CHAPTER – 1

INTRODUCTION

Food, as we all know, is the core necessity of human existence. It is vital for maintaining proper health and also helps in prevention and cure of diseases. The world today produces enough food for everyone and yet there are over 800 million hungry people in the world, every 5 seconds a child dies of hunger and malnutrition and chronic hunger takes the lives of 24,000 people each day. We live in a world with widespread hunger, undernourishment and frequent famines. What is alarming is that as per the latest UN report released on September 15, 2017, global hunger after steadily declining for over a decade, is on the rise again affecting 815 million people (11 per cent of world population) in 2016. The increase of 38 million compared to last year is largely due to violent conflicts and climate related show leading to resurgence of hunger and malnutrition.

It is to be noted that hunger and undernourishment are influenced by the working of the entire economy and society—not just food production and agricultural activities. Economic and social interdependence govern the incidence of hunger in the contemporary world. The ability to acquire food depends on each person's 'entitlement' and not merely on the total food supply in the economy. People suffer from hunger when they cannot establish their ‘entitlement’ over an adequate amount of food (Sen, 2000). The entitlement of a person depends mainly on three factors namely, her endowments (ownership of productive resources), production possibilities and exchange conditions. Therefore, the analysis of causation of hunger and starvation requires an analysis of the entire economic mechanism and is not simply a problem of mismatch between supply and demand of food.

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1. Hunger, implies a chronic condition in which people lack the basic food intake to provide them with the energy and nutrients for fully productive lives.
2. This is the first time that UNICEF and WHO have joined FAO, IFAD and WFP in preparing this report.
The recognition of the need for food security can be traced back to 1943, when 44 countries met in Hot Spring (US) with an aim to establish a permanent organization for food and agriculture. Consequently, Food and Agriculture Organization (FAO) was established in 1945. In 1948, United Nation General Assembly accepted food as a basic human right under Universal Declaration of Human Rights (UDHR). According to UDHR Article 25(1), "everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing..."\(^3\).

In view of the present magnitude and intensity of hunger, malnutrition and starvation across the world, food security has become an integral part of all development and poverty alleviation efforts at national as well as international platform. Ensuring adequate quality food to all is considered to be the core element of good governance. The U.N. Sustainable Development Goals (2015), in continuation of the Millennium Development Goals (2000), accord topmost priority to ending hunger and all forms of malnutrition by 2030.

1.1. **The Concept of Food Security**

Food security is a flexible concept as reflected in the many attempts at defining it in research and policy usage. Even a decade ago, there were about 200 definitions of food security (Maxwell 1996) in published writings. The continuing evolution of food security as an operational concept in public policy reflects the wider recognition of the technical and policy issues involved herein.

Food security as a concept originated only in the mid-1970s, in the discussions of international food problems at a time of global food crisis. The initial focus of attention was primarily on food supply problems - of assuring the availability and to some degree the price stability of basic foodstuffs at the international and national level. The issues of famine, hunger and food crisis were also being extensively examined, following the events of the mid 1970s.

The outcome was a redefinition of food security, which recognized that the behaviour of potentially vulnerable and affected people was a critical aspect.

Another crucial factor in modifying views of food security was the evidence that the technical successes of the Green Revolution did not automatically and rapidly lead to dramatic reductions in poverty and levels of malnutrition. These problems were recognized as the result of lack of effective demand.

The initial focus, reflecting the global concerns of 1974, was on the volume and stability of food supplies. Food security was defined in the 1974 World Food Summit as:

“availability at all times of adequate world food supplies of basic foodstuffs to sustain a steady expansion of food consumption and to offset fluctuations in production and prices” (UN, 1975).

In 1983, FAO expanded its concept to include securing access by vulnerable people to available supplies, implying that attention should be balanced between the demand and supply side of the food security equation:

“ensuring that all people at all times have both physical and economic access to the basic food that they need” (FAO, 1983).

In 1986, the highly influential World Bank report “Poverty and Hunger” (WB, 1986) focused on the temporal dynamics of food insecurity. It introduced the widely accepted distinction between chronic food insecurity, associated with problems of continuing or structural poverty and low incomes, and transitory food insecurity, which involved periods of intensified pressure caused by natural disasters, economic collapse or conflict. This concept of food security is further elaborated in terms of:

“access of all people at all times to enough food for an active, healthy life”.

