Chapter 2

Literature Review

2.1. Introduction

This chapter presents literature review in three sections. The First section would examine various aspects of chronic poverty. Several approaches would be employed to measure poverty and to identify chronically poor and child poverty with a focus on IGT of poverty and the factors determining transfer of resources towards a child. The second section would deal with the definitional aspect of women’s empowerment and different paths of empowerment. The third section would deal with capacity building for women’s empowerment through GRC.

Section 1

Chronic Poverty

2.2. Introduction

The provision of basic functioning to children enables them to be free from illiteracy, disease, starvation, and crime, which can prevent them from falling into poverty. Freedom from non-monetary deprivations would act as interrupters to the intergenerational transmission of poverty, reducing vulnerability to persistent poverty. Intergenerational poverty refers to the ways in which parents can transfer the conditions of poverty or poverty related capital to their children due to their inability in investing in their children in terms of health and education (Gunther & Klasen, 2009).

The need to examine various aspects of chronic poverty is essential to provide a critical lens for accomplishing the task of evaluation of Gender Resource Centre from perspective of chronic poverty. There is a need to research the factors which can either create resilience or find positive coping strategies or act as interrupters on chronic poverty by either preventing transmission of conditions conducive to poverty across generations or assisting people in chronic poverty to bounce back from poverty. Poverty is described in terms of deprivation of capabilities (Sen A. , 1999), (Mehta & Shephard, CPRC-IIPA, 2004), which justifies poor as a heterogeneous class making diverse experiences of poverty and different degrees of acuteness of poverty for different members in the same household (Kothari U. , 2002). Therefore, many direct and indirect approaches to identify chronically poor from the layers of poor have been used. But an insight into the allocation of resources in terms of food and nutrition, health care and education and distribution of resources within the household is significant in understanding the relative poverty and relative impact of poverty on the members of the same household. Such findings are useful in designing any poverty measures. Evaluation of any state intervention program that aims to combat poverty, through women’s empowerment, requires an insight into household resource allocation.
Through review of literature, the present study focuses on the forces which create barriers in the transfer of private resources for human capital formation from older generation to the younger generation in their crucial stage of development. At household level the decision to invest in children in terms of health and education which can act as an interrupter to child poverty are influenced by ability to invest, willingness to invest and the actual allocation of resources. The ability to invest is determined by factors like economic conditions of the household, the size of the family, availability of debt and social capital. Willingness to invest is influenced by motivation and perception of parents about the ability of child and fluctuation in living standards. The actual allocation of resources depends upon the priorities of parents and relative bargaining power of parents.

Therefore, poverty which manifests itself in different dimensions, in different degrees, and stretches up to different periods with different hurdles to be crossed, cannot be treated as one problem. Besides, the dimensions of the problem as shown by the five year plan (2007–2012) with the agenda of inclusive growth for the millions of people in the country who are living below their starvation line, draws attention.

2.2.1.: Political Perspective

All political leaderships have articulated their commitment to poverty reduction; therefore, there is continuity of anti-poverty programs. N.C.B. Nath (2006) mentioned that achievements of anti poverty programs seem to be inadequate if looked at in terms of unfinished task but seem to be satisfactory if looked at in terms of percentage changes. But usually state is held responsible for unimpressive growth with regard to anti-poverty programs. Nath observed a paradigm shift in political awareness regarding poverty in his study. He states “the earlier thinking on poverty linked it with undernourishment and later with levels of consumer expenditure (head count ratio). Refinements like poverty gap index, which reflect the depth of poverty, and squared poverty gap, which reflects the severity of poverty of the BPL population, are additions to the literature. Chronic poverty is a new concept in this debate; it is still not an integral part of the discourse on poverty reduction” (Nath, 2006). Though it is deplorable to find no official recognition of chronic poverty in our policy dialogue, despite the fact that India is striving to attain United Nations’ Millennium Development Goals ². N.C.B. Nath, raised a pertinent question by analyzing election manifestos, that if political parties are not equipped to combat chronic poverty, then who could. Then the role of non government organizations comes.
2.2.2. Measurement of Poverty

Income has long been used as a favorite unit of welfare analysis because of its quantitative analysis, comparability and easy interpretations. Deaton (1997) used consumption as a welfare indicator and agrees that nutritional issues have occupied a central place in poverty estimation and in analysis of gender discrimination (Deaton, 1997).

The traditional measures of poverty as explained by A. Sen (1976) use cardinally meaningful indicators of poverty, which requires two distinct measures (Sen, A. , An ordinal Approach to Measurement, 1976). Poverty Head Count Ratio is widely used to measure the percentage of a given population who can be identified as poor with reference to a predetermined poverty line (World Bank, 2003) is not free from drawbacks. Another measure called poverty gap ratio usually reflects single dimension of poverty, measures the percentage of their average shortfall of income across poverty line, usually measures ‘poverty deficit’ (Indicators For Monitoring the Millennium Development Goals , 2003). Empirical evidence provided by Brook Gunn and Duncan (1997) suggests that longer exposure to poverty has detrimental effects on the health and cognitive abilities of children (Brooks & Duncan, 1997). Stunting and behavioral problems among children of poor households can also be observed. The experience of remaining below poverty, if continues for an extended period , would create economic disadvantage for poorer individuals which would result in social exclusion (Mendola, Busetta, & Milito, 2009) , (Whelan, Lyte, & Maitre, 2003) .

