcoholism and Substance Abuse,
5. Transgender Persons,
6. Beggars,
7. Denotified and Nomadic Tribes (DNTs) and,
8. Economically Backward Classes (EBCs).

The main objective of the Department of Social Justice and Empowerment is the educational, economic and social empowerment of Scheduled Castes (SCs), Other Backward Classes (OBCs), Economically Backward classes (EBCs) and Denotified and Nomadic Tribes (DNTs); supporting Senior Citizens by way of their maintenance; welfare, security, health care, productive and independent living; Prevention & Treatment of Alcoholism and Substance Abuse (Drugs); educational, economic and social empowerment of transgender persons as well as educational and economic development, educational and economic empowerment of economically backward classes, and rehabilitation of beggars.

Department of Empowerment of Persons with Disabilities

The Department of Empowerment of Persons with Disabilities was carved out of the Ministry of Social Justice and Empowerment on May 12, 2012 as Department of Disability Affairs to ensure greater focus on policy matters to address disability issues effectively and to act as the nodal department for greater coordination among stakeholders, organisations, state governments and related Central Ministries. According to the Notification dated May 14, 2016, the Department has been renamed as Department for the Empowerment of Persons with Disabilities. The main objective of the Department is to build an inclusive society with equal opportunities and empowering through related legislation/ policies/programmes/schemes. Both the departments aim to empower the underprivileged and economically-disadvantaged sections of the society.

> For educational, economic and social empowerment of Scheduled Castes and Other Backward Classes, maintenance, welfare, security, health care, productive and independent living of senior citizens as well as for other disadvantaged and marginalised sections, various ongoing schemes have been strengthened, and many new schemes have been launched. A robust methodology has been adopted to ensure that more and more people get the benefit of the schemes. The Ministry offers various types of scholarship schemes for the educational empowerment of Scheduled Castes and Other Backward Classes.

For educational, economic and social empowerment of Scheduled Castes and Other Backward Classes, maintenance, welfare, security, health care, productive and independent living of senior citizens as well as for other disadvantaged and marginalised sections, various ongoing schemes have been strengthened, and many new schemes have been launched. A robust methodology has been adopted to ensure that more and more people get the benefit of the schemes. The Ministry offers various types of scholarship schemes for the educational empowerment of Scheduled Castes and Other Backward Classes. In the

allocation of funds for post-matric scholarship, there has been an increase of about Rs. 3250 crore during the period 2018-19 from Rs. 1800 crore in 2014-15 for SC students which benefitted a total of 60 lakh children. Similarly, an amount of Rs. 2711 crore was given in 2019-20 so far to the states. Also, to ensure better transparency and timely release of funds, the scheme is being implemented online in DBT mode.

The eligibility for the pre-matric scholarship for SC students studying in class 9 and 10 in respect of parents' guardian's income was revised from Rs. 2 lakh per year to Rs. 2.5 lakh per year in 2017, along with a 50% increase in scholarship amount. In the year 2019-20, the committed liability of the state was done away with, and the sharing ratio of 60:40 was adopted between the centre and the states. In cases of North Eastern states, this sharing ratio is 90:10. Accordingly, the budget estimate for 2020-21 has been kept at Rs. 700 crore as against the average of Rs. 300 crore spent annually on the scheme between the years 2015-16 to 2019-20.

Scholarship is provided to the talented SC students of 220 institutions to meet the requirements for tuition fee, living expenses, computer/laptop and other accessories. Expenditure and the number of beneficiaries, which were Rs. 78.11 crore and 1716 respectively in 2009-14, doubled in 2014-19 to Rs. 164.39 crore and 9544 respectively. The annual family income ceiling for eligibility has been increased from Rs. 4.5 lakh to Rs. 6 lakh since the year 2018-19.

For free coaching of SC and OBC students for employment and higher education, a total of Rs. 13.10 crore was released during 2009-14 which was increased to 48.33 crores during the period 2014-19. During the same period, the number of beneficiaries doubled from 6126 to 13473.

The main objective of the Central Scheme on grant-in-aid to Voluntary Organisations working for Scheduled Castes in the education sector is to increase access to developmental interventions of the government and overcome the deficiencies in the education sector in Scheduled Caste dominated areas through the efforts of voluntary organisations and other such organisations. Significant amendments to the schemes were made in 2014 and 2018 through dedicated web portals (e-grants) and electronic transfer of grants. The quantum of assistance was increased by 100%, with focus on education sector, namely residential schools/non-residential schools and hostels for both primary and secondary level students, educationally backward blocks or service-less blocks with 40% SC population or new school projects in backward districts identified by NITI Aayog. The financial allocation during the period 2009-10 to 2013-14 was Rs. 148 crore and the number of beneficiaries was 134425. The financial allocation during the period 2014-15 to 2018-19 was Rs 244.72 crore, and the number of beneficiaries was 217487.

Under Pre-matric and Post-matric Scholarship Scheme for OBC/EBC and DNT, six crore (approx) beneficiaries have been covered in respect of educational places during the year 2014-19. The budget estimate for the year 2020-21 is Rs. 1700 crore. National Fellowship Scheme for OBC students has provided scholarships to 5200 students for during the year 2014-19. For social empowerment of scheduled caste communities, the Pradhan Mantri Adarsh Gram Yojana was launched during 2009-10 in 1000 scheduled caste majority villages. In March 2015, it was extended to 1500 more villages. It has now been decided to implement the scheme in a pan-India basis covering almost all the 27,000 SC-dominated villages with a certain population by the year 2024-25. The scheme is being implemented in 8296 villages since October 2018. An online system has been put in place for effective planning, monitoring and implementation to identify gaps in the identified indicators from which the Village Development Plan (VDP) can be created through convergence of other schemes and progress can be monitored in this respect. Till February 2020, about 9.5 lakh families have been surveyed, and more than 36 lakh beneficiaries have been identified.

The main objective of the Central Scheme on grant-in-aid to Voluntary Organisations working for Scheduled Castes in the education sector is to increase access to developmental interventions of the government and overcome the deficiencies in the education sector in Scheduled Caste dominated areas through the efforts of voluntary organisations and other such organisations.

Dr. Ambedkar Medical Aid Scheme was launched in 2009 to provide medical treatment facility to the patients of the economically weaker sections of the scheduled castes and tribes suffering from serious ailments. It has benefited 222 people till 2014, while 1029 people have benefited from 2014 to 2020.

The main objective of Special Central Assistance (SCA) to Scheduled Caste Sub Plan (SCSP) is to give a thrust to the development programmes for Scheduled Castes through Income Generation Scheme, Skill Development Programmes and infrastructure development. During the period from 2014-2020, an average of Rs. 827.5 crore has been spent annually as compared to Rs. 701 crore spent annually from 2009 to 2014. Accordingly, the budget estimate for 2020-21 has also been increased up to Rs. 1200 crore.

The Venture Capital Funds Scheme was launched in December 2015 with an initial capital of Rs. 200 crore to promote and provide concessional finance to Scheduled Castes entrepreneurs. Under this scheme, a fund of about 400 crore has been allocated to 107 Scheduled Castes entrepreneurs till February 2020. The objective of a similar scheme for the economic development of OBCs, launched in 2017-18, is to promote entrepreneurs of the targeted beneficiaries through concessional finance for employment generation. Recently, two new schemes VISVAS and ASIIM have been launched to promote entrepreneurship among these sections. Apart from these special schemes, several skill development programmes are being conducted by the Ministry through various Finance Development Corporations besides providing financial support at concessional rates for multiple jobs. From 2014 to May 2020, a total of 15,17,754 SC/OBC/Safaikarmis have been sanctioned self-employment loans to the tune of Rs. 5778.79 crore through Finance Development Corporations under the Ministry. Similarly, from 2014 to May 2020, various types of vocational training have also been imparted to about 17,67,106 persons at the cost of Rs. 243 crore through these development corporations.

Senior Citizens

The Department of Social Justice and Empowerment is committed to the security, maintenance, welfare and health care of senior citizens. We aim to create an ecosystem where all residing in India lead a happy and dignified life with concrete and synergistic actions to meet the current and emerging needs of senior citizens. According to the 2011 census, the number of senior citizens in India is around 10.46 crore. Research shows that by 2030, 12 per cent of India's population will be over 60 years of age.

While only one scheme namely Integrated Programme for Senior Citizens was being implemented during the period 2009-14, the following significant reforms have been introduced in the year 2014-15 by preparing a strategy for the welfare of senior citizens:

a. Implementation of old age homes and electronic transfer of grant money through a web-supported portal (e-grant)

b. Greater increase in quantum of the grant amount

c. Constitution of Senior Citizen Welfare Fund for new and innovative welfare schemes for senior citizens

d. Launch of Rashtriya Vayoshri Yojana (RVY), which aims at providing free of cost physical aids and assisted-living devices for senior citizens belonging to BPL category who are suffering from an age-related disability. Lakhs of senior people have been given various types of assisted-living devices under this scheme. At a mega camp organised in Prayag Raj in February 2020, assisted living aids and physical devices were distributed to thousands of senior citizens in the presence of the Prime Minister. The National Action Plan for Senior Citizens has been introduced which would operate as an umbrella scheme for senior citizens under which all possible positive actions for senior citizens can be undertaken. The main amendments made to the Maintenance and Welfare of Parents and Senior Citizens (Amendment) Bill, 2019 are under consideration of the Lok Sabha.

Substance Abuse

The Ministry has conducted the first National Survey on Drug Use in India during the year 2018, as part of the National Action Plan to curb the demand of drugs. The Government now has state-wise data available on individuals using narcotics that will be used to conduct intervention programmes. A national action scheme formulated to cut down on drug demand for the period

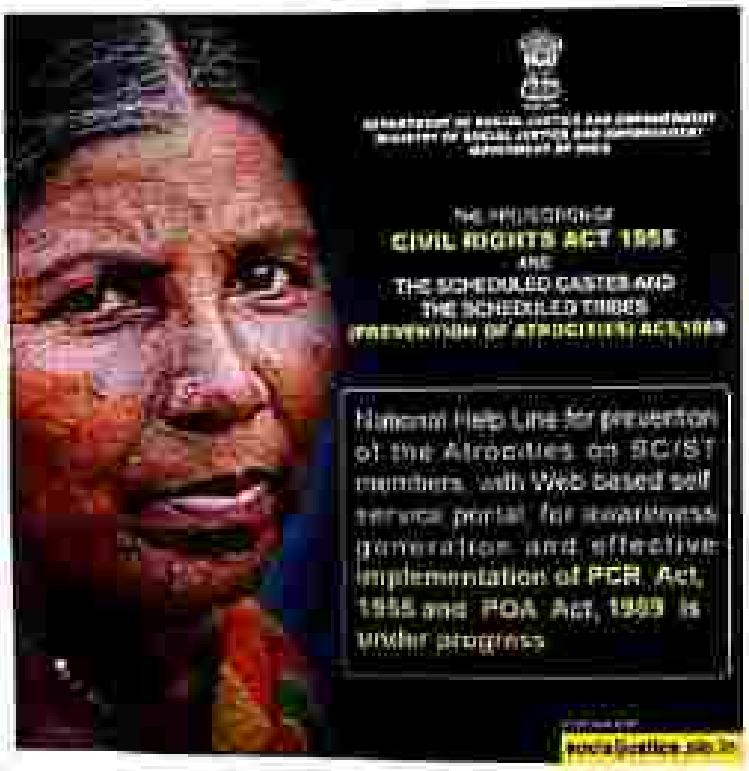
2018-2025 aims at prevention, treatment and rehabilitation of affected individuals and their families through a multi-pronged strategy to curtail adverse results of drug abuse. An amount of Rs. 219.12 crore has been released under this program from the year 2018-19 to till date. Under NAPDDR, an amount of Rs. 260 crore has been allocated for the year 2020-21. Due to the spread of the Covid-19 pandemic, the country was under complete lockdown for almost three months. It has resulted in cropping up of a variety of problems among the drug users, due to which Ministry's de-addiction helpline received much more calls than before. For its alleviation, the experts at drug addiction centres spread across the country have been counselling the affected persons.

Rehabilitation of Beggars

The Ministry has released an amount of Rs. 3.2 crore to National Backward Classes Finance and Development Corporation (NBCFDC) and National Institute of Social Defence (NISD) to conduct skill development programmes for persons engaged in begging. An amount of Rs. 100 crore has been allocated under the new scheme for comprehensive rehabilitation of beggars for the year 2020-21. To prevent the beggars from the effects of the current Covid-19 pandemic, the Ministry has specially allocated an amount of Rs. 100 crore to various district to provide food or other necessary items.

Welfare & Empowerment of Transgender

For the welfare and empowerment of transgender persons, the Transgender Persons (Protection of Rights) Act, 2019, has been enacted. The Ministry has almost finished the work of framing rules under this Act and organising housing, health camps and welfare schemes like skill development for transgender persons. So far, 12 skill development training programmes have been organised benefiting about 355 transgender persons. Health camps have benefited of about 265 transgender persons. An amount of Rs. 10 crore has been allocated for the welfare of transgender persons for the year 2020-21.



The Development and Welfare Board for De-notified, Nomadic and Semi-Nomadic Communities (DNWBDNC) has been constituted for the De-notified, Nomadic and Semi-Nomadic communities. The functions of the board are:

i. to formulate and Implement Welfare and Development programme as required, for De-notified, Nomadic and Semi-Nomadic Communities.

ii. to monitor and evaluate the progress of the schemes of Government of India and the States/UTs regarding De-notified Nomadic and Semi-Nomadic Communities.

iii. To redress the grievances of DNTs communities and fulfil their expectations.

The Anthropological Survey of India is conducting an ethnographic study of 62 tribes/communities which have not been included in the Central List of Scheduled Castes/ Scheduled Tribes and Other Backward Classes.

Persons with Disabilities (PwDs)

We believe that persons with disabilities (PwDs) are an integral part of human resources. The Government is continuously making efforts for their empowerment and creating an inclusive society for them and their empowerment. The Prime Minister addressed persons with disabilities as 'Divyangjan', thus giving a new identity to them, which has become the symbol of their glorious life today. We have launched various new schemes for their empowerment. In some schemes, policy changes have also been introduced so that these schemes can be implemented appropriately according to their goals. Our Government is increasing the budget provisions for empowerment of PwDs in a sustained manner. A provision of Rs. 360.00 crore was made in 2013-14, while a provision of Rs. 1204.90 crore has been made in this financial year, which is more than double of 2013-14.

In 2020-21, a budget provision of Rs. 1225.39 crore has been made, which is 10 per cent more than the previous year. Our Government has passed the Rights of Persons with Disabilities Act, 2016, which is a crucial step in the direction of empowerment of PwDs. The old PwD Act was welfare-based, whereas the RPwD Act is a right-based Act. It prohibits any form of discrimination on the right to disability. The types of disabilities have been increased from 7 to 21. The reservation in jobs has been increased from 3 per cent to 4 per cent and reservation in higher education from 3 per cent to 5 per cent. In this Act, a provision has been made to create an accessible environment for their education, skill development, health

rehabilitation and for participation in sports.

According to List-II of the Constitution, empowerment of persons with disabilities is the subject matter of the state government. But the Government of India is supporting the efforts of the states through its schemes. All the schemes of this Department are central schemes. Therefore, the implementation of these schemes is done in collaboration with the State Governments and Union Territories and depends on the timely demand and utilisation certificates received by them.

The Government launched the Sugamya Bharat Abhiyan in 2015. An accessible environment has been created in 35 international airports and all 69 domestic airports. Facilities have been provided at railway stations towards making them accessible. 5244 buses have been made accessible.

Assistance to Disabled Persons for Purchase/Fitting of Aids and Appliances (ADIP Scheme):

a. From 2014-15 to May 2020, 9194 camps have been organised in which 16.43 lakh PwDs have been benefited and accessories and equipment worth Rs. 968.43 crore have been distributed.

b. For Cochlear Implants, 186 hospitals have been listed, and 2555 surgeries conducted.

c. 18040 motorised tricycles have been distributed.

d. 10 Guinness World Records have been made.

The Government launched the Sugamya Bharat Abhiyan in 2015. Under this, Rs. 443.63 crore has been released for 1152 state government buildings and retrofitting has been done in 998 central government buildings. An accessible environment has been created in 35 international airports and all 69 domestic airports. Facilities have been provided at railway stations towards making them accessible. 5244 buses have been made accessible. The websites of 368 state governments have also made accessible, and so are the 95 central government websites.

Scholarship Scheme for Disabled Students

This scheme has been fully implemented from 2014-15. Before this, there was only a National Fellowship Scheme which was available only for M. Phil. and PhD Divyang students. Now 6 component schemes: Pre-Matric, Post-Matric, Top Class, National Overseas, National Fellowship and Free Coaching have been implemented. In the current year, 88143 differently-abled students have been awarded scholarships worth Rs. 266.91 crore. Earlier, the skill development training of PwDs was inadequate. In 2013-14, only 570 PwDs were given skill development training whereas from 2014 to May 2020, 101206 PwDs have been trained under various skill development programmes.