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By the mid-1990s food security was recognized as a significant concern, spanning a spectrum from the individual to the global level. However, access now involved sufficient food, indicating continuing concern with protein-energy malnutrition. But the definition was broadened to incorporate food safety and also nutritional balance, reflecting concerns about food composition and minor nutrient requirements for an active and healthy life.

The 1996 World Food Summit adopted a still more complex definition:

“Food security, at the individual, household, national, regional and global levels [is achieved] when all people, at all times, have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and preferences for an active and healthy life” (FAO, 1996).

This definition was again refined in The State of Food Insecurity 2001:

“Food security [is] a situation that exists when all people, at all times, have physical, social and economic access to sufficient, safe and nutritious food that meets their dietary needs and food preferences for an active and healthy life” (FAO, 2002).

The international community has accepted these increasingly broad statements of common goals and implied responsibilities. But its practical response has been to focus on narrower, simpler objectives around which to organize international and national public action.

Essentially, food security can be described as a phenomenon relating to individuals. It is the nutritional status of the individual household member that is the ultimate focus, and the risk of that adequate status not being achieved or becoming undermined.

1.2 Dimensions of Food Security

Food security is the outcome of food system operating efficiently. Efficient food system contributes positively to all dimensions of food security. Following are the dimensions of food security (Figure 1.1):
Food availability

This dimension addresses supply side of the food security and expects sufficient quantities of quality food from domestic agriculture production or import. This is simple mathematical calculation whether or not the food available in certain territory/country is enough to feed the total population in that particular territory and calculated from the level of local agriculture production at that territory, stock levels and net import/export.

Food access

Having sufficient food at national level or at certain territory cannot be taken as the proof that all the household or individuals in the country/territory have enough food to eat. Food access is another dimension of food security which encompasses income, expenditure and buying capacity of households or individuals. Food access addresses whether the households or individuals have enough resources to acquire appropriate quantity of quality foods.

Some of the indicators of this dimension at different levels are food price, wage rate, per capita food consumption, meal frequency, employment rate etc.

Food utilization

Food utilization is another dimension of food security which addresses not only how much food the people eat but also what and how they eat. It also covers the food preparation, intra-household food distribution, water and sanitation and health care practices. The nutritional outcome of the food eaten by an individual will be appropriate and optimum only when food is prepared/cooked properly, there is adequate diversity of the diet and proper feeding and caring practices are practiced.

Stunting rate, wasting rate, weight-for-age, anemia, night blindness etc are the indicators at different level for this dimension which can be assessed by demographic and health survey, immunization chart etc.
Stability

This dimension addresses the stability of the other three dimensions over time. People cannot be considered food secure until they feel so and they do not feel food secure until there is stability of availability, accessibility and proper utilization conditions. Instability of market price of staple food and inadequate risk bearing capacity of the people in case of adverse conditions (e.g. natural disaster, unexpected weather etc), political instability and unemployment are the major factors affecting stability.

![Diagram of Food Security Dimensions]

**Fig.-1.1 Dimensions of Food Security**

In brief, Availability covers whether adequate food is ready at people's disposal while Access ensures if all households and individuals have adequate resources to obtain the food they need either through production or purchase. Similarly Utilization is about human body function to adequately ingest, digest and metabolize the food. Stability is about assurance of continuation of these three dimensions.
1.3 Global Food Security

As stated earlier, food security is currently a serious concern at international forum. Continuous, consistent and targeted efforts have certainly improved global food security but the situation is still alarming with signs of reversal. 777 million people were estimated to be chronically undernourished in 2015 compared to 900 million in 2000 (UN, 2016) and over 1 billion in 1992. In percentage terms, the prevalence of undernourishment has fallen from 18.6 per cent of the world population in 1992 to 10.9 per cent in 2015. Region wise, the largest number of hungry people live in Asia (512 million) followed by Africa (232 million).