Social Exclusion characterizes disadvantages of poverty which is multidimensional in nature and expresses cumulative misery and disadvantages experienced by the poor. Therefore, the extent and severity of poverty can be indicated by social exclusion, as supported by Townsends (1980). Isabel Günther et al (2009) cited the study by Bossert et. al. (2006) who believe that social exclusion results in chronic capability failure, which tends to underperform in turning income into functionings (Gunther & Klasen, 2009) .

- Panel Data Set/ Longitudinal Data

Referring to A. Sen’s traditional measure of poverty which reflects the current state of poverty across the poor by including information on duration of poverty, provides a strong case for developing a distinct methodology for measuring chronic poverty (Sen A. , An ordinal Approach to Measurement, 1976) . Mendola et al. (2009) emphasized on inclusion of time element which requires the study of poverty dynamics which deals with “how poverty evolves over time” with the help of longitudinal data (Mendola, Busetta, & Milito, 2009). Shashanka Bhide and Aasha Kapur Mehta stressed the significance of panel data set as an instruments in tracking the same household over time to capture their status regarding income , consumption etc. It also helps to identify the correlates of poverty status in different rounds (Bhide & Mehta, 2006).
The literature reviewed supports the view that “a longer time spent in poverty increases the probability of being poor in the future and it becomes hard to find an exit-route across a range of poverty induced detrimental outcomes (Mendola, Busetta, & Milito, 2009).

But Murdoch (1994) does not relate persistent poverty of a household with the length of poverty but emphasizes on the relationship between household’s current income, permanent income and the poverty line while Carter and May (1999) associated chronic poverty with lack of assets which is influenced by shocks (Carter & May, 1999). Structural shocks affect the asset base and entitlements of a household and stochastic shocks cause variation in consumption. Inability in building their assets is also associated with this, which would make it difficult for them to find an escape route from poverty. So chronic poverty is the outcome of structural feature of the household and can be aggravated in the absence of credit and insurance support. Social capital may show a ray of hope in many crises. But the analysis of those factors that increase the household’s vulnerability is equally important as their behavior is influenced more by vulnerability than actual poverty.

2.2.3. Identification of Chronically Poor

It is clear from the above discussion that the identification of chronic poverty can be made in more than one way. We would first focus on two approaches applied in the estimation of chronic poverty using income as a basic indicator by including time dimension and later using non income indicators (proxy indicators).

- Measurement of chronic poverty

Two approaches have been used to measure chronic poverty, each with its own distinct methodologies.

1. Income as a basic indicator
   - The spell approach
   - The component approach

2. Non-income indicators

In the estimation of chronic poverty income as a basic indicator has been used. Monetary indicators in terms of income or consumption are good proxies for multidimensional poverty (Sabina & Foster, 2009).

- The spell approach

The spell approach focuses on the time spent in the poverty; therefore it identifies a chronically poor, if an individual remains poor in every observed period. Bane and Ellwood (1986) , Gaiha and Deolaliker (1993), J.E. Foster (2007), J. E. Foster (2009), Bossert et al (2008) and Calvo and Dercon (2007) made use of spell approach to measure chronic poverty (Bane & Ellwood, 1986), (Gaiha &

But the main drawback of this spell approach used by Foster (2007) is that it does not give due weightage to extended duration of poverty. It implies that it ignores the cumulative negative impact of being in uninterrupted poverty (Foster, 2009). Whereas Bossert et al (2008) and Calvo and Dercon (2007) believe that consecutive spells of poverty in terms of consumption result in a worse situation than interrupted episodes or spells of poverty.

In the spell approach different observations on different points in time are taken and compared without having any information on, what happened during the intervening period or pre and post periods of investigations, is its drawback.

- **Component approach**

Any model of income estimated with longitudinal data implicitly or explicitly provides a model of inter-temporal dynamics. This approach is based on Friedman’s theoretical way of splitting into two components namely permanent and transitory. Therefore, two groups of poverty are identified as permanently poor and transitory poor.

Jalan and Ravallion (1998) used component approach on the assumption of perfect substitutability of income over time. Therefore, they emphasized that if the mean income of the household across the period is below the poverty line or specific income standards, it would refer to chronically poor, but ignores to incorporate the duration of poverty a family experience (Jalan & Ravallion, 1998). Jalan and Ravallion (2000) classified poverty into transient and non transient poverty. Shortfall in mean consumption over time refers to the chronic poverty of non transient types, while transient poverty refers to the variation in the consumption over time (Jalan & Ravallion, Is Transient Poverty Different? Evidence from Rural China, 2000). The study is based on panel data over a six year period for identification of chronic and transient poverty. But the basic drawback of this approach is that it overlooks the basic characteristic of chronic poverty (e.g. the persistence of poverty for longer duration). However, empirical identification of chronically poor is challenging because of poverty traps’ complexities. Poverty trap may be the result of variations of asset dynamics, and refers to self-reinforcing mechanism which causes poverty to persist for long duration (Azariadis & Stachurski, 2004).