Specialised Unique Disability Identity (UDID) Project

It is an initiative of our government under which we are creating a national database of PwDs. Under this, we have set the target to give a unique identity to all PwDs. This scheme has been implemented in all states and union territories, and till May 2020, 48.97 lakh UDIDs cards have been issued in 707 districts.

National Institutes and Composite Regional Centres

Before 2014, only 7 National Institutes and 8 Composite Regional Centres (CRCs) were there. At present, there are a total of nine national institutes and 20 Composite Regional Centres.

Indian Sign Language Research and Training Centre

This is a new national institute established by the government in 2015. The institute has developed a dictionary with 6000 words and expressions.

National Institute of Mental Health Rehabilitation

The Union Government has decided to set up this institute in Schore (Madhya Pradesh). Presently, work has started in the temporary building. The total cost of this project is Rs. 179 crore.

Centre for Disability Sports

Setting up of this centre is also an initiative of our government. It is proposed to start a Centre for Disability Sports in each of the five regions of the country. During the current Finance Commission tenure, consent has been obtained to set up centres in Gwalior and Shillong. Work of the centre in Gwalior costing Rs. 170.99 crore has already been started. This centre will provide training to about 300 disabled players every year. The proposal for the remaining three centres will be put up to the 15th Finance Commission.

Artificial Limbs Manufacturing Corporation of India (ALIMCO) has signed a memorandum of understanding with the Motivational Charitable Trust of England for modern wheelchairs. ALIMCO's new production unit has been set up in Ujjain. State-of-the-art Limb Fitting Centre has been established in Faridabad. Our Government is modernising the corporation at the cost of Rs. 338.04 crore so that the disabled people can get the benefit of modern equipment. Arrangements are being made for this in national institutions and seven composite regional centres.

Today, the whole world is going through a crisis due to the Covid-19 pandemic, which has had a severe impact on India as well, and it has affected the marginal communities the most. But even in this difficult time, every possible effort is being made to ensure that the Ministry works diligently under the leadership of the Prime Minister to provide the benefits of all its schemes. ☐

Equality in Workplace & Home

Rekha Sharma

We have come a long way when it comes to reaching gender equality and eliminating violence against women. Women essay numerous roles in their daily lives and they must know the rights related to all these roles. Also, to know whom to approach when their rights are violated.

Every day, women around the world face violence at multiple levels—sexual, emotional and psychological and these victims of abuse come from every strata of the society–rich or poor, and from every age group–old or young. The emergence of the Covid-19 pandemic has increased the risk of women who were already living in vulnerable situations before the emergence of the pandemic. Reports from various corners of the world have shown that violence on women has intensified during this pandemic, adding to their plight.

The past decades have shown huge changes in treatment of women inside and outside homes but the path to gender equality is still marred with patriarchal notions and regressive mindset of the society. The legendary United States Supreme Court judge Justice Ruth Bader Ginsburg, puts gender equality in the best way possible. She had said, "I ask no favor for my sex. All I ask of our brethren is that they take their feet off our necks." Women across the world have stories to share—stories of harassment, pain, suffering and most importantly, inequality.

Women have had to face inequality in homes and also in their workplaces. Women across the world have reached heights in this male-dominated world but on the other side there are also challenges that

The author is Chairperson, National Commission for Women. Email: chairperson-ncw@nic.in

they face. With more women entering the workforce, sexual harassment at workplace has assumed different forms. The pandemic has shown us that as definition of workplace changes so does the harassment of women in the professional space. Workplace sexual harassment leads not only to women suffering from mental trauma but it also sabotages their right to work and their right to a dignified life. Sexual harassment at workplace is not only a threat to women security but also to the economy as it discourages women from taking up jobs forcing them to restrict opportunities available to them. Harassment at workplace and lack of proper grievance redressal system creates an insecure and an apprehensive environment for women.

Among the many work and life-style changes during the pandemic, one of the most prominent has been 'work from home' becoming the new norm and therefore it becomes all the more important that cyber workplace harassment also be taken into account while addressing sexual harassment at workplace against women. The National Commission for Women, under its mandate, reviews the existing provisions of the Constitution and other laws affecting women and thereafter recommends amendments to suggest remedial legislative measures to meet the changes needed. Taking note of the plight of women at workplace, the Commission reviewed the Sexual Harassment of Women at Workplace (Prevention, Prohibition, Redressal) Act where the Commission observed that the direction regarding constitution of an Internal Complaints Committee is not adhered by many. The Commission also observed that the definition of sexual harassment at workplace needs to be expanded to include gender-based cybercrimes.

A family is the smallest unit of the society and a violence-free home is the key to a violence-free

society. Women safety stands to be one of the most prominent activities of the Commission and during the imposition of the nationwide lockdown over coronavirus, the Commission launched a WhatsApp emergency helpline number 7217735372 for reporting cases of domestic violence. The Commission in collaboration with Tata Institute of Social Sciences (TISS) runs a project to empower women and to help women survivors of violence. The project runs across seven States, Bihar, Assam, Meghalaya, Punjab, Madhya Pradesh, Odisha and Tamil Nadu to promote support mechanism for women victims of domestic violence and to create a systematic grievance redressal mechanism within the criminal justice system. The project entails placement of trained social workers for providing psycho-legal services for violated women at all District Headquarters.

The first step towards making women more comfortable in reporting about the violence against them is to change the mindset of police. We must always keep in mind that the police too belong to the same patriarchal society and women often lack the courage to go to a police station. Any woman who gathers enough courage to step into a police station should not have to face uncomfortable questions such that she feels violated all over again.

The biggest form of women empowerment is to make them aware of their legal rights so that they can be their own torchbearers and the best way to do it is to educate women about the legal provisions available for their protection. Legal awareness gives women a chance to live a dignified way of life.

Our police system is a reflection of our society.

To address the objective of making police more sensitive towards grievances of women, the Commission has been conducting One day Gender Sensitisation Workshops across the country for police personnel. The programme aims at bringing behavioural change in police personnel to enable them to act without prejudice and with compassion while dealing with victims of gender-based crimes and women in general.

Women essay numerous roles in their daily lives and they must know the rights related to all these roles in that they know where to approach when their rights are violated. The biggest form of women empowerment is to make them aware of their legal rights so that they can be their own torchbearers and the best way to do it is to educate women about the legal provisions available for their protection. Legal awareness gives women a chance to live a dignified way of life. The present women population is marred with poverty, illiteracy and ignorance of law due to which a large section of women suffer injustice and violation of their rights. The Commission through its programme aims to

make justice accessible for the poorest of the poor. Under the joint collaborative programme of National Legal Services Authority and NCW, women especially belonging to the lower strata of the society are given practical knowledge about the basic legal rights and remedies provided under various women related laws, thereby making them fit to face the challenges in real life situations. The programme makes women aware of the various machineries of the justice delivery system available for grievance redressal. The programme explains women the procedure of approaching and utilising various channels available for the redressal of grievances, the Police, the Executive and the Judiciary. It sensitises women and girls about their Rights as provided under the various laws including the Indian Penal Code, 1860; the Dowry Prohibition Act, 1961; the Prevention of Domestic Violence to Women Act, 2005 etc.

The younger generation has a huge role to play when it comes to ensuring gender equality and to influence young minds towards a violence-free society, NCW initiated a comprehensive Gender Sensitisation and Legal Awareness Programme in collaboration with Kendriya Vidyalaya Sangathan at KendriyaVidyalayas, for students of Class 11th and 12th under which a booklet of 'Major Laws Relating to Women', as well as content on 'Gender Sensitisation' was made available for students. The booklet was made available on the website of the Commission to be used by the students.

We have come a long way when it comes to reaching gender equality and eliminating violence against women. Over the years, women have had to face issues besides the ones commonly shared by humankind and it is to be said that women have fought all their battles valorously. It is our collective responsibility as a society to ensure equality for women and we must not stop till every woman, no matter which background she comes from can live a free and dignified life. ☐

Cleaner Cities

Durga Shanker Mishra

With no concept of Open Defecation Free (ODF) and solid waste processing at just 18% in the urban areas, it was clear that an accelerated approach was necessary to achieve the Prime Minister's vision of Swachh India within the time frame of five years. A framework was, therefore, needed to bring about rigour in progress monitoring and a spirit of healthy competition amongst cities and States to improve their performance in key cleanliness parameters. It was this underlying thought that led to the conceptualisation and implementation of Swachh Survekshan , the annual cleanliness survey conducted by the Ministry of Housing & Urban Affairs (MoHUA) that has today taken shape of the largest urban sanitation survey in the world.

The Need for Swachh Survekshan

Designed as a competitive monitoring framework/tool, Swachh Survekshan is one of the most effective tools for accelerating governance, helping India not just achieve the goal of sustainable sanitation and waste management, but also transform the way the Government of India works to achieve other key development goals. Through its multi-pronged data collection approach and robust assessment methodology, Swachh Survekshan has enthused cities with a healthy spirit of competition to improve the status of urban sanitation and to ensure best service delivery to their citizens.

Evolution and Scale of Swachh Survekshan

The journey that started in 2016 with only 73 cities with million plus population has grown manifold today with 4,242 cities in 2020. Hence, the Survekshan's scale of coverage has gone up by nearly 60 times covering the entire urban India.

The author is Secretary, Ministry of Housing & Urban Affairs, Government of India. Email: secyurban@gov.in

Table 1: Evolution and Scale of Swachh Survekshan Over the Years

Year	2016	2017	2018	2019	2020	2021
No. of Cities	73	434	4203	4237	4242	To be announced
Focus	Measuring physical progress	Measuring output	Measuring Outcomes	Sustainability through introduction of standardised protocols	Sustaining outcomes through quarterly League Survey	Integrated approach by covering all assessments through common platform
Citizen Feedback Received	1 lakh	18 lakhs	38 lakhs	64 lakhs	187 lakhs	
Cleanest City	Mysuru	Indore	Indore	Indore	Indore	

Completely Digital, Paperless and Efficient Survey

Till date, five rounds of Swachh Survekshan have been conducted, and the Protocol for the 6th edition has been launched on July 3, 2020. While the first three rounds adopted a mix of paper-based evaluation methodology, the Survey from 2019 onwards has been made completely digital and paperless, signaling a paradigm shift in the Mission's approach to governance.

A digital approach to the survey involved online submission of all supporting documents by Urban Local Bodies (ULBs) through the dedicated Swachh Survekshan Portal and online reporting of progress on all implementation components of the Mission on this Portal. In essence, over 4.5 lakh online documents replaced an estimated 20 metric tonnes of paper reports. This resulted in improved efficiency, freeing up of valuable office space, saving on time and expenditure, but more importantly, being more environment-friendly. Interestingly, the process of digitisation of the survey was complemented by a significant decrease in the actual survey period—from 66 days in 2018 to just 28 days in 2019 and in subsequent years—pointing to the increased efficiency with which the Survekshan experience is delivered year-on-year.

Approach and Methodology: Key Components

The design of Swachh Survekshan is based on three key pillars as follows:

1. **Service Level Progress** – evaluating progress of cities on ODF status, segregated waste collection, processing, disposal of solid waste and sustainable sanitation. Progress claimed is validated through citizens and on-field visits;
2. **Citizens' Voice** – comprising assessment of cities based on direct feedback, engagement with citizens and innovations helmed by citizens; and
3. **Certifications** – assessing progress of cities on their performance under Ministry's certification protocols such as Star Rating for Garbage Free Cities and ODF/ ODF+/ODF++/Water+.

While the actual assessment is conducted every year, between January 4th – 31st across all ULBs, it is preceded with Swachh Survekshan League (introduced in 2019) with the objective of sustaining the on-ground performance of cities along with continuous monitoring of service level performance. SS League 2020 was conducted in three quarters and had 25% weightage, which feeds into the final ranking of cities.

Box 1: Continuous Assessment

Swachh Survekshan: Propelling Cities towards Round-the-Clock Action

- Cities update their monthly progress on SBM-U portal against all Survekshan indicators.
- Cities upload documents in support of progress claimed within stringent timeframes.
- An independent agency verifies the data and validates the progress of each city through on-call/on-field interaction with citizens and random assessments of areas in cities with movement of assessors being geo-tagged.

Impact of Swachh Survekshan

Swachh Survekshan framework has enabled MoHUA to accelerate the SBM-U Mission outcomes in propelling urban India towards achieving 'Sampurn Swachhata' as shown in the Table 2.

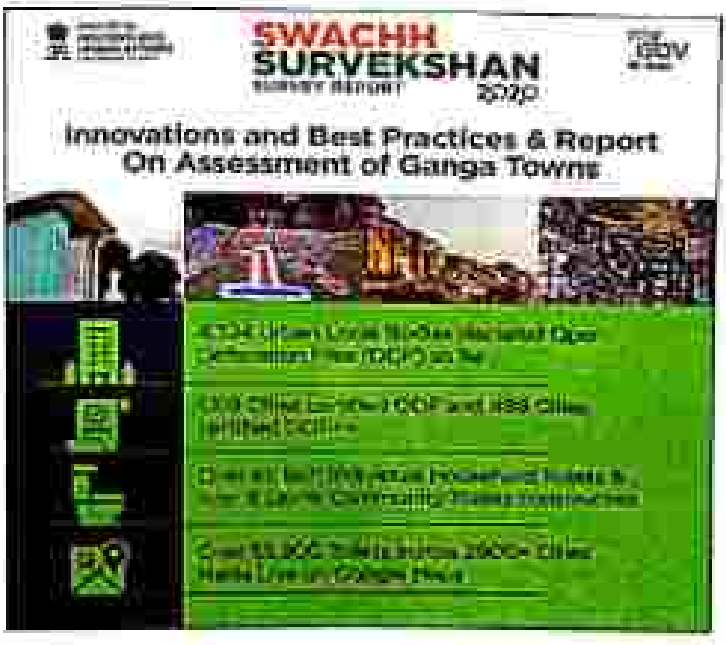


Table 2: Progress Achieved by Swachh Bharat Mission-Urban

Parameter	2014	September 2020
Open Defecation Free (ODF)	No concept of ODF cities	Entire urban India[a]
Individual Household Toilets Constructed	12.9 lakhs	66.56 lakhs
Community/Public Toilets Constructed	55,000	6.24 lakhs
ODF+ Certification	No Concept of ODF+	1319 Cities
ODF++ Certification	No Concept of ODF+	489 Cities
Door-to-door Waste Collection	Negligible	97%
Source Segregation of Waste	No Such Concept	77%
Waste Processing	18%	67%
Garbage Free Cities	No Such Concept	6 - 5 Star Rated Cities 86 - 3 Star Rated Cities 64 - 1 Star Rated Cities

a. Driving India on the Path of Sustainable Sanitation

Graph 1: Progressing in achieving ODF

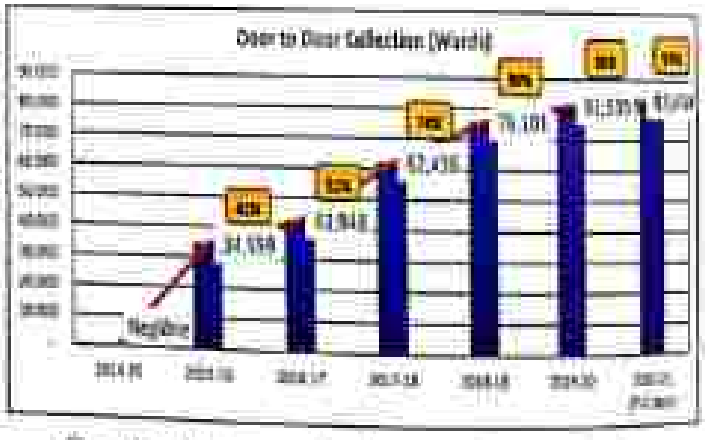
Today, urban India has not just become ODF but has moved beyond the Mission mandate to focus on maintaining hygiene and cleanliness of community/ public toilets, wastewater treatment and faecal sludge management through the ODF+ and ODF++ Protocols. As on date, 1319 cities have been certified ODF+, and 489 cities have been certified ODF++, which may be largely attributed to the Swachh Survekshan framework which has built in these indicators for promoting sustainability.

Congratulations to all those cities who have secured top positions in #SwachhSurvekshan2020. May other cities also be inspired to further ramp up their efforts towards ensuring cleanliness. Such competitive spirit strengthens the Swachh Bharat Mission and benefits millions".