However the latest UN report (2017) rings an alarming bell with the total number of chronically undernourished increasing by 38 million to 815 million in 2016 (11 per cent of global population) with Asia having 520 million hungry people and Africa 232 million. Globally, the prevalence of stunting has fallen from 29.5 per cent in 2005 to 22.9 per cent in 2016 but 155 million children under 5 years of age across the world still suffer from stunted growth. Wasting affects 1 in 12 of all children under 5 years of age (52 million) more than half of whom (27.6 million) live in Southern Asia and about one third in Africa. 613 million women (app. 33 per cent of total) of reproductive age are anemic.

Table 1.1 and Figure 1.2 clearly show that 81 per cent of the hungry people in 2014-16 live in Southern, Eastern Asia and Sub-Saharan Africa. Moreover the regional share of Southern Asia and Sub-Saharan Africa has significantly gone up in 2014-16 compared to 1990-92 whereas that of Eastern Asia has come down by 11 percentage points. Apart from this, there is insidious hunger (hidden hunger) that is caused by deficiencies in micronutrients such as iron, Vitamin A and Zinc. The effects of micronutrient deficiencies can be dreadful for an individual and even for a nation as they lead to increased morbidity and mortality, and reduce learning ability and productivity.
Table: 1.1 The changing distribution of hunger in the world by numbers and shares of undernourished people by region, 1990–92 and 2014–16.

<table>
<thead>
<tr>
<th>Region</th>
<th>Number (Millions)</th>
<th>Regional Share (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Development Regions</td>
<td>20</td>
<td>15</td>
</tr>
<tr>
<td>(b) Southern Asia</td>
<td>291</td>
<td>281</td>
</tr>
<tr>
<td>(c) Sub-Saharan Africa</td>
<td>176</td>
<td>220</td>
</tr>
<tr>
<td>(d) Eastern Asia</td>
<td>295</td>
<td>146</td>
</tr>
<tr>
<td>(e) South-Eastern Asia</td>
<td>138</td>
<td>61</td>
</tr>
<tr>
<td>(f) Latin America and the Caribbean</td>
<td>66</td>
<td>34</td>
</tr>
<tr>
<td>(g) Western Asia</td>
<td>8</td>
<td>19</td>
</tr>
<tr>
<td>(h) Northern Africa</td>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>(i) Caucasus and Central Asia</td>
<td>10</td>
<td>6</td>
</tr>
<tr>
<td>(j) Oceania</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>1011</td>
<td>795*</td>
</tr>
</tbody>
</table>

Figure: 1.2 The changing distribution of hunger in the world by numbers and shares of undernourished people by region, 1990–92 and 2014–16.

Notes: The areas of the pie charts are proportional to the total number of undernourished in each period. Data for 2014–16 refer to provisional estimates. All figures are rounded. *Includes data for Sudan, which are not included in the figure for sub-Saharan Africa, following the partition of the country when South Sudan became an independent state in 2011 (Source: FAO 2015)
The importance of micronutrients can be judged from the associated risk due to their deficiency such as poor health, mental mutilation, low productivity and even death of a child if he/she do not receive sufficient nutrition in the first 1,000 days of his/her life. More than 30 per cent of the world’s population is still affected by micronutrient deficiencies or hidden hunger. More than 2 billion people worldwide suffer from hidden hunger; more than 1.6 billion people do not have get minimum calorie intake (FAO, IFAD, and WFP 2014). The situation is very critical in Africa, South of the Sahara and the South Asian subcontinent. It has been estimated that in Sierra Leone, iron deficiency among women working in agriculture will cost US$ 94.5 million over five years. Similarly, global losses in economic productivity due to macronutrient and micronutrient deficiencies have been projected to be more than 2-3 per cent of GDP.

The target for the Millennium Development Goals (MDGs) for developing countries as a whole was to halve the proportion of hungry people by 2015 from the base year(s) of 1990-92, or from 23.2 per cent to 11.6 per cent. As the proportion in 2014-16 was 12.9 per cent, the goal has almost been met. The target set at the 1996 World Food Summit was to halve the number of undernourished people by 2015 from their number in 1990-92. Since 1990–92, the number of hungry people in developing regions has fallen from 991 million to 790.7 million against a target of 495 million (1/2 of 991 million). 795 million people in the world – just over one in nine – were undernourished in 2014-16. Thus the target has not been reached. Furthermore, in 2015 the Sustainable Development Goals (SDGs) build on the partial success of MDGs and aim to end all forms of hunger and poverty.