- **Non-income poverty**

Review of the literature shows that economic deprivation for a long duration results in the other forms of deprivations but it is one of the several other factors inducing other forms of deprivations. Sabina
Alkire and J. Foster (2009) shows that monetary indicators in terms of income or consumption are good proxies for multidimensional poverty but, there is a need to go beyond monetary indicators which can capture multidimensional deprivation as Sen has empirically shown (Sabina & Foster, 2009) as economic deprivation tends to mask deprivations in other domains.

Deaton and Dreze (2002) followed the argument that poverty is not uni-dimensional. Therefore identification of poverty should consider deprivation of other dimensions such as literacy, right to control fertility, safe drinking water, provision of preventive and curative public health care, gender equality besides purchasing power 9.

- **Capability as an Indicator of Human Development**

Now the question is, do monetary indicators reveal the extent of deprivation with regard to food, nutrition, health services, education, skill, secured livelihood, security against crime and violence, autonomy and mobility? It is more difficult to understand as to what goes wrong in creating an enabling environment for the people to enjoy long, healthy and creative lives 10. Sabina Alkire agrees that capability deprivation which reflects lack of multiple freedoms is considered as an indicator of poverty. Capability deprivation, if continue across time, results in chronic poverty. The capability approach broadens the scope of the researcher to employ more than one and most suitable technique in analyzing the multiple deprivations which create disadvantages or barriers to many poor in accessing freedom people value. More the dimensions of deprivation experienced harder it becomes to find a way out of persistent poverty (Alkire, 2007).

Following Ravallion (2011), the measures of poverty which are widely used in applications, are typically accomplished by combining the income or consumption data with welfare component of multiple dimensions (be it health, education, nutrition or to access services) and collapse those into a single composite index, but a pertinent question regarding the adequacy of any single index for poverty assessment arises. Ravallion (2011) emphasized the desirability of supplementary indicators of individual attainments to overcome the data constraints (Ravallion, 2011).

UNICEF and OECD countries adopted the multidimensional approach to measure children’s status. An important step was noticed when a shift from mapping survival to well-being and from negative to positive indicators in new domains took place. An effort was made to develop a composite index of children's well-being 11 however, it is not free from drawbacks 12 (UNICEF, 2005).

In order to examine chronic poverty in terms of multidimensional poverty, analysis has been made at a point in time and over time. But a single composite indicator has not been opted for due to the limitations of aggregation and attaching weights to different non income indicators. United Nations’ MDGs proposed to examine deprivation in different dimensions separately rather than constructing single composite Index.
Isabel Gunthar et al (2009) empirically have shown that the individuals who are multi-dimensionally deprived, have more probability of continuing as chronically poor because non-income dimensions of poverty are more stable over time than income poverty. Human development indicators are more stable because they adjust more slowly than income indicators for economic development (Gunther & Klasen, 2009).

Another viewpoint emerges from the review of literature on chronic poverty, of those who believe in the concept of ‘culture of poverty’. Michael Harrington popularized the concept of ‘culture of poverty’ (1996) reflects its long term nature, therefore poor tend to acquire a different lifestyle and nature of dependency. Corcoran (1995) refers to the believers in this theory who maintain that the poor live in a culture which can be characterized by deviant values in life and tend to acquire a different behavior, which can be transmitted on the family basis (Corcoran, 1995). Oscar Lewis 1968, in his book ‘La Vida’ supported the concept of ‘culture of poverty’ through its long lasting effects on children via cultural deficiencies (Lewis, 1968). But the basic focus of Corcoran (1995) in portraying poor either in their permanent or in the semi permanent nature of poverty is to show the influence of poverty stricken neighborhood inflicted with social pathos including high rates of crime, inadequate or poor schools and lack of jobs (Corcoran, 1995). So in other words, prevalence of negative opportunities and non-existent positive opportunities in poverty stricken neighborhood exert their relative pressures in creating poverty. But factors like economic inequalities and female headed families sustain poverty for long periods.

Persistently poor may be distinguished from fluctuating poor (who face interrupted poverty) on the basis of persistence of poverty. However, it cannot be denied that there are more probabilities that fluctuating poor may become chronic poor. The key reason for the persistence of poverty may be termed as poverty ‘maintainers’ such as lack of education or skills, poverty combined with disability, inability to access health services, indebtedness, and social exclusion have been identified. ‘Maintainers’ however are different from ‘Drivers’ which are responsible for poverty, yet are interrelated significantly. But the understanding of factors under the head of ‘Maintainers’ and ‘Drivers’ would facilitate in finding ‘Interrupters’ of chronic poverty which would either prevent entry into poverty or would help exit from it as cited in A. Shepherd and Aasha Kapur Mehta based on Bhide and Mehta (2004), Krishna (2003), Mehta and Bhide (2003), Sen (2003) (Shepherd & Mehta, 2006). Andrew Shephard and Aasha Kapur Mehta (2006), observed that the individual households and social groups may be chronically poor who spend a significant period of their life in poverty and may pass on their conditions of poverty on to their children and for whom finding an exit route from poverty is difficult (Mehta & Shepherd, Chronic Poverty, 2006).
• Anthropometric Dimensions as Indicator of Chronic Poverty

The dynamics of non monetary indicators reflect past and monetary indicators state the current poverty dynamics (Radhakrishna, Rao, Ravi, & Reddy, 2006). Therefore, we can have a better insight of the persistence of poverty across generations of the same household, using the definition of chronic poverty as multidimensional (including monetary and non monetary domains) at a point in time or over time.