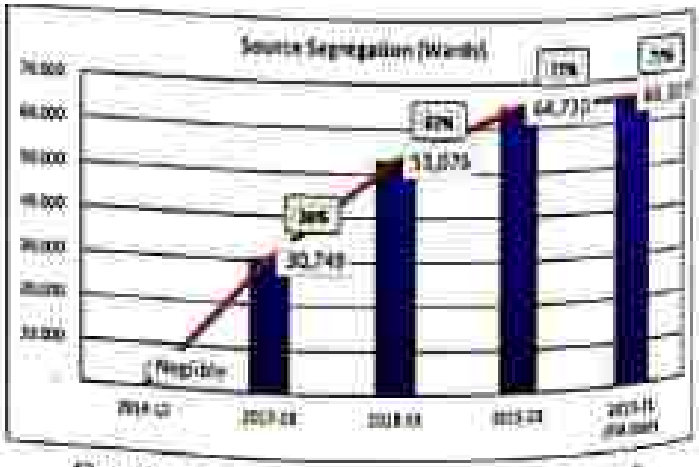
– Narendra Modi
Prime Minister of India

Quantum Jump in Solid Waste Management leading to Garbage Free Cities

With solid waste processing standing at a mere 14% at the time of launch of SBM-U in 2014, Swachh Survekshan motivated all cities to improve their solid waste management practices. Cities were pushed to put in place effective systems for door-to-door collection, segregation and processing, and the results are evident in the numbers. Solid waste processing has gone up by over 3 times and now stands at 67%. Similarly, the Star Rating Protocol for Garbage Free Cities built into the Swachh Survekshan framework has driven cities to strive for holistic levels of cleanliness – as on date 6 cities have received 5 stars, 86 cities - 3 stars and 64 cities +1 star.



Graph 2: Progress in door-to-door collection of wastes in wards



Graph 3: Progress in source segregation of wastes in wards

Graph 4: Progress in waste processing

b. Bringing Swachhata Warriors Together Through Effective Citizen Engagement

The most critical part of the Mission is behavioural change among citizens and transforming the Swachhata movement into a true 'Jan Andolan'. The success in this direction is attributable to Swachh Survekshan due to its thrust on citizen engagement and feedbacks. To cite an example, Swachh Survekshan – 2020 had recorded feedback from 1.87 crore citizens. This is a significant increase from the first edition of the survey, which had recorded feedback of only 1 lakh citizens. Several citizen engagement initiatives are built into the overall framework such as recognition of Swachhata Champions, NGOs, voluntary organisations, start-ups and CSR efforts, display of creatives and other innovative forms of communication which not only ensure continued participation of citizens but inculcate in them a sense of ownership about the Swachhata of their cities.

c. Dignity, Recognition & Social Safety Net for Sanitation Workers/Waste Pickers

SBM-U has placed a strong emphasis on improving the socio-economic conditions of sanitation workers and waste pickers who not only come from marginalised sections of society but are also vulnerable due to the nature of their jobs and lack of social safety nets. As a result of the built-in indicators focusing on welfare of these groups, over 84,000 informal waste pickers have been integrated into the formal workforce while over 4 lakh contractual employees have secured employment as Swachhata Warriors with ULBs. Further, over 5.5 lakh sanitation workers have been able to receive the benefits under various social welfare schemes of Central/State Governments(s).

d. Enabling Digitization of Mission Outcomes

Swachh Survekshan has actively promoted key digital innovations. To bring in efficiency and transparency in implementing solutions or introducing new interventions, there are several performance indicators that prompt ULBs to introduce digital solutions to score better marks. Some of the key processes set-up and streamlined using technology/digital interface are summarised below:

- Swachhata App as a grievance redressal tool has become popular among citizens. It has been downloaded by 1.7 crore citizens in raising 1.97 crore complaints; out of which 1.85 crore complaints have already been resolved.
- Till date, over 59,000 public toilet blocks in 2960+ cities have been made live Google Maps.
- Swachh Manch, a digital citizen engagement platform has been developed. 1.75 lakh events involving over 7 crore citizens have been registered on this platform to showcase their work around Swachhata.
- 170+ courses on sanitation and solid waste management have been made available on an open digital platform.

e. Capacity Building of States/Cities for Effective & Seamless Knowledge Sharing

Building knowledge and capacity of city officials has been strengthened through Swachh Survekshan framework. Prior to the survey, concerted efforts are made by the Ministry to strengthen the capacities of cities to understand the modalities of the survey. Since Swachh Survekshan 2017 and subsequent rounds in 2018, 2019 and 2020, Ministry conducted 35 regional workshops per year. Swachh Survekshan 2020's workshops were attended by over 12,000 ULBs/State government officials.

Swachh Survekshan 2021 indicators focus on parameters pertaining to wastewater treatment and reuse along with faecal sludge management. The crucial issues of legacy waste management and remediation of landfills have also been brought to the fore in this edition of Survekshan which is in line with the Ministry's vision for Swachh Bharat Mission 2.0.

From Monitoring Tool to Dynamic Tool for Improving Governance

It is not just the scale of Swachh Survekshan that is noteworthy. The dynamic nature of the Swachh Survekshan framework has evolved continuously—from being just a monitoring framework measuring outcomes, it has become an implementation accelerator enabling sustainability of outcomes by institutionalising 'Swachhata'.

Swachh Survekshan has been able to significantly transform the urban governance mechanism by incorporating speed, scale, and agility at its core. While the triangulated approach of the survey (service level progress, certifications and citizens' voice) coupled with third party certifications has lent credibility to the assessment process, data from the survey has not only resulted in better decision-making by government authorities but has helped them identify, address and solve sanitation and waste management issues in a time-bound manner. Added to this is the issue of optimum utilisation of resources with cities being able to allocate and spend funds under the Mission to achieve targeted results.

Survekshan has enabled 'ease of doing business' for cities by simplifying procurement processes and incentivising cities/States to register on the Government E-Marketplace (GeM) portal. At the central level, Survekshan Framework has enabled the Mission to introduce new ideas and solutions across all ULBs with relative simplicity and speed.

It is noteworthy that the performance of not just cities but city administrators such as Municipal Commissioners are linked directly to the ranking of cities in Swachh Survekshan thus becoming an effective 'report card' for the city and its leadership.

Swachh Survekshan 2021: Adding a New Dimension through Preerak DAUUR Samman

Ministry has recently launched the sixth edition of the survey. Swachh Survekshan 2021 indicators focus on parameters pertaining to wastewater treatment and reuse along with faecal sludge management. Similarly, the crucial issues of legacy waste management and remediation of landfills have also been brought to the fore in this edition of Survekshan which is in line with the Ministry's vision for Swachh Bharat Mission 2.0. A key highlight in this edition has been the launch of the 'Preerak DAUUR Samman', a new performance category which is sure to further enthuse cities to aspire towards higher levels of 'Swachhata'.

This Samman will be given for five levels of achievement in Swachhata - Divya (Platinum), Anupam (Gold), Ujjwal (Silver), Udit (Bronze), Aarohi (Aspiring). These levels will be based on performance on following six selected indicators:

- Segregation of waste into Wet, Dry and Hazard categories.
- Processing capacity and actual utilisation of wet waste generated.
- Processing capacity and recycling/utilisation of dry waste.
- Construction & Demolition (C&D) waste processing.
- Percentage of total waste going to landfills.
- Sanitation (liquid waste processing) status.

Conclusion

Started in a modest way in 2016, Swachh Survekshan has now turned into a motivation tool, identity and matter of pride in 'Swachhata'—something to look forward to and aspire for the cities and States. Swachh Survekshan is a framework which truly has unleashed agility in urban governance towards achieving social outcomes. This framework, with its roots in creating "peer pressure", has the potential to transform governance in various other spheres through people's active participation, agility, and competitiveness. □

Endnote

1. Except 43 Urban Local Bodies of West Bengal

Food for All

Naresh Gupta

India still faces a long road ahead in its quest to achieve Zero Hunger. Over 25 years since India ushered in its economic reforms, the country's economy has undergone significant structural transformations, encouraging planners to turn their focus away from agriculture and instead towards the service and manufacturing sectors. The priority now is to return attention to agriculture and its central role of providing food security, reducing poverty and generating employment.

State of Hunger in India[1]

India, with a population of over 1.3 billion, has seen tremendous growth in the past two decades. Gross Domestic Product has increased 4.5 times and per capita consumption has increased 3 times. Similarly, food grain production has increased almost 2 times. However, despite phenomenal industrial and economic growth and while India produces sufficient food to feed its population, according to Food and Agriculture Organization of the United Nations (FAO) estimates in The State of Food Security and Nutrition in the World, 2020 report, 189.2 million people, that is 14% of the population, are undernourished in India. The problem of hunger is complex, and different terms are used to describe its various forms.

Hunger is usually understood to refer to the distress associated with a lack of sufficient calories.

Undernutrition goes beyond calories and signifies deficiencies in any or all of the following: energy, protein, and/or essential vitamins and minerals. Undernutrition is the result of inadequate intake of food in terms of either quantity or quality, poor utilisation of nutrients due to infections or other illnesses, or a combination of these factors. These, in turn, are caused by a range of factors, including household food insecurity; inadequate maternal health or childcare practices; or inadequate access to health services, safe water, and sanitation.

Malnutrition refers more broadly to both undernutrition (problems caused by deficiencies) and overnutrition (problems caused by unbalanced diets, such as consuming too many calories in relation to requirements with or without low intake of micronutrient-rich foods).

In the Global Hunger Index (GHI) Report, "hunger" refers to the index based on four component indicators. Taken together, the component indicators reflect deficiencies in calories as well as in micronutrients.

Computation of Gross Hunger Index (GHI)

Gross Hunger Index scores are calculated using a three-step process that draws on available data from various sources to capture the multidimensional nature of hunger. First, for each country, values are determined for three dimensions—inadequate food supply, child undernutrition and child mortality rate with indicators of undernourishment for the first dimension, wasting and stunting for the second dimension and under 5 mortality rate for the third dimension, as indicated below.

1. Undernourishment: the share of the population that is under-nourished (PUN).

The author is a retired IAS and Member Secretary, Tamil Nadu State Planning Commission. He recently wrote a book, "Human Development in India". Email: gupta_naresh_66@yahoo.co.in

2. Child Wasting: the share of children under the age of five who are wasted (CWA).

3. Child Stunting: the share of children under the age of five who are stunted (CST).

4. Child Mortality: the mortality rate of children under the age of five (CM).

Second, each of the four component indicators is given a standardised score on a 100-point scale based on the highest observed level for the indicator on a global scale in recent decades. Third, standardised scores are aggregated to calculate the GHI score for each country, with each of the three dimensions given equal weight. Standardisation of the component indicators is as follows:

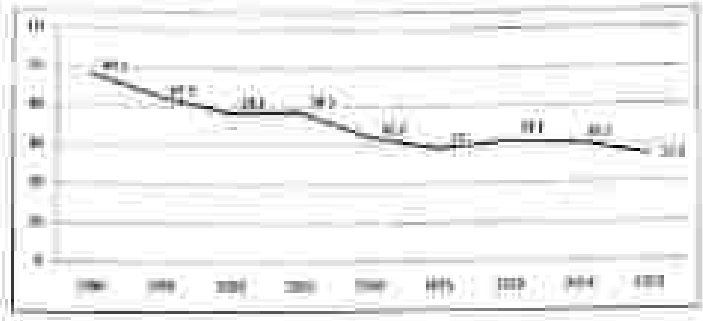
Standardised PUN = PUN × 100/80; Standardised CWA = CWA × 100/30; Standardised CST = CST × 100/70 and Standardised CM = CM × 100/35.

The component indicators are then aggregated as 1/3 × Standardised PUN+ 1/6 × Standardised CWA+ 1/6 × Standardised CST+ 1/3 × Standardised CM = GHI score

Values less than 10 reflect 'low hunger', values from 20 to 34.9 indicate 'serious hunger'; values from 35 to 49.9 are 'alarming'; and values of 50 or more are 'extremely alarming'.

India's Progress in GHI

In the Global Hunger Index Report 2019, India was ranked at 102 out of 117 countries. According to the Global Hunger Index 2020 Report, India ranked 94 with a Global Hunger Index of 27.2. India has made considerable progress over the years which is evident from its Global Hunger Index as shown in the Graph 1.

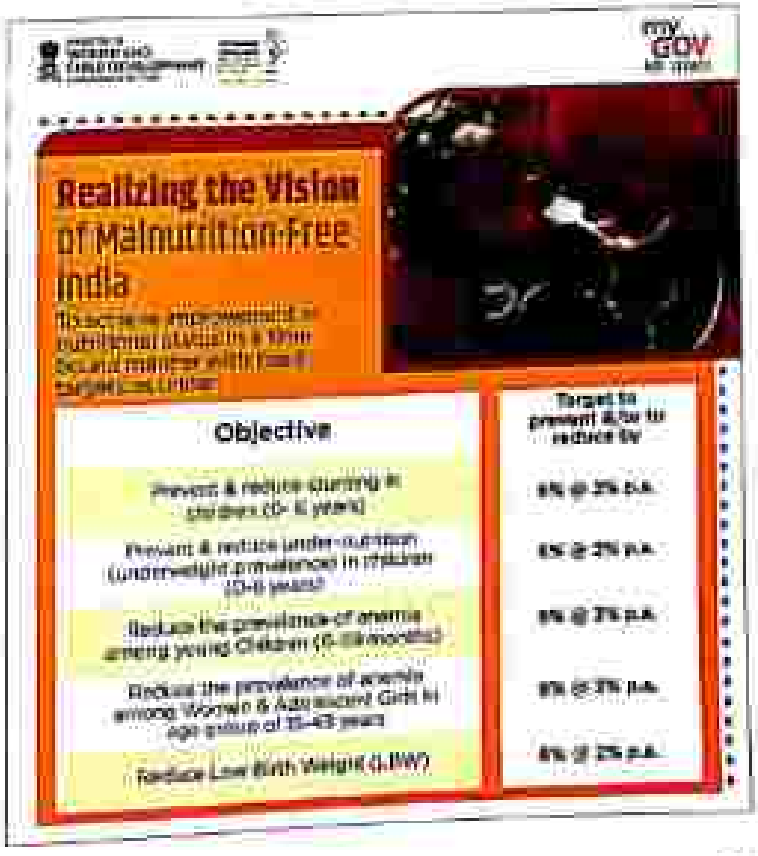


Graph 1.

The published data for the corresponding period for the States/UTs within India is not available and therefore GHI for the States/UTs could not be computed. Nevertheless, the Comprehensive National Nutrition Survey 2016–2018 provides considerable data on nutritional status State/UT wise.

> The Government of India is strongly committed to achieving the 2030 Sustainable Development Goals (SDGs). The current nutrition situation in India justifies its high level national commitment with strong policy initiatives based on evidence-informed interventions towards combating all forms of malnutrition in the country.

The Government of India is strongly committed to achieving the 2030 Sustainable Development Goals (SDGs). The current nutrition situation in India justifies its high level national commitment with strong policy initiatives based on evidence-informed interventions towards combating all forms of malnutrition in the country. Ambitious targets



have been set for POSHAN Abhiyaan[3] to reduce stunting (2%), underweight (2%), anaemia (3%) among young children, women and adolescent girls and reduce low birth weight (2%) per annum. Also, the National Health Mission (NHM) includes programmatic components such as health system strengthening, Reproductive-Maternal-Neonatal-Child and Adolescent Health (RMNCH+A), and prevention and treatment of communicable and non-communicable diseases. The NHM envisages achievement of universal access to equitable, affordable & quality health care services that are accountable and responsive to people's health and well-being. Anaemia continues to be a major public health problem in the country. Micronutrient deficiencies are an important cause of morbidity and mortality, especially in infants and pre-school children.

Prevalence of Malnutrition in India – Stunting, Wasting and Underweight children[4]

A number of the most populous states including Bihar, Madhya Pradesh, Rajasthan and Uttar Pradesh had a high (37-42%) stunting prevalence. High prevalence of wasting (≥ 20%)

The NHM envisages achievement of universal access to equitable, affordable & quality health care services that are accountable and responsive to people's health and well-being. Anaemia continues to be a major public health problem in the country.

states included Madhya Pradesh, West Bengal, Tamil Nadu and Jharkhand. The states with the highest prevalence (≥ 39%) of underweight were Bihar, Chhattisgarh, Madhya Pradesh and Jharkhand. The first 1000 days (from conception to age two years) is considered the most important period to intervene to prevent the lifelong damage caused by malnutrition.