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5 [http://www.worldhunger.org/articles/Learn](http://www.worldhunger.org/articles/Learn) accessed on 28 May 2016
6 FAO et al. 2015 pp 8-12
7 “The State of Food Insecurity in the World”, FAO-2015
8 On 1 January 2016, the 17 Sustainable Development Goals (SDGs) of the 2030 Agenda for Sustainable Development officially came into force. Over the next fifteen years, with these new Goals that universally apply to all, countries will mobilize efforts to end all forms of poverty, inequalities and tackle climate change.
How much is the international community concerned about food security, is reflected by the fact that first two goals (out of 17) are to end all form of poverty and hunger and malnutrition by 2030 and ensure access by all people, (in particular the poor and people in vulnerable situations, including infants), to safe, nutritious and sufficient food throughout the year. The said goals can be achieved by targeting the most vulnerable, increasing the accessibility of resources, climate related disaster, supporting small scale farmers and allowing equal access to land, technology and markets, and international cooperation in investment and technology and supporting small scale farmers and the communities affected by climate related disaster.

Some of the highest proportions of food-insecure and malnourished children are found in countries affected by conflict, a situation that is even more alarming in countries characterized by prolonged conflicts and fragile institutions.

"This has set off alarm bells we cannot afford to ignore: we will not end hunger and all forms of malnutrition by 2030 unless we address all the factors that undermine food security and nutrition..... Ending hunger and all forms of malnutrition is an ambitious goal, but it is one we strongly believe can be reached..." (UN 2017)

1.4 Food Security in India

India is one of the fastest growing economies of the world and has made rapid strides in improving rates of under and malnutrition. Between 2006 and 2016, stunting in children below five years declined from 48 per cent to 38 per cent. Yet, India continues to have one of the world's highest children under nutrition rates, impacting the child's health and development, performance in school and productivity in adult life.

With nearly 195 million undernourished people (FAO, 2015), India shares a quarter of the global hunger burden. Nearly 47 million or 4 out of 10
children in India are not meeting their full human potential because of chronic under nutrition or stunting. Stunting has consequences such as diminished learning capacity, poor school performance, reduced earnings and increased risks of chronic diseases. The impacts are multi-generational as malnourished girls and women often give birth to low birth-weight infants. There has also been an increase in the prevalence of overweight and obesity in children and adolescents in India, which has life-long consequences of non-communicable diseases in adulthood.

The present scenario exists despite the fact that food production and distribution has been the cornerstone of policy making in India right from the independence days. Jawaharlal Nehru had stated in 1947, "everything else can wait, but not agriculture". In the post-independence era, the government struggled to raise the level of production up to mid 1970’s in the wake of serve shortage of food grains. The government met the requirement of growing population by importing food grains on massive scale especially from USA under PL-480. But the production of food grains increased under the impact of Green Revolution and India achieved self-sufficiency in food grains by generating surplus by mid 1980’s. Since then the production of food grains has more than doubled from 129 million tons in 1981 to 272 million tons in 2017 resulting in significant increase in per capita production despite rapid population growth. The net availability of food grains has also gone up from 144.1 Kg. per year in 1951 to 179.3Kg. in 2014. So the focus of the problem has shifted from production to distribution to ensure food security in the country.

Today, India has a large food security at national level and several anti-poverty programmes but there are critical gaps in terms of inclusion and exclusion errors. Women and girls are particularly disadvantaged. Despite the achievement of national food self-sufficiency, new challenges have emerged: slowing agriculture growth, climate change, land degradation and shrinking bio-diversity to mention a few.
The government has taken significant steps to combat under- and malnutrition over the past two decades, such as through the introduction of mid-day meals at schools, Anganwadi System to provide rations to pregnant and lactating mothers, and subsidized grain for those living below the poverty line through a public distribution system. The National Food Security Act (NFSA), 2013, aims to ensure food and nutrition security for the most vulnerable through its associated schemes and programmes, making access to food a legal right.