On the note that chronic poverty is inter-generationally transmitted, Radhakrishna et al (2006), formulated an innovative indirect approach by using NSSO data set and National Family Health Survey data set (Associating their past nutritional status with their current anthropometric dimensions) to identify chronically poor by providing insight into multiple deprivations other than economic deprivation they face. This approach tries to analyze the characteristics of malnutrition in children and women on the assumption that poverty and malnutrition are mutually reinforcing and they suffer most. But reduction in income poverty may not provide freedom from malnutrition related irreversible problems. Therefore, the study termed a household, chronically poor if it has at least one stunted child or woman with chronic energy deficiency disease, besides having per-capita expenditure less than 75 percent of the poverty line (Radhakrishna, Rao, Ravi, & Reddy, 2006).

Shiela Bhalla et al. (2006) used an innovative and indirect approach based on NSS employment unemployment rounds using casual hired labor, self employed and regular workers by principal status as a proxy for chronic poverty (Bhalla, Karan, & Shobha, 2004).

Having reviewed wide literature at the national and international level, it is clear that chronic poverty can be understood from the “duration” and “severity” of the poverty (Bhide & Mehta, 2006). “Duration” emphasizes on the prolonged period while “severity”, on the other hand, as described by Aasha Kapoor Mehta refers to the people who earn less than ¾th of the prescribed poverty line and can’t afford to have two square meals a day (Mehta & Shepherd, Chronic Poverty, 2006). Therefor, in order to estimate chronically poor households she emphasized on the use of panel data –set.

2.2.4. Intergenerational transmission of poverty

The compact definition that “chronic poverty” is inter-generationally transmitted has been supported by various authors / scholars Duncan (1998), Harper and Moore, (Radhakrishna, Rao, Ravi, & Reddy, 2006).

Intergenerational poverty refers to the ways in which parents can transfer the conditions of poverty to their children due to their inability in providing sufficient education, skills and medical care. The child who lacks capabilities grows into an unemployed adult (CPR-2) 17. Some other terms such as “life time poverty”, “permanent poverty” or “persistent poverty” have been used to refer to individuals and households that experience un-interrupted poverty in their lives.
Before any measure is prescribed, it is crucial to understand the modes of I.G. T. of poverty. Inheritance of physical capital, genetic inheritance, and investment of time and capital in care, education and health and socialization have been identified as modes of I.G.T. of poverty (Boyden & Cooper, 2009). A study by Corcoran explored that socialization has significant impact on income, employment and outcomes of children and focused on the implications of teenage pregnancy on subsequent generations, as children do not follow role models but they imitate the actions (Corcoran, 1995).

Out of three identified modes of IGT of poverty the present study would focus on the implication of a lack of transfer of resources on children in their health and education as a mode of intergenerational transmission of poverty. It is imperative to understand the role of some factors that determine transfer of resources and the lack of which creates a barrier in the transfer of resources (Boyden & Cooper, 2009). There is a need to research the factors which can either create resilience or find positive coping strategies or act as interrupters on chronic poverty by either preventing transmission of conditions conducive to poverty across generations or assisting chronically poor to bounce back from poverty. The poverty that grips vulnerable children (orphaned or disease stricken) has the potential to impact the lives of future generations as a result of the intergenerational cycle of disadvantage. Child poverty is different from adult poverty as it presents irreversible and lifelong consequences of missed opportunities in this crucial phase of capacity formation (Report of International Forum, 2006).

Cumulative and compounding effect of poverty is endured by children in terms of health which has tremendous influence on their survival and well-being. Prof. David Gordon by using comparative data on child mortality from poor and low capacity nations facing persistent and growing inequalities within and among nations, showed that children bear the brunt of extreme poverty in terms of multidimensional deprivations (Report of International Forum, 2006). On the contrary, there is evidence of individuals who are able to triumph over the negative outcomes of poverty and to prevent passing on poverty to successive generations.

More the dimensions of poverty, the more difficult it becomes to cross the barriers of chronic poverty about which James E. Foster emphasizes that “Increased time spent under poverty is associated with a wide range of detrimental outcomes especially for children” (Foster J. E., 2009). We need to look beyond money-metric indicators and focus on other significant dimensions such as health and education status which reflect basic capability as meant by Amartya Sen.

Mary, Young and several other authors give reasons for investing in children necessary to build human resources, which would in turn generate economic returns on investments for increased productivity and would reduce the need for health care later (Mary, 1995).

Barriers in the transfer of resources meant for capital formation from the older generation to the younger generation would create “child poverty”. However, some sort of barriers in the way of
transfer of resources are created by younger generations also which adversely affect the motivation and ability of parents to invest (Gunther & Klasen, 2009).