SDG India Index & Dashboard 2019-20

The NITI Aayog has brought out SDG India Index & Dashboard 2019-20 which measure the progress achieved and distance to be covered by the States/UTs in their journey towards meeting the targets, using the SDG India Index, covering 16 out of 17 SDGs. Two of the most important SDGs (Sustainable Development Goals) having a bearing on poverty, hunger and nutrition are:

SDG 1. No Poverty

SDG 2. Zero Hunger

Table 1. shows % of stunting, wasting and underweight children aged 0-4 years by State, India - CNNS 2016-18

S. No.	State/ UT/ India	% of Stunting among Children aged 0-4 years by State, India - CNNS 2016-18	% of Wasting among Children aged 0-4 years by State, India - CNNS 2016-18	% of Underweight among Children aged 0-4 years by State, India - CNNS 2016-18
1	Andhra Pradesh	31.5	17.1	35.5
2	Arunachal Pradesh	28.0	7.0	16.0
3	Assam	32.4	19.4	29.4
4	Bihar	42.9	14.5	38.7
5	Chhattisgarh	35.4	19.3	40.0
6	Delhi	28.8	14.8	28.1
7	Goa	19.6	15.8	20.3
8	Gujarat	39.1	17.0	34.2
9	Haryana	34.9	11.7	28.8
10	Himachal	28.4	11.0	22.6
11	Jammu & Kashmir	15.5	15.0	13.0
12	Jharkhand	36.2	29.1	42.9
13	Karnataka	32.5	19.0	32.0
14	Kerala	20.5	12.6	18.7
15	Madhya Pradesh	39.5	19.6	38.7
16	Maharashtra	34.1	16.9	30.9
17	Manipur	28.9	6.0	13.0
18	Meghalaya	40.4	15.0	30.0
19	Mizoram	27.4	5.8	11.3
20	Nagaland	26.2	12.9	16.3
21	Odisha	29.1	13.9	29.2
22	Punjab	24.3	6.7	19.7
23	Rajasthan	36.8	14.3	31.5
24	Sikkim	21.8	7.0	11.0
25	Tamil Nadu	19.7	21.0	23.5
26	Telengana	29.3	17.9	30.8
27	Tripura	31.9	12.8	23.8
28	Uttar Pradesh	38.8	18.5	36.8
29	Uttarakhand	29.9	5.9	18.7
30	West Bengal	25.3	20.1	30.9

SDG 2: Zero Hunger - To measure India's performance towards the Goal of Zero Hunger, seven national-level indicators have been identified, which capture three out of the eight SDG targets for 2030 outlined under this Goal. The indicators of SDG 2 taken are:

1. Ratio of rural households covered under public distribution system (PDS) to rural households whose monthly income of highest earning member is less than Rs. 5,000.
2. Percentage of children under age 5 years who are stunted.
3. Percentage of pregnant women aged 15-49 years who are anaemic.
4. Percentage of children aged 6-59 months who are anaemic (Hb<11.0 g/dl).
5. Percentage of children aged 0-4 years who are underweight.
6. Rice, wheat and coarse cereals produced annually per unit area (Kg/Ha).
7. Gross Value Added in Agriculture per worker.

SDG Index Score for Goal 2 ranges between 22 and 76 for States and between 12 and 73 for UTs. Goa and Chandigarh are the top-performing among States and UTs, respectively. Seven states and two UTs bagged a position in the category of Front Runners (with Index score higher than/equal to 65). However, twenty States and three UTs fall behind in the Aspirants category (with Index score less than 50).

Food and Nutrition Security

The implementation of a revamped Public Distribution System under the National Food Security Act (NFSA), 2013 is a paradigm shift in the approach towards the issue of food security at the household level, from welfare to a rights-based approach. Under the "Antyodaya Anna Yojana" (AAY), the poorest from amongst the Below Poverty Line families are entitled to 35 kg of food grains per month at more subsidised rates. The NFSA adopts a life cycle approach making special provisions for ensuring food security of pregnant women, lactating mothers, and children from 6 months to 14 years of age. Under the Integrated Child Development Services, 70.37 million children in the age range 6 months to 6 years, and 17.18 million pregnant women and lactating mothers are provided access to nutritious food as on March 31, 2019. Another initiative aimed at achieving better nutrition standards for school going children is the Mid-day meal (MDM) scheme, which provides nutritious cooked mid-day meal with the calorie range of 450-700 to over 120 million children at primary and upper primary levels.

The National Nutrition Mission (Poshan Abhiyaan), a multi-ministerial convergence mission was launched in 2018 to make a concerted attack on under-nutrition, stunting, and anaemia. The Mission targets to reduce stunting, under-nutrition, anaemia (among young children, women and adolescent girls), and low birth weight by 2 per cent, 2 per cent, 3 per cent, and 2 per cent per annum, respectively. It targets to bring down stunting among children in the age group 0-6 years from 38.4 per cent to 25 per cent by 2022.

Agricultural Productivity and Income

India's foodgrain requirement to adequately provide for its population is projected to range from 334-350 million tonnes by 2032-33. The government has been implementing a multi-faceted strategy for doubling farmers' income focusing on seven growth factors: improved crop productivity, increased livestock productivity, cost-effective production processes, increa-

sed cropping intensity, crop diversification favouring high-value crops, access to better prices and shifting to the non-farm occupation. 221 million soil health cards have been distributed so far to farmers to help rationalise the use of fertilisers. The Pradhan Mantri Krishi Sinchayee Yojana (PMKSY) focuses on improved water efficiency with the motto of "Har Khet Ko Pani" and "Per drop more crop" and provides end-to-end solutions in the irrigation supply chain, viz. water sources, distribution network, and farm-level applications. The Pradhan Mantri Fasal Bima Yojana (PMFBY) provides better insurance coverage and agricultural credit at a reduced rate of 4 per cent per annum to farmers. The increase of the minimum support prices for all kharif and rabi crops at least by 150 per cent of the cost of production has also shored up farmers' income. In addition, the Pradhan Mantri Kisan Scheme has been initiated to extend the payment of INR 6,000 per year to every farmer in the country, which provides a further boost to their income. Under Pradhan Mantri Khan Sampada Yojana, financing of mega food parks, infrastructure of agro-processing clusters, and integrated cold chain and value addition infrastructure are undertaken, in addition to other components.

India still faces a long road ahead in its quest to achieve Zero Hunger. Over 25 years since India ushered in its economic reforms, the country's economy has undergone significant structural transformations, encouraging planners to turn their focus away from agriculture and instead towards the service and manufacturing sectors. The priority now is to return attention to agriculture and its central role of providing food security, reducing poverty and generating employment. India is likely to be the most populous country on this planet by 2030 with 1.6 billion people. Ensuring food and nutrition security will become a bigger challenge unless Government of India and the State Governments, particularly of the more populous States, pursue its right earnest population stabilisation programmes. 2

References

1. https://www.indiafoodbanking.org/hunger, https://www.globalhunger indices.org/about.html
2. Comprehensive National Nutrition Survey 2016-18/ UNICEF/ MOFW & FW
3. The Prime Minister's Overarching Scheme for Holistic Nutrition POSHAN Abhiyaan or National Nutrition Mission, is Government of India's flagship programme to improve nutritional outcomes for children, pregnant women and lactating mothers. Launched by the Prime Minister on the occasion of the International Women's Day on March 8, 2018 from Jhunjhunu in Rajasthan, the POSHAN (Prime Minister's Overarching Scheme for Holistic Nutrition Abhiyaan directs the attention of the country towards the problem of malnutrition and addresses it in a mission mode.
4. Comprehensive National Nutrition Survey 2016-18/ UNICEF/ MOFW & FW
5. https://www.grainmart.in/news/niti-aayog-report-on-hunger-poverty-and-inequality-in-indian-states-a-big-concern/

Multidimensional Poverty Index

Dr Rakesh Kumar
Siddhartha Kumar

The concept of global poverty estimation was initiated in the 1970s. The global strategists led research to present the international poverty line on the national poverty lines of very poor developing countries. Of all the countries that have taken up Multidimensional Poverty Index (MPI) to measure their overall poverty statistics, India has been the biggest gainer of them all. This can be concurred by the fact that India, a lower middle- income country, has recorded the fastest reductions in poverty (according to MPI) as reported in September 2019.

In 2011, Columbia, a South American country perched atop the north-western part of the continent, was facing a crisis in measurement of their poverty. While monetary poverty was the only standard of poverty measurement, the country was trying to collect and collate data from their Household Income and Expenditure Survey and the Great integrated Household Survey (OPHI Briefing 52, 2019). In order to calculate monetary income, the National Planning Department (DNP) constituted a group of national and international experts to develop a parallel methodology to calculate Multidimensional Poverty using the Alkire and Foster method (OPHI Briefing 52, 2019). This would take the shape of Columbia's

Dr Rakesh Kumar is Former Joint Secretary, MoH&FW and Chief Advisor, Population Services International, India.
Email: rk1992.sk@gmail.com
Siddhartha Kumar is associated with Piramal Foundation, India.

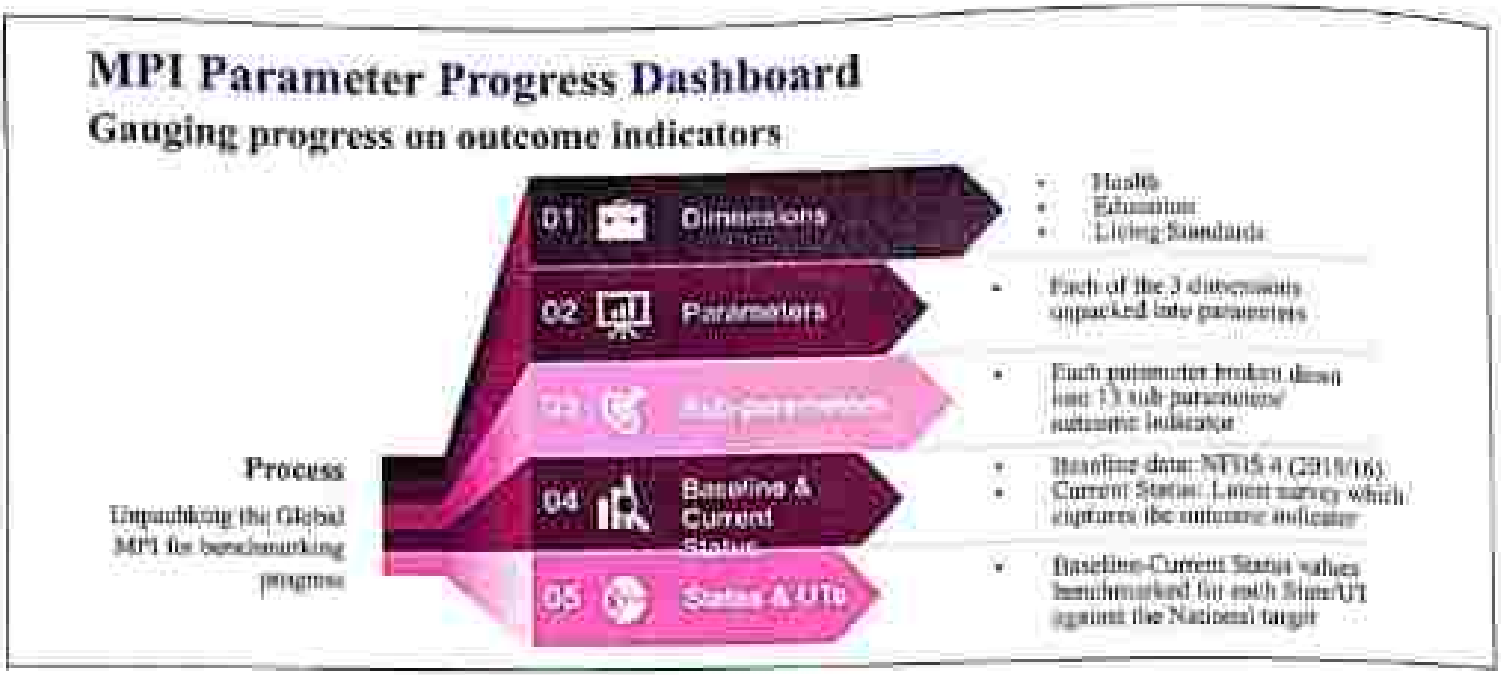
Multidimensional Poverty Index (MPI-CO).

The subsequent positive impact is for everyone to see and has only reaffirmed the importance of the MPI concept. In March 2017, during a seminar held in Bogota to emphasise on the positive impact that MPI has had in implementation of their social policies, Roberto Angulo highlighted that social policy has taken a turn for the better mainly due to the inclusion of MPI into the National Development Plan.[7] Another speaker at the same event, namely Nemesio Roys called attention to the fact that various programmes were designed on the basis of MPI in order to cater to the specific needs of the population.

In a nutshell, this perfectly explains the significance of Multi-dimensional Poverty and MPI. This only captures the essence of poverty having more dimensions that just monetary manifestations. There are both actual and potential disadvantages to people willing under the condition of poverty.[8] Even the seminal study "Voices of the Poor"[9] had concurred that poverty is not just about lack of any one particular thing; it has many dimensions to it with lack of food being the bottom line indicator to gauge poverty. There are many psychological (powerlessness, dependency, etc.), infrastructural (lack of roads and proper transportation), gender (managing assets by the more assertive gender in the family), health (ill health as a source of destitution) and education (lack of education as a basis for poverty and good education being an escape from poverty) dimensions to poverty than just shortage of income.

The concept of global poverty estimation was initiated in the 1970s. The global strategists led research to present the international poverty line on the national poverty lines of very poor developing countries. They also used the purchasing power parity exchange rates (PPPs)—rather than nominal ones—to convert the line into the US dollar and to standardise the poverty line across all the countries. The World Bank is the pivotal source for information on global poverty estimation methods. In 1990, a person was poor if he had an income less than $1 USD a day. It was revised to $1.25 per day per person in 2005 and approximately 1.6 billion people lived under this mark. It was again changed to $1.90 per day per person in 2015, a nominal increase of 52% in the benchmark (Ortiz-Ospina, 2013).

To understand the umpteen importance of MPI, it is imperative to focus on the motivation that led to a major overhaul and evolution of poverty calculation to MPI. Three such motivations have been normative arguments, empirical evidence and policy perspective (Alkire, Foster, Seth, Santos, Roche and Ballon, January 2015). As per the normative, the argument stands that the poverty measures have to match up to the multidimensional nature of poverty itself. It is of tremendous importance that the ethical calculation is carried out in order to "improve the fit between the measure and the phenomenon it is supposed to approximate."[10] Furthermore, Amartya Sen (2000) has also established that while battered human lives are diminishing in different ways, the need to have an overarching framework for accommodating diverse deprivations of poverty has never been greater[11]. Moreover, he also states that while impoverished lives result frequently from negligible incomes, the resultant poor living is not just an outcome of mere inadequate incomes. If a minimal decent life of freedom can be the major area



of interest regarding people uplifted from poverty, then it also needs to be understood that mere focus on money or any one particular means to achieve the end (decent free life) to study this area of interest would be a myopic exercise. Therefore, the need is to study and uplift "impoverished lives"; not just "depleted wallets."

Also, there were major empirical evidences cropping up around the world that strongly put forward the case for MPI. Nolan and Whelan (2011) observed that there were three particular reasons that supported MPI's cause to be incorporated in Europe's poverty assessment; meaning, identification and multidimensionality. The first reason highlighted that the non-monetary dimensions successfully capture the essence of what it "means" to be poor, thus enhancing the very notion of poverty holistically. The second reason propagates the idea that MPI can be used to successfully figure out a more "appropriate income threshold" and can also thus bring those poor people under its ambit of study who are "unable to participate in their societies due to lack of resources". Whereas the third reason speaks for itself as poverty is defined as multidimensional and therefore multiple indicators can provide more wholesome results.

The numbers produced can really motivate major poverty measures in the world. These measures can move major poverty policies into action. Though some of these deprivations are intangible and incomparable, the rather incomplete policies can still hit the mark if they are implemented with determination and imagination."

Despite, constant evolution of the research methodology, the need for a clearer picture of poverty persisted. The main issues with earlier approaches are that annual price adjustments to the poverty line are usually inadequate and tend to underestimate the true incidence of poverty. Another critique of income/calorie-based methods is that intake of the minimum number of calories does not automatically ensure that diet is nutritionally balanced. Expenditure on essential non-food items like rent, fuel, light, clothing, health care, education and transport is also often seriously underestimated and unaccounted.

To understand the importance of MPI, it is imperative to focus on the motivation that led to a major overhaul and evolution of poverty calculation to MPI. Three such motivations have been normative arguments, empirical evidence and policy perspective.

The eventual development of Human Development Index (HDI) was the culmination of decades of research and multilateral discussions on how to clinically evaluate poverty. In 1990, the concept of Human Development Index was devised and launched by the UNDP which enabled innovative thinking about poverty reduction by introducing an alternate method to measure poverty without using income. It measures the average achievements of a country in three basic dimensions: Healthy life, access to education and standard of living. HDI was an immense achievement in the field of poverty measurement and it allowed for multinational comparisons. The Multidimensional Poverty Index (MPI) launched in 2010 was a modified and focused version of HDI. (Alkire S. a., 2010)

The Indian Story

Decades of research has established the consensus that poverty should not be measured simply in terms of income. There are multiple research papers focusing on poverty

measurement like (Mehta) talks about chronic poverty in India, (Banerjee, Two Poverties, 2006) which talks about poverty as desperation and vulnerability, (N, 2013) which talks about poverty alleviation. The foundations of a measurement framework for poverty were laid in the seminal.

Work of Amartya Sen (Sen A., 2005, pp.275-296) asserted that, poverty should be defined as a condition that deprives people of the freedom to choose and prohibits them from functioning effectively in society. It is this lack of facilities and opportunities for individuals that prevents them from developing their full potential and capabilities. This kind of poverty analysis shifts attention from a "means" (income) to an "ends" (freedom to pursue a fulfilling life). The capability deprivation approach considers intrinsically important deprivations (health, education) and not just low income. There are other influences on capability deprivation apart from low income and the relationship between low income and low capability varies between communities and individuals. Hence, it is important to be cognisant of the multi-faceted nature of poverty.

Poverty measurement has attracted the attention of Indian policymakers for a long time.

If a minimal decent life of freedom can be the major area of interest regarding people uplifted from poverty, then it also needs to be understood that mere focus on money or any one particular means to achieve the end (decent free life) to study this area of interest would be a myopic exercise. Therefore, the need is to study and uplift "impoverished lives"; not just "depleted wallets."