In view of significant increase in food production, an organization named Food Corporation of India (FCI) was established way back in 1965 and assigned the task of procurement, storage and distribution. The trend of buffer stocks with FCI since economic reforms suggests problems in the distribution of food grains. Public distribution system was adopted in (1960s) to provide food at highly subsidized price, initially with universal approach and later with targeted approach (1997) especially focused on poor people. But the biggest problem is that the system of subsidized food targeted at poor has not worked efficiently; it is hugely expensive and the degree of inefficiency is enormous. It is criticized on various grounds like corruption, leakages, error of inclusion and exclusion etc. Under severe criticism and critical examination, system has reformed and evolved over time and has been relatively more successful in states like Tamil Nadu, Kerala, and Chhattisgarh.

The problem of food insecurity is much more complicated in India because of huge poor mass, heterogeneity in taste of food, deep rooted poverty and inequality, low basic income of people, vast geographical variations etc. This makes achievement of food security a big challenge for the policy makers. It is supported by the fact that India's share of the world’s poor in 2010 (33 per

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9 Rajiv Gandhi’s famous assertion that 85 per cent of the money poured in the system diverted from the system. The Deputy Chairman of the Planning Commission, Montek Singh Ahluwaliya, said in 2009 that only 16 per cent of the food allocated to the PDS reached the poor. (Reported in The Economist, 10 September 2010, p.30)
cent) was higher than it was 30 years ago in 1981 (22 per cent) (World Bank, 2013). India is home to 42 per cent of the world’s underweight children (GHI-2010). One third of India’s women and children are malnourished (FAO, 2014). India is home to 194.6 million\(^{10}\) undernourished people, the highest in the world\(^{11}\).

Therefore some of the economists favor cash transfer for food as a substitute policy instrument instead of PDS for promoting food security. In a short span of 10 to 15 years, cash transfer programmes have become the social safety-net intervention of choice all over the world especially in Latin American nations and are increasingly being adopted in other parts of developing world. Brazil, Mexico and other Latin American countries have successfully reduced the level of food insecurity and thus developed better human resources for faster and sustainable development. Presently some of the cash transfer programmes has become sculpt to achieve food security.

It is clear from the above discussion that India has largely achieved food security at the national level but not at the household level. Food grains production- both aggregate and per capita has increased over time. So what is required now is a more transparent and accountable distributional machinery. The present research, therefore, is focused on mode of delivery of service for ensuring food security at household level.

1.5 RELEVANCE OF THE STUDY

It is clear from the preceding discussion that efficient and transparent distribution machinery is required to achieve food security at household (individual) level in India. Public distribution system has been in operation since British times but food insecurity is a serious problem even today. Further, the functioning of PDSs system is highly heterogeneous across the states. In

\(^{10}\) This figure is 15 percent of India’s population and around of 25 percent (194 million out of 795 million) of world undernourished people.

\(^{11}\) The State of Food Insecurity in the World”, FAO-2015
some states, the functioning of PDS is very poor (Bihar, Uttar Pradesh), whereas in some other states, functioning of PDS is being reformed (Jharkhand, Orissa), and in a few states like Kerala, Tamil Nadu, Chhattisgarh etc. the functioning of PDS is quite satisfactory.

In view of the poor performance of PDS in many states, it was suggested by policy makers and economists that India should also adopt cash transfer in food like Latin American countries. On the other hand, there are many faithful supporters of PDS. Consequently, there is a sizzling policy debate among economists for making a considered choice between cash transfer and in-kind transfer.

A cash transfer for food scheme named Dilli Annashree Yojana was launched by Delhi Government in December 2012 for vulnerable people who were not covered under PDS. Although, India has an experience of cash transfer in other social welfare schemes but cash transfer for food was adopted for the first time in 2012.

