



IAS PARLIAMENT

Information is Empowering
A Shankar IAS Academy Initiative

Towards Better Life

Last year, the World Bank reclassified India as a middle-income country. No longer in the lower income bracket, India's fast-paced growth also made it the fastest growing major economy in the world.

\n\n

However, even as some improvements were seen in maternal mortality and child death rate, India continued to languish on several other indicators such as electricity generation, workforce participation and sanitation.

\n\n

Does everyone get access to basic facilities?

\n\n

\n

- India is ranked 60th among 79 countries in the just released **World Economic Forum's Inclusive Development Index** which is based on three parameters — growth and development, inclusion and inter-generational equity and sustainability.

\n

- Oxfam's report titled An Economy For the 99 Per Cent, and Credit Suisse in its Global Wealth Report 2016 have shown that the richest 1 per cent in India own 58 per cent of its wealth.

\n

- Rising inequality in a large population has a deep impact on unsustainable migration to cities, lack of access to health and education facilities, and a resultant tension that divides the rich and the poor.

\n

- Despite being among the fastest growing economies in the last few years and in the top six in terms of GDP, a vast majority of our people are left behind socially and economically.

\n

- We need a **renewed focus on population control and women's empowerment through education, workforce participation and**

reduced fertility rates.

\n

\n\n

What kind of effort is needed?

\n\n

\n

- Our socio-economic transition requires a concerted effort to **bring together various ministries** in programmes that are aligned and mutually reinforcing.

\n

- While we continue to solve the problem of acute poverty, we must focus on its immediate outcome of increasing inequality.

\n

- Similarly, as we tackle the issue of illiteracy, our goal should be the dissemination of knowledge and skills to produce real GDP growth.

\n

- Need of universal healthcare that allows equitable and accessible healthcare to all, irrespective of socio-economic and rural-urban differences.

\n

- The pressure on the system to support a large population is immense and despite the abundance of natural resources, which we are depleting faster than we are regenerating, our infrastructure is continually stressed by the addition of nearly 22 million people every year.

\n

- We, therefore, need to prioritise a decline in fertility rates as well.

\n

\n\n

Women and children:

\n\n

\n

- Poor reproductive and child health are due to an inter-generational transfer of factors such as anaemia, poor nutrition, and girl child discrimination, combined with poor hygiene and sanitation, and lack of access to adequate food, nutrition and healthcare.

\n

- These have been insufficiently addressed and are the reason India is rated poorly on most socio-economic indicators.

\n

- The current ecosystem of 1.3 million anganwadi centres and mid-day meals

to 120 million school children must be revitalised to deliver what they were created to deliver.

\n

- High fertility rates and population increase are a function of poor literacy rates, high prevalence of malnutrition and acute poverty.

\n

- Population control will work only when all three issues are addressed. The fall in population growth rates that we have seen over the last few decades has been the direct result of increasing education among women.

\n

- The districts where total fertility rate (TFR) is still high are places where there is acute poverty and distress — and where fertility is high among all socio-religious groups.

\n

- These are also districts which show the highest incidents of child marriage — leading to early pregnancies and high mortality rates among women and children.

\n

- Consequently, families tend to produce more children to ensure that a few survive. Additionally, the family planning needs of almost 32 million women are not met today, which means that they continue to have children they do not want, mostly because contraceptive services do not reach them.

\n

- This also leads to unsafe abortions that are a major hurdle in reducing maternal and infant mortality.

\n

\n\n

Population growth:

\n\n

\n

- India's population increased from 548 million in 1971 to 1,211 million in 2011. The annual growth rate has declined from 2.22 per cent during the eighties to 1.95 per cent during the nineties and 1.63 per cent during 2001-11 as more girls have gone to school and stayed there.

\n

- Importantly, the impact of education in lowering fertility can be noted for all groups and for all levels of education, although the impact of primary education emerges as the most significant factor.

\n

- The category "literate but not having middle school education" reports significant fertility reduction from the category "illiterates".

\n

- The faster decline in TFR is due to a larger segment of the vulnerable populations among the minorities, SCs and STs currently completing the first five years of education.

\n

- The best results in developmental efforts, therefore, will come with a concerted effort that improves population control and family planning efforts with improved public health and hygiene.

\n

- Family planning and population control are best achieved when the Government is able to supply good quality education, decent livelihoods and affordable nutrition to its population.

\n

\n\n

\n\n

Category: Mains | GS - II | Social Justice

\n\n

Source: Business Line

\n



IAS PARLIAMENT
Information is Empowering
A Shankar IAS Academy Initiative