In 1950, BS Minhas (Nagaraj, 1990) published the first estimates of poverty rates for independent India using a poverty line based on real expenditure per year. In 1952, the first National Sample Survey (NSS) (Tendulkar, 2003) concluded that the head-count ratio of poverty in India was around 45 percent of the population. In 1971, V M Dandekar and Nilkantha Rath (Gilbert,1971) used a daily intake of 2,250 calories per person to define the poverty line for India. In 1993, an expert group chaired by DT Lakdawala (Arora, 2017) established the poverty line for India. For the first time, state poverty lines were developed using a standard list of commodities and prices. In 2000, the Saxena Committee report (Committee, 2010) using data from 1972 to 2000, separated calorie intake from nominal income in its analysis of poverty in India, and estimated that 50% of Indians lived below the poverty line. In 2010, the Suresh Tendulkar Committee (committee T., 2009) calculated the poverty line based on per capita consumption expenditure per month. For rural areas, it was Rs. 816 per month (Rs. 27 per day). For urban areas, it was Rs. 1000 per month (Rs. 33 per day). Using this methodology, the population below the poverty line was 354 million (29.6% of the population).

The Rangarajan Committee (committee R., 2014) established a new poverty threshold for rural areas at Rs. 972 per month or Rs. 32 per day. For urban areas, it was fixed at Rs. 1407 per month or Rs. 47 per day. Under this methodology, the population below the poverty line in 2011-2012 was 363 million (29.5% of the population).

Of all the countries that have taken up MPI to measure their overall poverty statistics, India has been the biggest gainer of them all. This can be concurred by the fact that India, a lower middle-income country, has recorded the fastest reductions in poverty (according to MPI) as reported in September 2019. For the decade

spanning from 2005-06 to 2015-16, India has uplifted 271 million people out of multidimensional poverty. The more gratifying and satisfying statistic is that most of these absolute reductions have been reported from some of the poorest regions of India. A telling example is the state of Jharkhand wherein the incidence of MPI has been reduced from 74.9% in 2005-06 to 46.5% in 2015-16. In a world full of approximately 1.3 billion multidimensionally poor people[10], these statistics come as a boon and a welcome sign of gauging and holistically helping people in reducing poverty indices.

South Asia led the path of better MPI success stories in the past decade. Apart from India, Cambodia resulted in the fastest reductions in MPI in the concerned decade. Bangladesh was also able to uplift 19 million people out of multidimensional poverty from 2004-2014. With a drop in MPI value from 0.283 in 2005-06 to 0.123 in 2015-16, India has shown that uplifting people from the poorest regions can showcase a brilliant example for other countries to emulate. Overall, Ethiopia, India and Peru significantly reduced deprivations in all 10 indicators, namely nutrition, sanitation, child mortality, drinking water, years of schooling, electricity, school attendance, housing, cooking fuel and assets.[11]

However, in terms of absolute numbers, India still shoulders the burden of eradicating multi-dimensional poverty from the lives of approximately 369 million of its citizens. That makes for a sizeable percentage, especially in comparison to countries like South Africa. The Rainbow Nation recorded a drop from 17.9% in 2001 to 7.0% in 2016 in its MPI poor population. That accounts to approximately 4 million citizens; roughly 1.08% of the total MPI poor population of India today.

This builds upon the foundations laid by the multitude of researchers working in this field, and hopes to further expand the scope of the ideas proposed by them. It is important that we recognise that to achieve the SDG Goal of "leaving no one behind" we need to localise our policies and measurement techniques to the smallest level possible. It is a pioneering attempt for the Indian context. ❑

References

1. How to Explain the Measurement of Multidimensional Poverty to the General Public: Workshop for Journalists in Colombia (January 2019)
2. https://ophi.org.uk/mpi_stories/mpi-its-impact-on-social-policy-in-colombia/
3. Alkire, S., Foster, J. E., Seth, S., Santos, M. E., Roche, J. M., and Ballon, P. (2015) Multidimensional Poverty Measurement and Analysis, Oxford: Oxford University Press, ch. 1
4. Narayan, D., Chambers, R., Shah, M. K., and P. Petesch. (2000). Voices of the Poor: Crying Out for Change. OUP
5. Alkire, S., Foster, J. E., Seth, S., Santos, M. E., Roche, J. M., and Ballon, P. (2015) Multidimensional Poverty Measurement and Analysis, Oxford: Oxford University Press, ch. 1
6. Sen, A.K. (2000). "A Decade of Human Development" Journal of Human Development and Capabilities, 1(1):17–23.
7. Sen, A.K. (2000). Social Exclusion: Concept, Application and Security. ADB, ch. 2.
8. Nolan, B. and Whelan, C. (2011) Poverty and Deprivation in Europe. OUP.
9. Salkeld, M. (ed.). (2000). Nuevos enfoques al mundo: La medición de la pobreza. Mexico. Miguel Angel Porrua
10. https://www.thehindubusinessline.com/economy/india-lifted-271-million-people-out-of-poverty-in-10-years-un/article29403303.ece
11. https://www.thehindubusinessline.com/economy/india-lifted-271-million-people-out-of-poverty-in-10-years-un/article29403303.ece

Challenges of Linguistic Heterogeneity

S Chandrasekhar
Leena Bhattacharya

Migrant workers are central to the functioning of the Indian cities. Anyone who has a cursory look at the migration and language tables released as part of Census of India 2011 would realise the extent to which the composition of population of Indian cities had changed due to inter-state migration. This brings an issue, often unaddressed, the language barrier for the inter-state migrants.

Migration has led to linguistic diversity, especially in terms of mother tongues spoken. Consider the case of Maharashtra, India's second most populous state whose official language is Marathi. The state attracts a large number of out-of-state migrants and the distribution of population by mother tongue confirms the above fact. In Maharashtra, while 76 percent of population reported their mother tongue to be Marathi in 1971, four decades later, in 2011, only 69 percent of the population reported their mother tongue to be Marathi. It is likely that the share of the population whose mother tongue is Marathi will decline even more in the decade 2011-21. In 2011, the probability of two people drawn at random being able to have a conversation in their mother tongue was 0.5 in Maharashtra. What does this mean? It implies that if you draw two people at random in Maharashtra, with 50 percent probability they share the same mother tongue.

In general, within a state, the probability of two individuals having the same mother tongues is higher in rural areas than in urban areas. This should not come as a surprise since urban areas attract out-of-state migrants. If out-of-state migrants contribute to the language diversity of a region, then cities should be more diverse than the state. In other words, the probability of two people having a conversation in their mother tongue should be lower in a city as compared

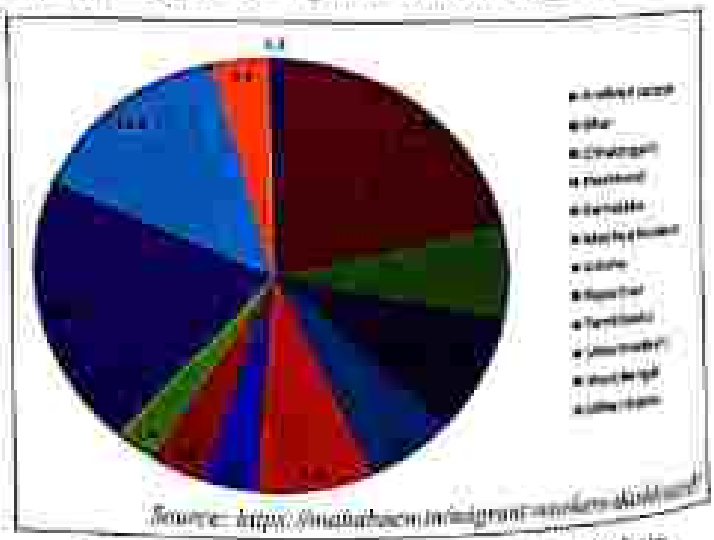
S Chandrasekhar is Professor, Indira Gandhi Institute of Development Research, Mumbai. Email: chandra@igidr.ac.in
Leena Bhattacharya is Research Scholar, Indira Gandhi Institute of Development Research, Mumbai.

to a state. This probability varies across India's larger cities. The probability of two individuals having the same mother tongues is as low as 0.24 in Mumbai and 0.26 in Bangalore, reflecting the diversity of mother tongues in these cities. In a few other Indian cities it is as follows: Surat 0.4, Hyderabad 0.38, Kolkata 0.45, Ahmedabad 0.59 and Chennai 0.63.

The linguistic heterogeneity of the cities is typically ignored by the respective state governments. Consider an inter-state migrant worker living in Mumbai and not familiar with Marathi or in Chennai and not knowing Tamil. Most documentation and paperwork in the Indian states are in the official language of the state or English. Migrants not conversant with the official language of the state, where they are working, face problems in navigating through the paperwork.

For instance, migrants who have worked for 90 days in construction work are eligible to be registered under the Building and Other Construction Worker's (BOCW) Act. Registered workers are eligible for social security benefits, they get coverage for health and accidents, and their children get financial support for education. Consider the case of Maharashtra. The problem is that the documents in the website of the Maharashtra BOCW Welfare Board are in Marathi and English. Can language prove to be a barrier to registration and availing of benefits? Possibly yes, since a large proportion of migrants do not speak or read Marathi. Some basic information on inter-state migrant workers is available on Maharashtra's BOCW Welfare Board website. Over 54 percent of workers are from Bihar, Uttar Pradesh and West Bengal (Figure 1). Imagine how even a literate worker from Bihar, Uttar Pradesh or West Bengal but not comfortable with English or Marathi, will fill a self-declaration form required for BOCW registration. While the distribution of intra-state migrant workers engaged in other industries could be different, the fact is that they are unlikely to be proficient in Marathi. We are just offering the case of Maharashtra as an example. This is true in case of other states as well.

Advances in natural language processing in Indian languages allow real time translation of forms filled in any language to a language of choice. While the overall objective is not to require that all government business in a state be conducted in multiple languages, it is possible to permit the interface of the citizen with the state in multiple languages. Such an inclusive policy can ensure that language is not a barrier and hence reduce the non-monetary costs of internal migration. It should be made mandatory to make available the paperwork and documents in every state at least in all the scheduled languages of India if not in all the scheduled and non-scheduled languages of India. Today, there are 22 scheduled languages listed under the 8th Schedule of the Constitution of India. Although inclusion of languages did not give these languages any added benefits, it gives the speakers of these languages a sense of psychological security and sense of being recognized.



Source: https://mahabocw.in/migrant-workers-dashboard/

Figure 1: Distribution of Inter-State Workers Registered with Maharashtra BOCW Welfare Board

Among the Indian states, in terms of stated intentions, West Bengal appears to be sensitive to the issue of language diversity. Section 3B of West Bengal Official Language (Second Amendment) Act, 2012 provides for "Use of Urdu Language, Hindi Language, Santhali Language, Oriya Language and Punjabi Language in rules and regulations". This provision is applicable in districts or sub-division or block or municipality, where the population of Urdu, Hindi, Santhali, Oriya and Punjabi-speaking people exceeds ten percent as a whole or part of the district like sub-division or block. What this would ensure is that rules, regulations, notifications, government advertisements, and important signposts are available in multiple languages. A little known piece of trivia is that among all Indian states, West Bengal has the maximum number of official languages.

While some states have taken cognisance of the language diversity, the judiciary has limited scope in terms of accepting language diversity. Article 348 (1) of Constitution of India, requires the proceedings of the Supreme Court and High Courts to be conducted in English. In recent years, the Supreme Court has recognised and acknowledged the language barriers faced by the individuals in accessing the Court judgements, which were solely documented in English. In 2019, the Supreme Court of India translated 100 important judgements into regional languages for the benefit of those who do not know English. The translation of judgements into regional language marks the beginning of a compromise on the exclusivity of English in Indian courts. Making translation of judgements is important given that the Supreme Court of India has passed significant orders relating to one nation one ration card and effective implementation of the BOCW Act.

Needless to say, language can be a barrier to children of migrant workers. The medium of instruction in government schools is typically the official language of the state. Language barriers could pose as a deterrent to the child who might refrain from getting enrolled in a school in the destination state. An unfamiliar medium of instruction will pose a barrier for children of inter-state migrants. For instance, consider a child from a household which migrated from Jharkhand or Bihar to Tamil Nadu or Karnataka or Maharashtra will face an uphill task in the school. A further complication is that in recent years some states are making the official language of the state a compulsory subject in government and private schools. This policy too imposes a cost on children from migrant households, irrespective of whether they are rich or poor. India's National Education Policy (NEP) 2020 flags these children as being at higher risk of dropout from schools. This is despite specific provisions in the Right of Children to Free and Compulsory Education Act, 2009 aimed at ensuring that risk of dropout is minimised. The NEP 2020 calls for alternative and innovative education centres for

ensuring that children of migrant workers who drop out are brought back to schools. What is required is for source and destination state governments to work together by ensuring availability of textbooks in the appropriate language. Civil society organisations are active in arranging for volunteers who teach children of migrant workers in their mother tongue.

What might be a silver lining in the story is the clear shift towards children being enrolled in English medium schools in both rural and urban India. This shift is evident from the National Sample Survey Organisation's Survey of Education conducted in 2007-08 and 2017-18. Children enrolled in English medium school might find it easier to manoeuver through the challenges that are otherwise faced by the children from migrant families. Recent developments suggest that many state governments including Uttar Pradesh and Andhra Pradesh have recognised the emerging realities and sought to convert the medium of instruction in many government schools to English. Data from the Eighth All India School Education Survey too shows an increase in the number of schools with two or more mediums of instruction. Today, among those aged 6-14 and 15-29 years, 34 per cent and 41 per cent are respectively bilingual. All facts considered together, Hindi and English are likely to emerge as the link languages within a multilingual India. ❑

Reference

1. Leena Bhattacharya and S Chandrasekhar (2019) "India's Search for Link Language and Progress towards Bilingualism", WP-2020-015, IGIDR, Mumbai Available: http://www.igidr.ac.in/pdf/publication/WP-2020-015.pdf

Enabling Policies

Deepa Palaniappan

Public policy shifting toward social model of disability is the new way forward for building disability-inclusive societies. A disability-inclusive society will have public policies that are not merely accommodative of persons with disabilities but rather, they celebrate and welcome all individual differences, while being always sensitive towards the entire spectrum of human differences. This paper outlines contemporary policy scenario and a way forward for our country to march towards a truly inclusive society.

Persons with disabilities historically were looked down upon as objects of pity, ridicule or recipients of charity[1]. For instance, being born with disability or a mother giving birth to a child with disability was treated as bad karma in India, as an outcome of one's past actions and sins[2]. Past few decades, there had been considerable shift in how disability is approached and viewed upon. We are right in the midst of a historic shift where social policies are moving towards a rights-based understanding of disability and interventions are gradually moving away from being steered by charity or pity.

Seen in contemporary trend of community-based social movements, it is probably an intuitive understanding to place disability as yet another field that opens up easily to be placed within the rights framework. Nevertheless, understanding disability within a rights framework is not as intuitive and free-flowing as it might seem at first glance. It is a process that would unsettle and expose our own mis-beliefs and attitudinal barriers hidden away beneath layers of charity, pity, revulsion, and fear. How disability is understood has far-reaching implications on policies as well as other interventions.

Various attempts have been made to understand disability through theoretical models, classification schemes and even different forms of measurement. How disability is understood has immediate impact upon policy initiatives, impending environmental design and even attitudes of people in general. Disability scholars have consistently emphasised upon the need to understand disability in the right sense, before embarking on intervention measures[3].

Social Model Vs Medical Model

Within disability writings, it had been a common practice to describe approaches to disability using models, most commonly used approach is the Social Model Vs Medical Model distinction[4]. The medical view of disability has been the dominant mode of explaining disability since the early 1900s. The focus is on the bodily abnormalities and the dysfunctions caused thereby. It is rightly referred to as a 'personal tragedies' model, because the individual is regarded as a victim, and as someone who is in a perpetual need of 'cure' and completely dependent on others[5].

Medical Model of disability can be explained as an individual tragedy approach to disability, where a

The author is State Disability Consultant for Bihar State Rural Livelihoods Mission. Email: deepa.palaniappan@gmail.com

person's disability and limitations to participating in social, economic political life, is seen as a tragic but unavoidable outcome of his or her own bodily impairment. Disability is understood as an individual bodily deviance, and individuals with disabilities are seen as people with deformities, 'abnormal'. It had been this approach to disability that had been prevalent in policy frameworks as well as civil society engagements with disability.

Disability rights activists and scholars have critiqued medical model of disability and raised concern against viewing disability as a personal tragedy. This critique against medical model, moving the perception away from bodily limitation to societal discrimination is defined as Social Model of disability[6].

Shift in Policy Trend

Social model of disability contributed to a landmark shift in the way disability was seen and perceived not just by the society, but by persons with disabilities themselves. Indeed, this normative shift marks an important phase for disability related policies and development practices globally because UN Convention for the Rights of Persons with Disabilities embraces this critique of medical model, building upon a Social model of disability put forward by disability rights scholars such as Mike Oliver (1983), where society and barriers were seen as causing disability, rather than an individual's body or the limitations within. This approach is to look at disability as caused externally by barriers (attitudinal or environmental or cultural) and has very little to do with physical limitations. This is the current global policy trend in disability and hence it was important to set this context clearly.