The present study is an attempt to carry out a detailed comparative impact analysis of both TPDS and Cash Transfer for food in Delhi in order to identify which of the two schemes has a greater potential of extending food security as per the beneficiaries of the scheme. Both the schemes were operating parallel in Delhi but the beneficiaries were mutually exclusive. We have collected primary information from 1200 beneficiaries of TPDS and 500 beneficiaries of cash transfer from all the nine districts of Delhi as per the detail given in section 1.8. To the best of our knowledge, no comprehensive study on entire Delhi involving both TPDS and Cash Transfer has been carried out for entire Delhi till date except for small pilot project undertaken by SEWA in 2009 and 2011 with 150 households in three areas and 450 households in one

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12 National Social Assistance Programme (NSAP) is social welfare scheme which was initiated by Government of India on 15 August 1995, Indira Gandhi National Old Age Pension Scheme (IGNOAPS), Indira Gandhi National Widow Pension Scheme (IGNWPS), Indira Gandhi National Disability Pension Scheme (IGNDPS), National Family Benefit Scheme (NFBS), Direct Benefit Transfer for LPG (DBTL) etc.
area of Delhi respectively. Therefore, the present work assumes significance in identifying future course of action with regard to adoption of cash transfer for food security in India.

1.6 OBJECTIVES OF THE STUDY

The proposed research study has the following objectives:

1. To analyze the different food security schemes adopted in India since independence.
2. To examine the functioning of the PDS system.
3. To assess the effectiveness of cash transfer.
4. To compare the relative effectiveness of PDS and cash transfer in providing food security to the beneficiaries.

1.7 HYPOTHESES OF THE STUDY

The study is an attempt to test the following hypotheses:

1. \( H_0 \) Hypothesis: The leakage in ration supplies has been uniform throughout the state of Delhi.
   \( H_1 \) Hypothesis: The leakage in ration supplies has not been uniform throughout the state of Delhi.

2. \( H_0 \) Hypothesis: The PDS system is not important for the welfare of the BPL households.
   \( H_1 \) Hypothesis: The PDS system is important for the welfare of the BPL households.

3. \( H_0 \) Hypothesis: The PDS beneficiaries are indifferent between the PDS and the cash transfer scheme.
   \( H_1 \) Hypothesis: The PDS beneficiaries are not indifferent between the PDS and the cash transfer scheme.

4. \( H_0 \) Hypothesis: The PDS beneficiaries’ preference for the PDS is uniform across all the districts of Delhi.
H₁ Hypothesis: The PDS beneficiaries’ preference for the PDS is not uniform across all the districts of Delhi.

5. H₀ Hypothesis: Cash transfer under Dilli Annashree Yojana has improved food security of the beneficiaries.
   H₁ Hypothesis: Cash transfer under Dilli Annashree Yojana has not improved food security of the beneficiaries.

6. H₀ Hypothesis: The beneficiaries are indifferent between PDS and cash transfer scheme.
   H₁ Hypothesis: The beneficiaries are not indifferent between the PDS and cash transfer scheme.

7. H₀ Hypothesis: The Cash transfer beneficiaries’ preference for the PDS is uniform across all the districts of Delhi.
   H₁ Hypothesis: Cash transfer beneficiaries’ preference for the PDS is not uniform across all the districts of Delhi.

1.8 DATA SOURCE AND RESEARCH METHODOLOGY

The present study is based on both primary and secondary data. The major source of secondary data are reports and documents of FAO, IFPRI, WB, IPC, NSSO, NFHS, Economic Survey, Planning commission etc. The primary data has been collected by taking a sample size of 1700 households (consisting of 1200 household for PDS and 500 households for cash transfer).

A stratified sample of 1200 households was used to collect the information on PDS with the help of personal interview aided by a well structured schedule¹³ (Annexure-A) covering all the nine districts during the month of March, April and May 2014. 27 circles out of total 70 circles in Delhi were covered under the survey by selecting three circles from each district (Annexure 1.1). The sample size was distributed among districts in proportion to the BPL population and further divided among circles again in proportion of BPL population. The district wise number of Fair Price Shops, number of total BPL

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¹³ It is a customized version of NFHS scheduled was used for the purpose.
households, total BPL beneficiaries, number households under study and number of beneficiaries under study are shown in Table 1.2.