2.2.5. Indicators of Child Poverty

Though ‘child poverty’ reflects parent’s poverty, multiple dimensions of poverty were used to measure child poverty as an approach by using three indicators: rate of child enrollment in primary school, anthropometric dimensions and the rate of immunization for DPTs (UNICEF, 2000). ‘Save The Children’ campaign in UK developed a measurement of child poverty based on the capability approach called CDI (Child Development Index) that includes indicators of child well being. These are as follows:

(i) Primary education
(ii) Child immunization
(iii) Child nutrition

The profounder of the capability approach shows the interconnection between these factors in such a way that lack of one freedom creates barriers in the realization of others. But the understanding of the significance of timing of poverty in determining the poverty becoming chronic is of great significance in child poverty. Duncan and Others (1997) clearly indicate that a bad start in life by being born to poor households makes them most vulnerable groups because they face inequalities in access to resources and opportunities (Brooks & Duncan, 1997). While analyzing child poverty in 13 countries a study by UNICEF (2005) pointed out that economic deprivation is significant in itself because violation of the right to education, nutrition and health care creates a barrier in achieving their full potential and capacity to “survive, develop and thrive” (UNICEF, 2005), (Carter & May, 1999). Quisumbing asserts that the family is the site for intergenerational transfer of poverty. It is the locus where most consumption decisions and human capital investments are made, on which the present and future welfare of a child depends (Quisumbing, Investments, Bequests, and Public Policy, Intergenerational Transfers and the Escape from Poverty, 2009).

Children depend on their parents, elders, and caregivers in the family regarding the distribution of food and nutrition, health care, observance of hygiene, caring practices and education although a wide range of private or public resources ranging from tangible to intangible can be transmitted for the development of a child (Bossert, Chakervarty, & D'Ambrosio, 2008). Amartya Sen’s capability approach proposes the provision of positively valued basic conditions enabling to be free from illiteracy, disease, starvation and crime for future citizens of countries at all levels of incomes (Whelan, Lyte, & Maitre, 2003).
At household level the decision to invest in children in terms of health and education influences their welfare. A positive decision would reduce the risk of child poverty. The decision to invest in children is influenced by certain factors mentioned below.

### 2.2.6. Factors determining the decision to invest in children (at the household level)

1. **Ability to invest**
2. **Willingness to invest**
3. **Actual allocation of resources.**

#### 1. Ability to Invest

J. Lawrence Aber and others in their study have shown that poverty is associated with increased neonatal and postnatal mortality and morbidity rates, greater risks of injuries resulting from accidents, physical abuse / neglect, higher risk of asthma and lower development scores in a range of tests at multiple ages (Aber & Neil, 1997). Poverty squeezes the ability to invest. Ability to invest depends on certain factors viz. economic condition of the household, size of the family, education level of parents and availability of debt.

##### i. Economic Conditions

Economic resources provide the ability for parents to invest in resources for health and education of children for their “well-being” and “well-becoming” 19. It is evident that economic poverty robs people of their freedom to satisfy hunger, to achieve sufficient nutrition or to obtain remedies for treatable illness, the opportunity to be adequately dressed / clothed, to be sheltered, enjoy clean potable water or avail sanitation facilities. Therefore low ability to invest lowers the chances of transfer of resources in food, nutrition and health care of mother and child. Child and maternal nutrition and health status have been cited as critical in determining the irreversibility of poverty transfers (Radhakrishna, Rao, Ravi, & Reddy, 2006) in the form of stunting, wasting and underweight (Brooks & Duncan, 1997).

The study conducted by Duncan, Brook and Gunn (1997) concluded that stressful conditions during pregnancy and infancy can program the body in a way that leads to bad health and scar later development (UNICEF, 2000). Such children were considered as “transmitters of poverty” by a study conducted by UNICEF in the year (2000). Children who grow up with low physical and intellectual abilities determine the low effectiveness of further human investments 20 (Quisumbing, Investments, Bequests, and Public Policy, Intergenerational Transfers and the Escape from Poverty, 2009).

Economic constraints influence the parents in the decision whether to work or to undertake child care (Stromquist N. P., 1999). Poverty induced labor participation of lactating mother tends to deprive the child from getting breastfed and the mother also tends to overlook the special needs of the growing child making him / her vulnerable to diseases 21. Hence poverty in one way directly creates barriers in
building human capital formation through lack of capacity building and in another way it indirectly affects the health and education of child through poverty induced time constraint and lack of knowledge or awareness of parents.

Nothing other than education can be considered as an effective tool of interrupting chronic poverty. Escape from persistent poverty is possible by crossing the structural barriers and acquiring human or physical assets in the long run (Bhide & Mehta, 2006). But due to poverty induced coping strategies, children cannot avail even free education. Poor households spend their future savings in order to survive today by foregoing future gains (Shepherd, A Conceptual Framework for Understanding and Explaining Chronic Poverty, 2006). In his study conducted in 2006, A. Shepherd, asserts that if a poor household adopts a negative coping strategy of withdrawing boys from the school for income and girls are withdrawn from schools to look after the younger siblings and to help their mothers with household chores, then finding a way out from the chronic poverty becomes much harder (Lewis, 1968).