Disability is understood as an individual bodily deviance, and individuals with disabilities are seen as people with deformities, 'abnormal'. It had been this approach to disability that had been prevalent in policy frameworks as well as civil society engagements with disability.

Global Action

International action on disability was stimulated through the declaration of the International Year of Disabled Persons in 1981[7] and later the International Decade of the Disabled which began from 1983. This marked a landmark in internationalisation of disability policy in India, and the

National Education Policy 2020

EQUITABLE AND INCLUSIVE EDUCATION

- Equal opportunities to Children With Special Needs (CWSN) or Divyang
- Separate strategies for focused attention on reducing the social category gaps in school education

immediate impact of the IYDP (International Year of Disabled Persons) and the International Decade was visible in many countries including India.

UN Convention for the Rights of Persons with Disabilities (UNCRPD)

The Convention on the Rights of Persons with Disabilities (2006)[8] which had been the first ever legally binding disability specific human rights convention, adopted by the United Nations outlines disability as resulting from "the interaction between persons with impairments and attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others[9]." And elsewhere within the CRPD documentation, there is an explanation that, "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others." The UNCRPD in many ways marks a shift from a medical model to social model of disability.

UN Convention for the Rights of Persons with Disabilities has undoubtedly marked a shift in disability policy framework[10]. Across many countries, legislation was begun to be drafted where disability question was placed within human rights context instead of charity or welfare approach[11].

Evolution of Disability Policy in India

In India, much of the 1970s and early 1980s witnessed a solidification of disability as a social category[12], while the concept itself continued to be located within a social work frame. This is also the period during which institutional structures (special schools, National Institutes) and NGOs built specifically around the theme of disability (albeit mostly on a specific impairment) came in to place. The 1980s was also the beginning of an International thematic on the disability question in India. 1981 was declared as the International Year of Disabled Persons (IYDP) by the United Nations. In India, a National Committee on the International Year of Disabled Persons is set up as per the UN guidelines. Persons with Disabilities Act 1995 had an entire range of structural provisions but there was no open consideration within this legislation for disability rights perspective. It was mostly welfare-oriented, dealing with various provisions and state schemes which were of distributive nature.

Rights of Persons with Disabilities Act 2016

RPD Act 2016[13] replaced the PWD Act 1995, and it is in accordance with the obligations to UNCRPD, to which India is a signatory. RPD Act was enacted on December 12, 2016 and came in to force from April 19, 2017. RPD Act recognises disability as a fluid and shifting and incorporates measures towards a full acceptance of people with disabilities, ensuring their full participation and inclusion in the society.

Twin-Track Approach to Disability-Inclusive Policies

The philosophy encompassed in twin-track approach to disability inclusion is that, in addition to disability-specific, targeted policies and institutions, there needs to be disability-centric approach in all existing policies and development measures. This is the frame of reference through which we have set out to understand contemporary inclusion measures as well as a way-forward for building a better inclusive society.

Source : https://dfat.gov.au/about-us/publications/Documents/twin-track-approach

Track 1: Targeted, Disability-Specific Policies and Measures

Targeted, disability-specific measures are those that are created exclusively for the empowerment and inclusion of persons with disabilities. RPD Act 2016

(as also the PWD Act 1995 which it replaced) is an example of disability-specific targeted legislation. In India, there are also institutional bodies that are exclusively created for the purpose of disability inclusion.

National Institutes and Statutory Bodies

1. Department for the Empowerment of Persons with Disabilities (DEoPwD) under Ministry of Social Justice and Empowerment
2. National Trust for the Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities
3. National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)
4. National Institute for the Empowerment of Persons with Intellectual Disabilities (NIEPID)
5. Rehabilitation Council of India (RCI)
6. Composite Regional Centers for Persons with Disabilities (CRCs)
7. Chief (and State) Commissioners for Persons with Disabilities
8. Ali Yavar Jung National Institute of Speech and Hearing Disabilities
9. Pt. Deendayal Upadhyaya National Institute for Persons with Physical Disabilities
10. National Institute for the Em-powerment of Persons with Visual Disabilities
11. Artificial Limbs Manufacturing Corporation of India (ALIMCO)
12. National Handicapped Finance and Development Corporation (NHFDC)
13. District Disability Rehabilitation Centre (DDRC)
14. Indian Sign Language Research and Training Centre (ISLRTC)

Disability-specific targeted measures also encompasses schemes such as ADIP Scheme of Assistance to Disabled Persons for Purchase/Fitting of Aids and Appliances (ADIP Scheme), Braille Press Scheme and DDRC, Deendayal Disabled Rehabilitation Scheme (DDRS), to name a few.

While such targeted, disability-specific institutions and schemes are important to a great extent, especially in the early stages of a country's path towards disability-inclusive public policy environment. Yet, to build a truly inclusive society our policies need to be centered on the second track of the 'Twin-Track' approach, which is Mainstreaming Disability Inclusion in all existing policies and measures. This is more interesting from an inclusive society perspective because it denotes that even those institutions and policies that are not directly addressing the concerns of persons with disabilities are being inclusive. This indicates a spirit of inclusion and eagerness towards building a truly disability-inclusive society.

> The 1980s was also the beginning of an International thematic on the disability question in India. 1981 was declared as the International Year of Disabled Persons (IYDP) by the United Nations.

Track 2: Mainstreaming Disability

Contemporary Policies and Measures towards Mainstreaming Disability Inclusion

The following section outlines some of the best practices in mainstreaming disability inclusion in policy and institutional frameworks that were structurally intended for 'general population'. While ideally general population should encapsulate all segments of the society, most such policies and practices had so far been rarely inclusive of persons with disabilities.

Mainstreaming Disability in Education

One of the first sectors to build a mainstream approach had been education sector, for instance, Sarva Shiksa Abhiyan (SSA) launched in 2001 was more pronounced as far as integrating disabled children were concerned. It provided for a cash grant of up to Rs. 1200 per child per year, evolving plans at the district level for students with disabilities and also involvement of resource institutions. The SSA also had a zero-rejection policy implying that no child with disability could be denied enrolment[9]. In addition, the Action Plan for Inclusive Education of Children and Youth with Disabilities (IECYD) 2005 has few provisions to effectively achieve meaningful inclusion of children with disabilities. There were also other measures such as 'Teachers Preparation in Special Education (TEPSE)' and Higher Education for Persons with Special Needs (Persons with Disabilities) (HEPSN) 1999-2000 that were primarily launched as a means to develop disabled-friendly curriculum and structure targeting teachers in mainstream education. The newly launched National Education Policy 2020 also aims to ensure children with disabilities will have equal opportunities for

> RBI's provisions for disability-inclusive banking practices have been well utilised by persons with disabilities across India to access banking services. RBI had also been consistently responsive to the demands of disability rights community, in a way being a trendsetter in mainstreaming disability inclusion within an organisation's existing policies and frameworks.

participation in mainstream educational system. The policy intrinsically recognises RPD Act 2016 within its ambit.

Accessible Sanitation Measures

The Department of Drinking Water and Sanitation, Ministry of Jal Shakti, Swachh Bharat Mission, created a set of guidelines for accessible Household Sanitation for Persons with Disabilities (December 2015)[15]. And the Ministry also broadened the scope of Government assistance for household toilets to include households having persons with disabilities[16]. Chhattisgarh state launched an "Inclusive and Accessible Sanitation Policy for Persons with Disabilities and transgender persons[17]". As of September 2019, 12 lakh accessible individual household toilets had been constructed across India[18].

Accessible Banking

On November 9, 2017 RBI released a landmark guideline outlining 'Banking Facility for Senior Citizens and Differently Abled Persons', which instructed banks to put in place inclusive mechanisms such as priority service and dedicated counters for elderly and persons with disabilities and door step banking for persons with disabilities and elderly persons unable to reach banks. Master Circular dated July 1, 2015; outlines facilities provided to sick/old/incapacitated persons vide Paragraph 9, specifically in the matter of accessible Customer Service in Banks. When complaints rose on banks not cooperating with the above order, Statement on Developmental and Regulatory Policies, Reserve Bank of India issued by the Governor on October 4, 2017[19] issued the following warning that,

"Banking Facility for Senior Citizens and Differently Abled Persons - It has been reported that banks are discouraging or turning away senior citizens and differently abled persons from availing banking facilities in branches. Notwithstanding the need to push digital transactions and use of ATMs, it is imperative to be sensitive to the requirements of senior citizens and differently abled persons. It has been decided to instruct banks to put in place explicit mechanisms for meeting the needs of such persons so that they do not feel marginalised. Ombudsmen will also be advised to pay heed to complaints in this context".

In addition, RBI had released a number of other disability-inclusive guidelines such as - RBI Notification dated 19.11.2007 on Operation of Bank Accounts by Guardians appointed under National Trust Act, for Mental disabilities and RBI Notification dated 04.06.2008 on Banking Facilities to the Visually Challenged.

RBI's provisions for disability-inclusive banking practices have been well utilised by persons with disabilities across India to access banking services. RBI had also been consistently responsive to the demands of disability rights community, in a way being a trendsetter in mainstreaming disability inclusion within an organisation's existing policies and frameworks.

Mainstreaming Disability in Poverty Alleviation Frameworks: National Rural Livelihood Mission

One of the most impactful disability mainstreaming efforts by Indian Government had been within National Rural Livelihood Mission. NRLM Social Inclusion Protocols, dated February 23, 2016 outlines a priority and early inclusion of the poorest of the poor and other vulnerable sections of community including persons with disabilities in rural poor communities. State Rural Livelihood Missions such as

Overall, a truly disability-inclusive society is one where all the policies, development initiatives are inclusive of all marginalised sections of the society.

KUDUMBASHREE (Kerala) and JEEViKA (Bihar) have implemented disability-inclusive measures that have created disability mainstreaming pathways within poverty alleviation programmes in India.

Mainstreaming Disability in Development: The Way Forward

Initial steps towards mainstreaming disability inclusion within existing policies and measures for any department:

- To develop Disability Inclusion Policy or strategy paper for the whole organisation. (Example- Bihar State Rural Livelihood Mission, Disability Inclusive Guideline, dated August 13, 2020).
- All the existing themes and departments of the project should encompass disability-inclusive components.
- To include disability-inclusive indicator components in Monitoring and Evaluation frameworks such as monthly/Quarterly/Half-yearly/Annual reporting formats.
- Disability indicators should be part of Annual Action and Review planning.
- Intra-departmental, thematic and grade-oriented review processes should have disability indicator queries.
- All staffs should be trained on disability rights framework and inclusion, best-practice measures.
- Recruitment and HR policies to be in line with RPD Act 2016.
- Buildings, departmental websites, internal/external communication measures should incorporate accessi-bility standards and be in sync with RPD Act 2016.
- To include components of disability inclusion within to Annual planning, budget allocation, HR policy, Monitoring and Evaluation, data collection measures, communication, trainings and documentation. Only then could an organisation be deemed to have effectively incorporated disability inclusion within their implementation programs.

Overall, a truly disability-inclusive society is one where all the policies, development initiatives are inclusive of all marginalised sections of the society. Mainstreaming disability inclusion is a constructive way to proceed forward with this goal. ❑

References

1. Oliver, M. (2009). Understanding disability from theory to practice 2nd edn. England: Palgrave Macmillan.
2. Rana, R. S., Kumar, Y., & Gupta, P. Understanding Disability across Different Belief Systems.Imperial Journal of Interdisciplinary Research, 2(9) 2016. Available at: https://www.researchgate.net/profile/Randhir_Rana/publication/333863115_Understanding_Disability_across_Different_Belief_Systems/links/5d09e130458515ca1a706518/Understanding-Disability-across-Different-Belief-Systems.pdf
3. Drake, Robert F. Understanding disability policies. London: Macmillan, 1999.
4. Hingole, J. A., & Hodge, S. (2016). Disability discourse: Overview and critiques of the medical and social models. Quest, 68(2), 193-206.
5. Shakespeare, T. (2006). The social model of disability. The disability studies reader, 2, 197-204.
6. Oliver, M. 2013. "The Social Model of Disability: Thirty Years on." Disability & Society 28 (7): 1024-1026.
7. Mabin, R. (1981). The International Year of Disabled Persons and The World Health Organization.
8. Office of the United Nations High Commissioner for Human Rights, Committee on the UN *Convention on the Rights of Persons with Disabilities*. Statement on Article 14 of the Convention on the Rights of Persons with Disabilities. Available at: http://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=15183&LangID=E#sthash.CsCvOCiG.dpuf (accessed Oct 7, 2020).
9. Szmukler, G. (2015). UN CRPD: equal recognition before the law. *The Lancet Psychiatry*, 2(1), e29.
10. Cullen, A. M., & Castillon-Zaton, A. (2017). Nothing about us without us: disabled people determining their human rights through the UNCRPD.
11. Mittal, Nachiketa. UNCRPD to RPD Act, 2016: A Decade of Disabled-Friendly Judicial Activism (December 18, 2017). TISS Journal of Disability Studies and Policy Research, Vol. 1 Issue I, December 2017.
12. Ghosh, N. (2012). Disabled definitions, impaired policies: Reflections on limits of dominant concepts of disability. Institute of Development Studies.
13. The Rights of Persons with Disability Act. 2016. [Last accessed on 2020 Dec 28]. Available from: http://legislative.gov.in/actsofparliamentfromtheyear/rights-persons-disabilities-act-2016
14. Gulyani, R. (2017). Educational Policies in India with Special Reference to Children with Disabilities. Indian Anthropologist, 47(2), 35-51. Retrieved October 5, 2020, from https://www.jstor.org/stable/26494030
15. MDWS, WaterAid. (2015) The Handbook on Accessible Household Sanitation for Persons with Disabilities (PwDs). WaterAid: India. http://www.mdws.gov.in/handbook-accessible-householdsanitation-persons-disabilities-pwds
16. Das, Siddhartha; Gupta, Pragya; Stephens, Shyni D. (2015): Everyone everywhere: accessible household sanitation for persons with disabilities. Loughborough University. Conference contribution. https://hdl.handle.net/2134/31344
17. https://www.sbmgcg.in/backend_panels/downloads/1550468163Chhattisgarh%20Sbm%20Inclusive%20WASH%20Policy%20draft.pdf
18. http://trial-swachhsangraha.gov.in/sites/default/files/Strategy%20for%20accessible%20sanitation_ENG_Final.pdf
19. https://rbi.org.in//Scripts/BS_CircularIndexDisplay.aspx?Id=11163

Invisible Disabilities

Dr Dharini Mishra

Invisible conditions are more difficult to detect by medical doctors. Many such conditions go undiagnosed or are misdiagnosed. The stigma surrounding a chronic disease or disorder and the realisation that a seemingly healthy child is having a condition which affects functional efficiency throughout life, may in many cases compel parents to conceal the disability in social settings.

When we use the term "disability", many people have a mental picture of persons with assistive devices such as wheelchairs, canes, hearing aids or using sign language- or also people with bodily features which appear different or distorted. However, disabilities also include a number of other conditions that are typically not apparent to onlookers. Quoting figures from the USA, it is estimated that 1 in every 10 persons has an invisible or hidden disability which prevents a person from adjusting to social rules and responsibilities. The statistics for developing countries may not be very different, if not worse. Hidden disabilities have some unique psychosocial issues which make conditions all the more complex and debilitating.

Consider this, a mother with autistic child having a meltdown due to sensory reasons is told that she is not sufficiently competent as a mother since her child appears to be undisciplined and out of control. Similarly, children with learning disabilities are perpetually scolded for being lazy and not putting in their best efforts in academics.

Not only do people with invisible or less visible disabilities have to make day-to-day adjustments to exist in the world around them, but they

The author is PhD in Human Development and Childhood studies who works with children with Autism and Communication disabilities in providing Special Education, Augmented and alternative Communication strategies. She is involved in developing new technology-based solutions for autistic children. A former civil servant, she took voluntary retirement after 25 years of service in the Government of India. Email: mishradharini@gmail.com

All images are for representational purpose only.

must also navigate misconceptions about their condition—including the idea that they are incompetent, lazy or rude or disobedient or unresponsive. Thus the problem is that such people look normal and are thus expected to perform with the same competence and efficiency which is at par with their physique and appearance.

Common Invisible Disabilities

Some of the most common invisible disabilities in which people appear healthy and in control of their lives and bodies are:

a. Minimal brain injury and developmental cognitive disorders which interfere with memory, motor skills planning, organizational abilities, cognition and communication. Children may find it difficult to perform higher level of academics, planning, and as adults they may make 'mistakes' in tasks which involve precision and multi-step processes such as digital transactions. Outwardly, they appear clumsy, distracted and disorganised.