Table: 1.2 District wise BPL population and sample size

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Name of District</th>
<th>No of FPSs</th>
<th>BPL Household</th>
<th>BPL Beneficiaries</th>
<th>Sample Household</th>
<th>No. of BPL Beneficiaries in sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Central Delhi</td>
<td>190</td>
<td>16167</td>
<td>77,427</td>
<td>75</td>
<td>413</td>
</tr>
<tr>
<td>2</td>
<td>East Delhi</td>
<td>265</td>
<td>17647</td>
<td>89,630</td>
<td>85</td>
<td>510</td>
</tr>
<tr>
<td>3</td>
<td>New Delhi</td>
<td>159</td>
<td>13457</td>
<td>63,612</td>
<td>60</td>
<td>321</td>
</tr>
<tr>
<td>4</td>
<td>North Delhi</td>
<td>232</td>
<td>47048</td>
<td>2,24,911</td>
<td>215</td>
<td>1205</td>
</tr>
<tr>
<td>5</td>
<td>North East Delhi</td>
<td>366</td>
<td>43998</td>
<td>2,03,418</td>
<td>195</td>
<td>999</td>
</tr>
<tr>
<td>6</td>
<td>North West Delhi</td>
<td>329</td>
<td>45144</td>
<td>2,34,981</td>
<td>230</td>
<td>1343</td>
</tr>
<tr>
<td>7</td>
<td>South Delhi</td>
<td>318</td>
<td>29555</td>
<td>1,26,480</td>
<td>120</td>
<td>713</td>
</tr>
<tr>
<td>8</td>
<td>South West Delhi</td>
<td>346</td>
<td>28318</td>
<td>1,29,190</td>
<td>120</td>
<td>732</td>
</tr>
<tr>
<td>9</td>
<td>West Delhi</td>
<td>311</td>
<td>21929</td>
<td>1,04,288</td>
<td>100</td>
<td>558</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>2516</td>
<td>2,49,875</td>
<td>12,53,937</td>
<td>1200</td>
<td>6,794</td>
</tr>
</tbody>
</table>

(Source: Delhi Govt. site. http://www.delhi.gov.in)

Collecting the information on cash transfer for Dilli Annashree Yojana was a very difficult job. The names of the beneficiaries were not disclosed on website as in the case of PDS (under e-PDS portal). Therefore practically, it was impossible to identify the beneficiaries of cash transfer due to lack of information in public domain. District wise list of beneficiaries was obtained directly from FSO through RTI. The policy documents regarding the identification of beneficiaries, implementation and finance were collected personally after a number of visits to FSO and with personal references of lawyers, NGO workers and social activists in Delhi.

A stratified sample of 500 household was used to collect the information from the various areas of all the nine districts with the help of personal or telephonic interview aided by a well structured schedule (Annexure- B) during the month of June, July and August 2014. The size of sample was distributed in
proportion to the poor people in all the nine districts of Delhi as shown in Table 1.3.

**Table: 1.3 District wise Sample Break-up**

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Name of District</th>
<th>No. of Households</th>
<th>No. Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Central Delhi</td>
<td>32</td>
<td>189</td>
</tr>
<tr>
<td>2</td>
<td>East Delhi</td>
<td>35</td>
<td>187</td>
</tr>
<tr>
<td>3</td>
<td>New Delhi</td>
<td>25</td>
<td>135</td>
</tr>
<tr>
<td>4</td>
<td>North Delhi</td>
<td>90</td>
<td>511</td>
</tr>
<tr>
<td>5</td>
<td>North East Delhi</td>
<td>80</td>
<td>463</td>
</tr>
<tr>
<td>6</td>
<td>North West Delhi</td>
<td>96</td>
<td>565</td>
</tr>
<tr>
<td>7</td>
<td>South Delhi</td>
<td>50</td>
<td>288</td>
</tr>
<tr>
<td>8</td>
<td>South West Delhi</td>
<td>50</td>
<td>292</td>
</tr>
<tr>
<td>9</td>
<td>West Delhi</td>
<td>42</td>
<td>234</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>500</td>
<td>2864</td>
</tr>
</tbody>
</table>

Appropriate statistical techniques including chi-square test, rank index, average, growth rate and percentage have been used to analyze the various aspects of our study.

### 1.8 LIMITATIONS

Cash transfer has been very recently adopted in India and hence no studies are available for comparing the findings. Further, the region of analysis is limited to one state i.e. Delhi because cash transfer has not been adopted in any other state till date. Lack of information about household structure (i.e. numbers of family members in the beneficiary household) under Dilli Annashree Yojana also limits the scope of exploration of the scheme.