Hence the adverse impact of poverty induced coping and survival strategies restrict the transfer of resources from older generation to younger thereby preventing human capital formation, making intergenerational transmission of poverty possible (Rowntree, 1902).

ii. Size of the Family

Several studies have shown that the impact of poverty on the household with a large family to support is unfortunately harsh as children remain underfed, scantly clothed and bear over crowdedness which does not fail to arrest their mental and physical development (Rowntree, 1902). Shashanka Bhide et al (2006) recognized the relationship between truncated version of ‘the dependency ratio’ and increased susceptibility of persistence of poverty (Bhide & Mehta, 2006). Child poverty is indicated by “lack of primary education, lack of required anthropometric dimensions and lack of protection against diseases” (a study conducted by UNICEF, 2000). It actually reflects the lack of resources viz. income, assets, education and awareness and time at the disposal of parents. Quisumbing supports that larger family eases the entry into poverty and ceases the exit from poverty (Quisumbing, Investments, Bequests, and Public Policy, Intergenerational Transfers and the Escape from Poverty, 2009). A poor household with a large number of children, in order to meet the most pressing needs for their survival, tends to forego the long run goals of education and health. But how big is the temptation to take the child out from the school and send him/her to work and contribute to family income? The larger the family greater is the temptation (Baulch, B). The share of a child gets smaller from the resource pool for investments as the number of children increases (Baulch, Moving out of Poverty: Growth and Freedom from Bottom Up, Moving Out and into Poverty), (Falkingham & Ibragimova, 2005).

An analysis of a Composite Index of Anthropometric Failure (CIAF) used by Gaiha et al asserts, “larger the number of children under five, the greater is the competition for resources and higher is the
risk of under nutrition\textsuperscript{22} (Gaiha, Jha, & Kulkarni, 2012). Jesuit social services outline that less than two year gap between siblings is likely to cause irreversible damage to a child’s health. A. Shepherd (2006) asserts that risk of malnutrition increases with a larger household size as a consequence of a number of factors such as the lack of women’s autonomy over fertility, inadequate awareness about the use of contraceptives, illiteracy and lack of public services, women’s ideology and lack of economic security (Shepherd, A Conceptual Framework for Understanding and Explaining Chronic Poverty, 2006). Large size of family and disability of a child is more damaging as it creates financial burden and a loss of leisure time (when they can rest and relax) and productive time (when they can earn).

iii. Education of Parents

Education of parents should be considered as parental wealth which determines the ability of parents which facilitates human capital formation of their children. Shashanka Bhide et al (2006) cited the evidence of the study conducted by Gaiha and Deolalikar (1993), who used ICRISAT panel survey and showed that the low literacy level of the head of the family is a key factor in the transmission of poverty across generations (Bhide & Mehta, 2006). A study in urban Bangladesh by Naila, Kabeer et al (2004) exhibits a positive relationship between education of parents and education of children as the former are in a better position in guiding and providing the appropriate environment to latter (Kabeer & Mahmud, Imagining the Future: Children’s Education and Intergenertional transmission of poverty, 2004). Behrman (1997) and Mary Eming Young (1996), emphasized that educated parents value the education for their children and help them in studies providing a suitable environment for the same as they have the desire to educate their children which results in delayed marriage and a decline in fertility (Behrman, 1997), (Mary, Early Child Development: Investing in the Future, 1996), (Falkingham & Ibragimova, 2005).

Behrman supports the argument that women with higher levels of schooling tend to delay marriage and childbearing resulting in decline in teenage pregnancy and fertility rate. Several other studies emphasize the importance of awareness and education of parents in preventing the intrauterine retardation of the child in the womb and in the later years. Bhargava refers to malnutrition as growth failure which can damage intellectual capacity, poor bone formation, cause blindness and impair the immune system (Bhargava, 2003). So the irreversible physical and intellectual damage can possibly be prevented by women's literacy. Better educated and well informed parents can save their children from preventable diseases through proper immunization, nutrition, and timely medication. So lack of literacy and awareness can create barriers in transferring the resources for investment in children.

iv. Debt

Debt can be used as a cushion for consumption variation in escaping starvation death and preventing nutrition related diseases thus preventing negative transfer of capital. Quisumbing cited the work of
Gilligan (2006) to show the adverse effect of credit constraints on height and educational attainments of a child (Quisumbing, Investments, Bequests, and Public Policy ,Intergenerational Transfers and the Escape from Poverty, 2009).

Provision of micro credit helps smoothen out a variation of income in the short run (Bhide & Mehta, 2006) . Uma Kothari is of the view that in the absence of the credit market many poor stay put in poverty due to lack of minimum assets , as it is difficult to adopt a migration strategy in tapping better livelihood to find a way out from poverty (Kothari U. , 2002). Removing financial constraints though cash assistance to poor households reduces the impact of parent’s constraints to finance human capital in their children in terms of education, skill and health . Barrett, Carter and Ikegami, (BCI), (2007) are of the view that those who are relatively low skilled remain intrinsically chronic poor (Barrett, Carter, & Ikegami, 2007). Moore (2001) highlights the negative impact of unpaid debt being passed on to the next generation, especially to the son. The “Cycle of debt (Moore, I D D,School of Public Policy, 2001), and the institution of ‘bonded labor’ (particularly in south Asia) remain effective mechanisms of intergenerational transmission of poverty” (Bhide & Mehta, 2006).

v. Social Capital

Better outcomes can be achieved in the form of reduced crime, enhanced educational achievements and better health by developing social capital. Judson Hanifan championed the use of the concept of social capital and stressed its importance for developing goodwill and sympathy among members of the community which enhances productivity. According to Woolcock, social capital refers to a wide range of resources developed by bonding with the immediate family, close friends and neighbors, by linking to loose friends and colleagues and by making connections with outside the community, which are advantageous (Hanifan, 1916).