> **Not only do people with invisible or less-visible disabilities have to make day-to-day adjustments to exist in the world around them, but they must also navigate misconceptions about their condition— including the idea that they are incompetent, lazy or rude or disobedient or unresponsive.**

b. Learning Disabilities: Neurological disorders resulting in impairment in reading (dyslexia) writing (dysgraphia) or mathematics (dyscalculia), commonly associated with Attention Deficit and Hyperactivity disorder. Appearance: Lazy, distracted, intentionally avoiding work.

c. Autism Spectrum Disorders: Neurodevelopment disorders beginning early in childhood and severely affecting the ability to communicate, learn social skills and social interaction, associated with rigid and repetitive behaviours. Appearance: Rude, undisciplined, fussy, stubborn, avoiding instructions, and not cooperating.

d. Chronic diseases such as certain renal disorders as also Fibromyalgia which is a chronic rheumatic condition that causes widespread pain and throughout the soft tissue in the body, accompanied by fatigue. Appearance: Lazy and constantly avoiding work.

e. Depression: Mental health and mood disorders involving persistent feelings of sadness, hopelessness and loss of interest strong enough to affect normal functioning, commonly associated with anxiety disorders causing persistent feelings of worry and fear. Outwardly appearance: Being unnecessarily sensitive, exerting oneself to become cheerful and trying to adjust.

f. Sensory Disorders: Children who have sensory issues may have an aversion to anything that triggers their senses, such

as light, sound, touch, taste, or smell. Common symptoms of sensory processing issues may include avoidance or hyperactivity. Appearance: Too fussy, not cooperating, need for stern discipline.

Medical, Social and Psychological Challenges

Detection and Diagnosis

People might experience symptoms of conditions that qualify as disabilities, but they do not realise that they are experiencing something more than just normal variation. For example, a student who has a learning disability might experience high levels of frustration and poor performance in school, but parents and teachers assume that he or she is a low achiever (Licht, 1983). Someone who recently developed a hearing impairment might ask people to repeat sentences or to speak louder, but does not connect that experience to having a disability. That person might just avoid social settings and conversations or get frustrated thinking the environment was making hearing difficult.

Hidden disabilities are difficult to detect by parents, caregivers and teachers. Precious time during critical developmental period is wasted in trying to discipline and correct the child's apparent errant behaviour. Invisible conditions are also more difficult to detect by medical doctors. Many such conditions go undiagnosed or are misdiagnosed.

Research shows that the burden of concealing a disability creates strain in social and work situations that might negatively affect health and well-being. Concealing also results in low self-esteem and related psychological personality problems. In contrast, disclosure relieves the strain of hiding the condition and increases the likelihood that the person will find and develop a social support network with others who might have similar conditions or experiences.

Research has reported that the process of being diagnosed with a learning disability often involves collecting multiple conflicting diagnoses by healthcare providers over a long period of time. Also, the clinical criteria for some conditions generally also might change over time, as new research finding come in, making diagnosis difficult.

Stigma

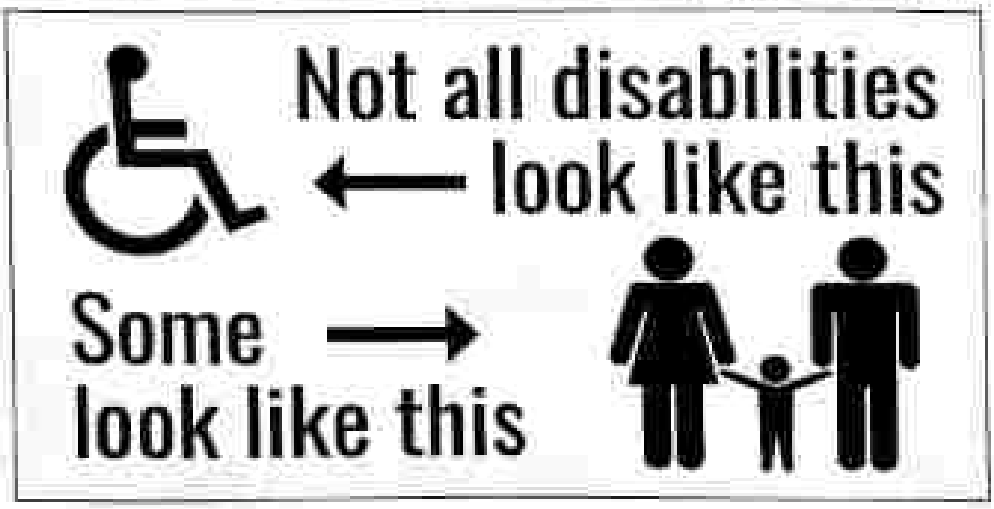
The stigma surrounding a chronic disease or disorder and the realisation that a seemingly healthy child is having a condition which affects functional efficiency throughout life, may in many cases compel parents to conceal the disability in social settings. Research shows that the burden of concealing a disability creates strain in social and work situations that might negatively affect health and well-being (Chaudoir & Quinn, 2010). Concealing also results in low self-esteem and related psychological personality problems. In contrast, disclosure relieves the strain of hiding the condition and increases the likelihood that the person will find and develop a social support network with others who might have similar conditions or experiences. However, social attitudes need to change to enable disclosure. There are a number of functional reasons why people with invisible disabilities might not tell others.

First, even if protected by law from overt discrimination, they still face potential prejudice or negative evaluations from others. Research suggests that there is a social stigma attached to having a disability, especially for psychological conditions (Stone & Colella, 1996). Some people with invisible disabilities might be willing to conceal their conditions and forego legal accommodations to avoid being treated differently or negatively by others.

Second, disclosure can raise questions about whether the disability actually exists or the individual is "faking it". When someone who "looks normal" claims to have a disability and requests special accommodations/ provisions, observers might question whether a real disability is involved. Instead, others might assume the person is only trying to gain special privileges (Colella, 2008). In addition to dealing with the potential stigma associated with having a disability, persons with invisible disabilities risk the additional stigma of being viewed as someone who is falsely seeking personal gain.

Psychological Issues of Self-esteem and Self-confidence

Individuals who have (or think they have) invisible disabilities must carefully weigh the potential benefit of avoiding social stigma by not



disclosing against the costs to health, well-being, and performance. The current research cannot prescribe one clear way for persons with invisible disabilities to manage their identities and the disclosure process across all social and work situations. Some situations involve more risk of stigma than others. Some situations require more effortful ways to hide the disability than others. Also, some work and school tasks are more relevant to certain disabilities than others.

Efforts toward Rehabilitation and Acceptance

Today, India has more than 10 million children with autism, 10 million people with epilepsy, more than 150 million people with a need of intervention for mental illness, and many more with varied physical disabilities, living in relatively large cities. But 71% of children with disabilities are living in rural areas, which make getting intervention an even more difficult process for them. While the Indian healthcare infrastructure is no doubt growing year by year, there is still a lack of specialists to deal with mental and physical disorders. According to a World Economic Forum report, India currently needs 11,000 psychiatrists and 54,000 mental health professionals. Mental health workforce in India (per 100,000 population) include psychiatrists (0.3), nurses (0.12), psychologists (0.07) and social workers (0.07). According to WHO, India spends around 0.06% of its health budget on mental health.

Creating Awareness and Infrastructure

The first step towards rehabilitation is to create awareness; that there indeed exist certain lifelong debilitating disorders which require special assistance and provisions from the community. The Rights for Persons with Disabilities Act, 2016 is a step toward such awareness. Apart from covering 21 categories of disabilities from the previous 7 categories under the 1995 Act, this new Act also includes some of the seemingly invisible conditions such as autism and learning disabilities within its ambit. A visionary plan of action at the State level is important to give a sense of direction to professionals, planners and fields level workers. This is no easy task since each disorder has its own unique problems and unique means of

The first step towards rehabilitation is to create awareness; that there indeed exist certain lifelong debilitating disorders which require special assistance and provisions from the community. The Rights for Persons with Disabilities Act, 2016 is a step toward such awareness.

capacity building and training needs for therapist and parents. The need to create a trained human resource of professionals, special educators and therapists cannot be undermined. The Rehabilitation Council of India has an important and difficult task to implement considering the non-uniformity in training requirements of each category of disorders.

The Special Needs of Childhood Developmental Disabilities

There are some universal rules which can be followed in rehabilitation of childhood developmental disorders—early detection, early intervention, and training and empowering parents/caregivers. Early intervention can work wonders, when brain and body cells are most malliable and receptive to training and therapy. Hence the need for early detection at the primary health centre level, and continuous monitoring through home visits by trained healthcare workers. There is a need to provide parents with professional counselling when their child is diagnosed with a disability. The sooner we help a parent bridge the gap between denial and acceptance of a child's disability, the better they will be able to help their child in the future. Counselling of parents in the potential strengths of a special needs child at an early age can go a long way in maximising functional adjustment to educational and vocational development required to fulfil adult

social responsibilities. Networking and connecting parents has been found to be extremely beneficial.

Special Education and Vocational Training - Focus on the Strengths

Once diagnosed, and accepted, there is no looking back. The person with disability thereafter can be trained and rehabilitated in many ways by following the golden rule of focusing on the person's strengths. Children with learning disabilities make amazing progress with alternative teaching practices. Similarly, children with autism move ahead in life using alternative and augmented communication techniques. These techniques not only help in life skills, but also help reduce behavior-related issues such as meltdowns and temper tantrums, since the child is able to communicate his or her needs, requirements, feelings and fears. A confident and accepted child who can convey his problems can fit in very well in any kind of social situation.

Need for Innovation, Use of Technology and AI

The application of Artificial Intelligence tools and technology in detecting disabilities which are not apparent to onlookers, can be a game changer in the case of early detection. Medical professionals are increasingly looking to articulate intelligence tools in providing a clearer diagnosis at a very early age. Not only that, applications based on AI are changing the way therapy can be provided to certain disorders and disabilities. Most used in the case of autistic children, apps and devices are being tailored to suit the special and unique needs of a young child. Applications in handheld smartphones are assisting parents in providing, augmenting and assisting the communication requirements of a child by providing visuals, sounds and situations. Not only that, such apps are reducing the expense and resource burden on the family to undergo expensive and exclusive therapies on a daily basis.

Early intervention can work wonders, when brain and body cells are most malleable and receptive to training and therapy. There is a need to provide parents with professional counselling when their child is diagnosed with a disability. The sooner we help a parent bridge the gap between denial and acceptance of a child's disability, the better they will be able to help their child in the future. Counselling of parents in the potential strengths of a special needs child at an early age can go a long way in maximising functional adjustment to educational and vocational development required to fulfil adult social responsibilities.

Inclusion and Social Acceptance

There has to be a conscious effort made by the government sector and society together to become more inclusive towards everyone living with a disorder or disability. The process starts with the family and the classroom, both building blocks of society. With the advent of global information in every household and best practices being shared through online mechanisms, prejudices and stigma are surely on their way out. Once parents are accepting, empowered and connected, they will be able to help their child in the future. Most importantly, people living with disorders and disabilities need to be encouraged to share their story with those around them so that people can better understand how to support them. India has a great vibrant culture. It already has the necessary social compassion towards the deserving. Awareness and sensitisation of disabilities which are not apparent will most certainly result in acceptance and social inclusion. Once minds are open and accepting, and are geared toward achieving educational and life skill goals, the necessary innovations, techniques and therapies will also come forth. It is imperative to start a movement of being consciously inclusive, and looking for solutions, starting today. ❑

References

1. www.invisibleillnessweek.com
2. Paetzold, R., Garcia, M. F., Colella, A., Ren, R., Triana, M., Zarbo, M. (2008). Perceptions of People with Disabilities: When is Accommodation Fair?
3. Licht, B. G. (1983). Cognitive-motivational factors that contribute to the achievement of learning disabled children. Journal of Learning Disabilities, 16
4. Binns and Colella. (1981, as cite in https://www.researchgate.net) A Model of Factors Affecting the Decision of Disabled Individuals in Organizations
5. WHO: Mental Health as a Substance Abuse
6. www.psychologytoday.com/us/blog/the-wide-world-psychology/201506/invisible-disabilities
7. https://www.weforum.org/agenda/2018/12/india-invisible-disabilities-autism-dyspraxia/

Gandhian Paradigm of Indian Villages

M G Basava Raju

For Gandhiji, cooperation was a means for achieving economic equality and the common good for all. Gandhian paradigm promotes welfare of all. This includes development of integrated agriculture, Khadi and Village Industries, sanitation and health, village panchayat, self-reliance, basic education, social harmony, truth and non-violence. He was very much interested in all round development of villages. He envisaged Sarvodaya through Antyodaya; making villages largely self-sufficient units.

Gandhiji incorporated goodness of common people in his speech, writing and action. He wrote about the challenges of practising what one preaches. He had great dreams, for a healthy society, thought of hundred ways to realise his dreams, and make the society a better place to live. Alfred Marshall, the neo-classical economist while speaking about the qualifications needed for an economist said that nearly all founders of modern economics were men of gentle and synthetic temper, touched with the enthusiasm of humanity. They cared little for wealth for themselves; they cared much for its wide diffusion among the people. According to E F Schumacher, Gandhiji would qualify to be an economist; a greater economist than Keynes, and also the greatest people's economist.

Gandhiji realised that one of the important ways of removing poverty in rural areas and improving the quality of life of people was by reconstructing villages from the grassroots level. He took up the cause of farmers and clearly saw the tendency towards urbanisation and the exploitation of villages for the benefits of urban areas and tried to revive the village economy. If villages perish, India will also perish. Hence, Gandhiji emphasized the need of development of villages. India develops in full form when there is rural development. Gandhiji even in the hectic schedule of freedom movement was giving attention to propounding alternatives to the then society.

Gram Swaraj

Gandhiji called self-governance of villages as 'Village Swaraj'. The government of the village should be conducted by the panchayat of five persons annually elected by the village adults, men or women, possessing minimum prescribed qualifications. It is decentralisation of power, and the power is in the hands of the people of village. The village is a complete republic independent of its neighbours for its basic needs, and yet interdependent for many others in which dependence is a necessity. The basic concern of every village is to grow its own food grains, fruits and vegetables, leafy vegetables, pulses, herbal plants and cotton for its clothes. The village should have Gomatha, a reserve for its cattle; recreation and playground for adults and children. If then there is enough land available, the village can grow essential commercial crops.

In the ideal village, there is no provision for harmful plants such as ganja, tobacco, opium and the like. The ideal village should maintain a village theatre, school and public hall. It should have its own waterworks ensuring safe and clean water supply. Education should be made compulsory

The author is Professor of Economics and Director (Rtd.) at Sir M Visvesvaraya P G Centre, and Gandhi Bhavan, University of Mysore. Email: basavaraja.mg@gmail.com

up to the final basic course. As far as possible, every activity should be conducted on the cooperative basis. There should be harmony among the people.

Ideal Village

Gandhiji had pictured to himself an India continually progressing along the lines best suited to country's genius. His concept of ideal village, which consists of about 1000 persons, is organised on the basis of self-reliance and self-sufficiency. "An ideal village of India will be so developed as to lend itself to perfect sanitation. It will have cottages with sufficient light and ventilation built of a material obtainable within a radius of five miles of it. The cottages will have courtyards enabling householders to plant vegetables for domestic use and to house their cattle. The village lanes and streets will be free of all avoidable dust. It will have wells according to its needs and accessible to all. It will have houses of worship for all, also a common meeting place, village common land for grazing its cattle, a cooperative dairy, primary and secondary schools in which industrial education will be central fact, and it will have panchayats to settle disputes. It will produce its own grains, vegetables and fruits; and its own Khadi".

The ideal village will have intellectuals and open-minded people. Those people will not live in dirt and darkness. There will be village poets, village artists, village architects, linguists and research workers.

Basic Education

The education should be aimed at harmonious development of the body, mind and soul of the people. Gandhiji called his scheme of education as 'basic education'. It is about the art of living and creation of productive labor. It is basic and craft-oriented education. Along with vocational training, rural people receive instruction in elementary history, geography, and arithmetic.

Gandhiji called his scheme of education as 'basic education'. It is about the art of living and creation of productive labor. It is basic and craft-oriented education. Along with vocational training, rural people receive instruction in elementary history, geography, and arithmetic.

Craft-centred education is self-supporting in which academic subjects are to be taught through productive activities in the form of organic farming, gardening, rural industries, cooperative cattle farming and the like. Students should learn the principles of self-help, self-reliance, and dignity of labor along with their academic subjects. He desired that the medium of education should be creative labor and not textbooks. The need for job-oriented education is very much needed in rural areas.

Hygiene & Health

According to Gandhiji, attention to individual's health and hygiene is undoubtedly the first step to rural reconstruction. The judicious utilisation of waste keeps the surroundings neat, dirtless and clean. He suggested to convert excreta of animals and people into organic manures. He told that organic manures ever enriches, never impoverishes cultivable land. Also, cleanliness is not only next to godliness, it promotes health of the people. According to him, most of the diseases occur to people on account of insanitation and unhygienic living.

For good health, all that is needed is to live according to the laws of nature in regard to diet, fresh air, exercise, clean surroundings, and a pure heart. He wanted people to rely less on drugs and doctors; and more on nature. He demonstrated about the use of curative herbal plants that grow naturally in the surroundings of the people. The wholesome and balanced diet is of course an integral part of natural cure. He told that the addition of leafy vegetables in their food help them to build-up immune system. They can be free from diseases and lead a healthy life. The people can get different vitamins supplied by leafy vegetables. He had always been in favour of vegeturian food. He did not oppose meat eating, and said that people cannot practise non-violence in full. Also, he did not consider it violence to permit the fish-eater to eat fish.

Antyodaya to Sarvodaya

Gandhiji's Swaraj is the poor man's Swaraj. Under Swaraj, all should fulfill their basic necessities. All people should have enough clothes, enough food including milk and milk products, decent accommodation, healthcare and cultural facilities. He advocated fixation of minimum wages. The minimum wages must ensure to all workers—a reasonably balanced and adequate nutritive food; minimum clothing needs and better accommodation and ordinary comforts. In a village organised on the principle of Swaraj, everybody shall occupy the same status.

The Sarvodaya is a comprehensive concept, which includes all aspects of rural life and activity in the sphere of sustainable rural development. The rural development does not only involve agriculture development. It has to include all productive activities of primary sector, secondary sector, and tertiary sector. His idea for rural development is known as Samagra Grama Seva. It includes integrated and multiple cropping organic agriculture, animal husbandry, forestry, fisheries, basic education, adult education, development of weaker sections, empowering of women, education in public health/sanitation/hygiene, social harmony, prohibition, naturopathy, infrastructure development etc. He felt that the society should attain Sarvodaya after the attainment of Antyodaya.

Integrated Agriculture

Gandhiji wanted that agriculture should become a bright and prosperous spot of people. He emphasised the importance of irrigation systems, and organic manures for bumper crops/increased agricultural production. A drive for sinking wells, enlarging and dredging lakes and constructing canals has to be taken up in the villages. No proper manuring

can be done without irrigation; as manure, in the absence of water is harmful. Gandhiji suggested that the farmers should give attention to producing organic manures by using wastes, cattle dung/urine, tree leaves, dead animals etc.

He advised farmers to use organic manures and not to use synthetic fertilizers and pesticides. They are not suitable for the chemistry and biology of the topsoil, which is the mainstay for the growth of the plants. Instead, they work as stimulants/drugs resulting in immediate bumper yields. Paradoxically, in the end they bring about a corresponding degradation of cultivable land.

Cooperation

According to Gandhiji, cooperation is a means for achieving economic equality and the common good for all. People should live in cooperation and should work for the common good. Gandhiji advocated cooperative farming for getting full benefits of agriculture. He told that selected and improved varieties of seeds should be sown by farmers for getting higher agricultural productivity.

Khadi & Village Industries

Gandhiji advocated Khadi and Village Industries (KVIs) for solving the problems of poverty, unemployment and rural backwardness. As the Khadi program progressed, he felt that without the revival of village industries like beekeeping, soap-making, tanning, pottery, carpentry, blacksmithing, oil pressing, handpounding etc., Khadi could not make further progress. The revival of village industries was but an extension of the Khadi effort.

Appropriate Technology

Gandhiji wanted technology to promote not only full employment but also economic growth and social justice. He said, machinery has its place; it has come to stay; but it must not be allowed to displace the necessary human labor. The machinery should subserve the interest of all. Simple tools, instruments and such machinery saves individual labor and lighten the burden of millions of cottages. Any machinery which helps the individual and adds to his efficiency and which man can handle at will without being its slave has a place. Every machine that helps every individual has a place. The individual is one supreme consideration. The saving of labor of the individual should be the object. Every country has to develop its own technology suitable to it needs. Its use must be in the context of a country's conditions and suited to its needs. The views E F Schumacher on technology are in consonance with Gandhiji's views on appropriate technology and he called it as intermediate technology.

Economic Equality

Gandhiji accepted that material things are of real importance but only to some extent. There are three distinct economic conditions and they are—paucity, sufficiency, and surfeit. Gandhiji believed that the economic condition of paucity is undesirable. Surfeit is also not good. The ideal and appropriate economic condition that man could enjoy was one of sufficiency. Schumacher has accepted this and told that the economic progress is good to the point of sufficiency. Beyond that it is evil, destructive, and uneconomic. Gandhiji suggested for the development of KVIs and through them decentralisation for increasing material things to a certain extent, and for improving the economic conditions of the poor.

Sustainable Development

Gandhiji believed that humans should live in harmony with nature. He wanted people to plant trees and add to the forest wealth of the country. Forests exert their influence on climate and reduce extremes of temperatures. They are more important for soil conservation and regulation of moisture. Forests are the source of vast materials needed for industries. House building materials are available from forests. Forests accommodate wildlife. Forests meet the day to day needs of the rural people who depend on the forests for firewood, timber and fodder for them and their animals.

Conclusion

Gandhian paradigm promotes the welfare of all. This includes development of integrated agriculture, KVIs, sanitation and health, village panchayat, self-reliance, basic education, social harmony, truth and non-violence, bread labour, balanced diet, naturopathy. He was very much interested in all round development of villages. While planning for development of villages, he was not just concerned about economic standard of living of people/ quality of life but also emphasised the need of moral compass, peace, justice and freedom for all. His intention was to establish Sarvodaya through Antyodaya, and make villages largely self-sufficient units. In the villages, no one suffers from want of basic needs—food, clothing and housing; everybody gets sufficient work that enables them to make ends meet. □

> The Sarvodaya is a comprehensive concept, which includes all aspects of rural life and activity in the sphere of sustainable rural development. The rural development does not only involve agriculture development. It has to include all productive activities of primary sector, secondary sector, and tertiary sector. Gandhiji's idea for rural development is known as Samagra Grama Seva.

Substance Use: Challenges and Way Forward

Sathhan Singh

In India, various interventions are in practice including the legislative measure to reduce the use of substances but the gaps only highlight that new and more intervention strategies are needed. The system needs an approach that brings together the community and strengthens its collective response towards drug use. Use of technology to increase the efficiency and efficacy of the programmes will expand the boundaries and enhance communication among the legislative, policy makers and people working on the cause.

A joint effort by the Ministry of Social Justice and Empowerment, Government of India and National Drug Dependence Treatment Centre, AIIMS, New Delhi was undertaken to understand the pattern and extent of substance use in India. It was one of a kind initiative to map the estimates of substance use in the entire length and breadth of the country. The findings were released in February 2019.

The research found that alcohol (a psychoactive drug) is most used by Indians. The report further concluded that sixteen crore people (approximately) are consuming alcohol (14.6% of population between 10-75 years). The report further propounds that cannabis and opioids are second in terms of use (2.8% of population) followed by other forms of substance use. The report was the first step in the right direction to understand the need of the country in the area of drug demand reduction.

The report also highlights the major lack of resources to tackle the situation. With over 134 crore people to look after, India has merely close to 10000 trained psychiatrists and clinical psychologists. We have 122 Government-run de-addiction centers, 29 Drug Treatment Centres (DTCs), and 216 Opioid Substitution Therapy (OST) centers. This glaring gap only is being widened with a lot of people getting into substance use. Looking at this gap, India needs to invest in its care services for those who need them and the development of its services by using the allocation of resources optimally.

The recent trivialisation of the issue of drug use in the media doesn't help the cause. Where people working in this field of drug demand reduction such as the Ministry of Health, Social Justice & Empowerment, many NGOs and Community Based Organisations are leaving no stone unturned to demystify and de-stigmatise a substance user, likes of certain sections in the media have clouded that work with insensitive reporting and judgements. The trivialisation of

The author is a communication professional at SPYM. Email: sathhan89100@gmail.com

the issue of substance use has taken the work done by people decades back. The reportage lacked the nuance needed to discuss about the drug and substance use and made it seem as only the rich and people with power do it which is contrary to the reality.

If the same media had done some research or documented evidence or had at least looked at the report mentioned above, facts would have been facts which directly correlate substance use to lesser income levels and people who are marginalised.

Coming to the substance use, if caught early, it's easier to curb it rather than at later years of life. Awareness and sensitisation programmes in school will go a long way to control the crisis at hand. The distinction one needs to make here is that the information given to students should be factual, objective, informative and backed by evidence rather than the messages that might manage fear. A combination of teaching and learning aids can be used to transmit the messages related to the facts about drugs and their use. Power point presentation, film, role plays, questionnaires, pledge and help line numbers should be made part of the awareness programs which ensure active participation of students and teachers alike.

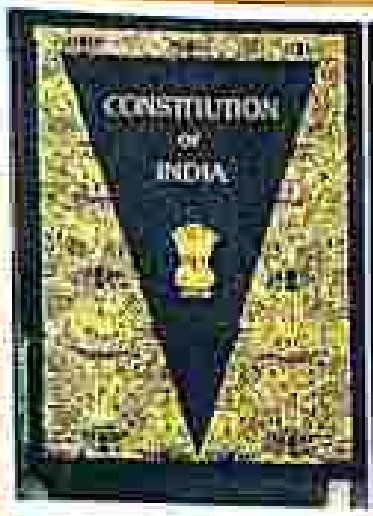
Apart from this, the community response needs to be strengthened against the substance use. Evidence-based efforts to curb substance use among children and adolescents, including a range of preventive and treatment strategies, have recognised the need to focus on variable settings where children at risk can be targeted. These settings include schools, local communities, and institutional and health care settings. The goal is to promote healthy living and lifestyle for children, adolescents and young people in general. It will require developing an integrated model of prevention and treatment in the community. Local organisations, community members and target populations are actively involved in the establishment of an integrated network of community-based services which are empowering and encouraging sustainable behaviour change within the community itself.

In India, various interventions are in practice including the legislative measures to reduce the use of substances but the gaps only highlight that new and more intervention strategies are needed. Further to this, the ratio of service providers to the people (treatment gap) who need care is very low. The National Mental Health Survey pointed out that in case of substance use, the treatment gap is 96%. For alcohol use, it's as high as 97.2%. The lacuna of inadequately trained professionals contributes to this problem. Other factors such as lack of de-addiction centres, lack of inpatient services and public private partnerships deepen the gap between service providers and the needy.

The goal is to promote healthy living and lifestyles for children, adolescents and young people in general. It will require developing an integrated model of prevention and treatment in the community. Local organisations, community members and target populations are actively involved in the establishment of an integrated network of community-based services which are empowering and encourage sustainable behaviour change within the community itself.

There is insufficient infrastructure, professionals in the workforce and funding to cater to the needs of the substance using population and spreading awareness. Not only there's a need of increased funding for the professionals but also a need to ensure that demands of essentials are met. Allocation of resources is to be done for inpatient services, rehabilitation services, outpatient services and research and development of information, education and communication activities. People with substance use disorders are also very vulnerable because of comorbid illnesses and this can only be reduced with an interdisciplinary collaboration and cooperation. Education and sensitisation of general public, other health practitioners like AYUSH and healers will help us develop strong referral systems.

Going forward, the system needs an approach that brings together the community and strengthens its collective response towards drug use. Use of technology to increase the efficiency and efficacy of the programmes will expand the boundaries and enhance communication among the legislative, policy makers and people working on the cause. ❑




DO YOU KNOW?

PROVISIONS RELEVANT TO SOCIAL JUSTICE & EMPOWERMENT

Part of the Constitution	Article
Preamble	"……to secure to all its citizens: JUSTICE, social, economic and political; ***** EQUALITY of status and of opportunity; and to promote among them all FRATERNITY assuring the dignity of the individual and the unity and integrity of the Nation…." are the first, third and fourth goals, respectively, mentioned in the Preamble.
Fundamental Rights	**23. Prohibition of traffic in human beings and forced labour –** 1. Traffic in human beings and begar and other similar forms of forced labour are prohibited and any contravention of this provision shall be an offence punishable in accordance with law. 2. Nothing in this article shall prevent the State from imposing compulsory service for public purposes, and in imposing such service the State shall not make any discrimination on grounds only of religion, race, caste or class or any of them.
	24. Prohibition of employment of children in factories, etc. – No child below the age of fourteen years shall be employed to work in any factory or mine or engaged in any other hazardous employment.
Directive Principles of State Policy	**37. Application of the principles contained in this Part –** The provisions contained in this Part shall not be enforceable by any court, but the principles therein laid down are nevertheless fundamental in the governance of the country and it shall be the duty of the State to apply these principles in making laws.

Directive Principles of State Policy	**38. State to secure a social order for the promotion of welfare of the people –** 1. The State shall strive to promote the welfare of the people by securing and protecting as effectively as it may a social order in which justice, social, economic and political, shall inform all the institutions of the national life. 2. The State shall, in particular, strive to minimise the inequalities in income, and endeavour to eliminate inequalities in status, facilities and opportunities, not only amongst individuals but also amongst groups of people residing in different areas or engaged in different vocations.
	39. Certain principles of policy to be followed by the State – The State shall, in particular, direct its policy towards securing – a. that the citizens, men and women equally, have the right to an adequate means of livelihood; b. that the ownership and control of the material resources of the community are so distributed as best to subserve the common good; c. that the operation of the economic system does not result in the concentration of wealth and means of production to the common detriment; d. that there is equal pay for equal work for both men and women; e. that the health and strength of workers, men and women, and the tender age of children are not abused and that citizens are not forced by economic necessity to enter avocations unsuited to their age or strength; f. that children are given opportunities and facilities to develop in a healthy manner and in conditions of freedom and dignity and that childhood and youth are protected against exploitation and against moral and material abandonment.
	39A. Equal justice and free legal aid – The State shall secure that the operation of the legal system promotes justice, on a basis of equal opportunity, and shall, in particular, provide free legal aid, by suitable legislation or schemes or in any other way, to ensure that opportunities for securing justice are not denied to any citizen by reason of economic or other disabilities.
	46. Promotion of educational and economic interests of Scheduled Castes, Scheduled Tribes and other weaker sections – The State shall promote with special care the educational and economic interests of the weaker sections of the people, and, in particular, of the Scheduled Castes and the Scheduled Tribes, and shall protect them from social injustice and all forms of exploitation.

Multiple Choice Questions

1. **What is most important about the Arctic and the Antarctic circles?**
   A) Within these circles only can the days and nights be longer than 24 hours
   B) The days and nights are never more than 24 hours long here
   C) Both are frozen continents
   D) Both regions are uninhabited

2. **Consider the following statements regarding asteroids and comets?**
   1) Asteroids are small rocky planetoids, while comets are formed of frozen gases held together by rocky and metallic material.
   2) Asteroids are found mostly between the orbits of Jupiter and Mars, while comets are found mostly between Venus and Mercury.
   3) Comets show a perceptible glowing tail, while asteroids do not.

   Which of the statement(s) given above is/are correct?
   A) 1 only B) 1 and 2 only
   C) 1 and 3 only D) 1, 2, and 3

3. **The Constituent Assembly of India convened to prepare the Constitution of India appointed a sub-committee headed by Gopinath Bordoloi. Which of the following recommendations was/were made by the committee?**
   1) Fifth Schedule for the North-East Frontier (Assam) Tribal and Excluded Areas.
   2) Constitution of District Councils in all autonomous districts of Assam.
   3) Sixth Schedule for the North-East Frontier (Assam) Tribal and Excluded Areas.
   4) Demarcation of territories in North-East India.

   Select the correct answer using the codes given below:
   A) Only 1 B) 1, 2 and 3
   C) 2 and 3 D) Only 4

4. **Consider the following statements about State Election Commission?**
   1) The State Election Commissioner shall be appointed by the Governor of the State.
   2) The State Election Commission shall have the power of even preparing the electoral rolls besides the power of superintendence, direction and control of election to the panchayats.
   3) The State Election Commissioner cannot be removed in any manner from his office until he demits himself or completes his tenure.

   Which of the above statements is/are correct?
   A) 1, 2 and 3 B) 1 and 2 only
   C) 2 and 3 only D) 1 only

5. **Who among the following has suggested migration to accrual accounting system from cash-based accounting system in India?**
   A) I.V. Reddy B) D. N. Ghosh
   C) R.H. Patil D) D. Rangarajan

6. **Second demonetisation of currency notes in independent India took place during the tenure of ..... as Minister of Finance, GoI.**
   A) H.M. Patel
   B) Morarji Desai
   C) C.D. Deshmukh
   D) Vishwanath Pratap Singh

7. **The 'activity rate' of an economy depends upon as many factors, such as:**
   1) School leaving age
   2) Popularity of higher education
   3) Social customs
   4) Retirement age
   A) 1 and 2 B) 3 and 3
   C) 2, 3 and 4 D) 1, 2, 3 and 4

8. **Which of the following describes the common property resources?**
   A) Forests owned by the state
   B) Pastures, grazing lands used by community
   C) Woodlots, orchards used by cooperatives
   D) Fruit orchards, grasslands owned by individual

9. **Which one of the following institutions is related with the Green/Blue Box Subsidies?**
   A) United Nations
   B) World Bank
   C) World Tourism Organization
   D) World Trade Organization

10. **Which one of the following greenhouse gases is in largest concentration in the atmosphere?**
    A) Chlorofluorocarbon B) Nitrous oxide
    C) Carbon dioxide D) Methane

ANSWERS KEY : 1. (a) 2. (c) 3. (d) 4. (b) 5. (b) 6. (a) 7. (d) 8. (b) 9. (d) 10. (c)