Making connections with the outside community are advantageous in getting job and in obtaining resources in time of emergency. People may share childcare, ensure their safety, borrow money and have an increased chance of voice, and thus are able to achieve goals which otherwise wealth (money, time, education) possibly could do. Putnam and others demonstrated the beneficial impact of social capital in shaping the well being of an individual and also of a child by providing information (Putnam, 1995).

Strong connections enhance the ability to improve their economic conditions as networks of households provide needed cushion against any shock. But due to lack of freedom women are deterred from developing close ties even with their own kin, from meeting relatives and friends, from participating in the social activities of the community, thereby creating barriers in accessing resources and opportunities from which benefits could trickle down to them.
2. Willingness to Invest

Transfer of resources to the next generation depends not only on the ability to invest but also on the willingness to invest. The willingness to invest in health and education is influenced by certain factors viz. motivation, parents’ perception of a child’s ability, priorities of parents and fluctuations in living standards.

- Motivation

Investments benefit both parents and children. Ideally parents are concerned about well being of their children (son and daughter) equally but are unable to distribute their resources amongst them equally. Quisumbing, asserts that parents’ own well-being and their “old age security” considerations are the key factors which form the motivation level to invest more on the sons rather than the daughters (Quisumbing, Investments, Bequests, and Public Policy , Intergenerational Transfers and the Escape from Poverty, 2009). Besides, the son is considered as a sure and safe haven for returns on investment. Therefore, sons have an edge over daughters because daughters would go to their husband’s house, and would not provide “old age security” to their families. Therefore parents have the motivation to ensure returns for their “old age security”. Child’s disability resulting from low expectations of parents and leading to low motivation has been explained by many scholars (Berry & Dalal, 1996), (Aber & Neil, 1997).

- Perception

Parents’ perception of a child’s ability to perform lying in his / her area of interest, his / her health, level of intelligence, his/her hard working nature that influences the willingness of parents regarding the transfer of resources goes into making of human capital formation. J. Lawrence Aber (1997) says that poor households who quite often reside in slums or resettlement colonies are exposed to variety of undesirable environmental hazards viz. pollution, violence, crimes, child abuse and drug abuse. In these conditions, parents form low expectations for their children which restrict their willingness to invest in child (Aber & Neil, 1997). A child is regarded as a source of income for a poor family which can improve their economic condition. Therefore, they have no choice but to forego his long-run gain from education. Thus, parents with meager income cannot afford even absolutely free education which means loss of income for them.

- Variation in Standards of Living

Lack of surety of regular income, influences the perception of parents. Therefore, they are unable to allocate resources on the basis of their priorities with confidence. As a result, quite often expenditure on education and health care takes a back seat and they retain almost all their income for food only, fearing a shortage of life sustaining resources could be disastrous.
Radical fluctuations in the standard of living are more detrimental to a child’s development than low income, observes Quisumbing (Quisumbing, Investments, Bequests, and Public Policy, Intergenerational Transfers and the Escape from Poverty, 2009). Such insecurities rather than the low standard of living itself affect the willingness of the parents to invest in children quite adversely.

3. Actual Allocation of Resources

Now to answer what happens to actual allocation of resources among all children is not that simple even if a household has the ability and the willingness to invest. Answering the question as to what goes into decision regarding actual transfer of resources from older generation to the younger generation in terms of health and education is not that simple, as factors directly and indirectly influence in isolation or in combination. Therefore, compartmentalization of factors that influence the ability to invest, willingness to invest and the actual allocation of resources is difficult.

The relative autonomy of men viz a viz women has a significant role in the bargaining process, therefore it has to be probed. Quisumbing highlights the factors which can influence the bargaining process and they include legal rights, skills, knowledge, and the capacity to acquire information about education and bargaining skills (Quisumbing, Investments, Bequests, and Public Policy, Intergenerational Transfers and the Escape from Poverty, 2009), (Andal, 2002). Several other studies also demonstrate that resources (money, time, education) controlled by parents play a significant role in the household resource allocation towards health and education of children. Neerja Kuckreja, Sohoni (1998) as cited in Andal, show that asymmetry in the status of girls viz. a viz. boys within the family is reflected in the motivation of the parents regarding investment in them (Andal, 2002). A strong predilection for the birth of a son rather than daughter is a cause and consequence of female’s low status (Jejeebhoy S. J., 1995) . N. Andal explains that the low status of women is reflected in deprivation of schooling, education, health care and even in life sustaining resources ( (Andal, 2002) . She does not have even equal life chances before birth owing to grossly unequal maternal nutritional status. Martha Nussbaum believes that these inequalities or entitlement differentials influence maternal nutritional status, health care, bodily integrity and emotional well-being which affect the life chances from womb to tomb (Martha, Women and Human Development :The Capability Approach, 2002). N. Andal rightly explains the impact of violence inside and outside the house that squeezes the horizon of a woman’s opportunities, takes away her physical mobility, snatches control over her body, captivating her in a narrow range of choices, consequently reducing welfare (Andal, 2002). Smith and others (2003) are of the view that increase in women’s control relative to men over resources like time, information and health services tends to increase the nutritional and health care status of women resulting in better health outcomes of their children (Smith, Ramkrishnan, Ndiaye, Gaddad, Lawrence, & Martorell, 2003). The authors are also of the opinion that “Improving women’s status today is a powerful force for improving the health, longevity, mental and physical capabilities and productivity of the next generation”. A study by Doss and Cheryl (1996) demonstrates from a household survey
conducted in GHANA that the percentage of assets owned by women has significant impact on household expenditure decisions and is considered as an indicator of women’s bargaining power (Doss, 1999). Another study by Becker (1996) suggests that the household decision-making results in improvement in household welfare regarding healthy food and higher education because women understand the need of each member of the family better than men and most of the times they are the sole caregiver of the children (Becker, 1996). Therefore, her education and level of awareness is really important for the welfare of children. Maitra and others (2006) have put forward a different view that the welfare of the household is better protected in those households where bargaining power is equally distributed between husband and wife than where one partner decides in isolation (Lancaster, Maitra, Ray, Geoffrey, Maitra, & Ray, 2006). Mayara and King 2007 support the view that the resources at the command of women enables her to take decisions which are beneficial for children, thereby reducing the risk of child poverty and preventing intergenerational transmission of poverty (Buvinic & King, 2007).

A question regarding the relative importance of the head of the family, on the actual allocation of resources on children is debatable and we find varying evidences on it. The view quoted by Harper, Marcus and Moore shows the negative implications on children, growing up with one parent for their welfare (especially mother) (Harper, Rachel, & Karen). The view that economic dependency and cultural inhibitions make it difficult to access resources for self and for children in a single female headed family (Rao S. V., 2012) may not be correct because where the prime responsibility of the male is to provide financial support, we find pronounced resource allocation differentials, making the experience of poverty worst for women and children.
Section 2

2.3. Women’s Empowerment

“Woman is the companion of man, gifted with equal mental capacities. She has the right to participate in the minutest details in the activities of man, and she has an equal right of freedom and liberty with him”.

(Mahatma Gandhi, ‘The Story of My Experiments With Truth’)

2.3.1. Introduction

Indian society needs to look beyond what restrictive code of conduct for women was prescribed by Manusmrity (9:3) in ancient times because they are still holding the most vulnerable position even in the so called educated milieu of today.

2.3.2. Status of Women

She suffers from discrimination and gets sustained by perpetuation her image as a complement to men is perpetuated and not a person of her own. As a result, the gender division of labour which also results in the spatial division, gets reinforced. Her domain of work and life remain the household whereas men operate conveniently in the public sphere where laws and policies are made. Susheela Kaushik (1985) explained the factors such as households, market, community, language, literature, religion, and politics maintain patriarchal relations (Kaushik S., 1985). That these constellations of forces militate against women labor participation, has been argued by Arora et al (Arora, Johnsson, & Seema, 2008). Women bear the brunt of poverty and inequalities silently which is the manifestation of power relations. Assignment of domestic responsibilities and distribution of resources between men and women is so deeply institutionalized in household rules and in practices that it appears non-negotiable. Women accept these norms implicitly without any dispute as certain agendas are non-negotiable (Kabeer, Reversed Realities, Gender Hierarchies in Development Thought, 1994). The Approach Paper to the Tenth Plan also recognized that subordination and domination of women in households and in communities by men has been the reason of her voicelessness. Her voice is hardly heard, respected and responded to. Often they are silenced by their gendered ‘otherness’ (Stromquist, 1990, 1996). Power relations in the form of dominant and subordinate are governed by socially and culturally structured norms. It systematically benefits certain individuals (men) at the expense of others (women). Social norms and values play a crucial role in concealing the reality of gender asymmetries thereby defusing gender conflict. Women are made to believe that inequalities between dominant and subordinate are due to misfortune rather than social injustice. They are unaware of their own oppressive implications therefore incapable of imagining alternative ways (Kabeer, Reversed Realities, Gender Hierarchies in Development Thought, 1994).
Exclusion and Status of Women

To examine the connection between exclusion and the status of women would enrich our understanding of poverty and multidimensionality of deprivations with regard to women.

The concept of ‘exclusion’ is linked to the ‘deprivation’ of the marginalized and discriminated groups. ‘Social exclusion’ means “denial of equal opportunities” which results in “inability of an individual to participate in the basic political, economic and social functioning of the society (Thorat, 2013). ‘Social exclusion’ has been referred to by Sen (2004) “as the processes through which individuals or groups are wholly or partially excluded from full participation in the society in which they live”. Exclusion may operate through restriction on the entry in the market (economic sphere) through market discriminations and inequalities through social relations (Haan A. D., 1997), (Mayra, 2005), (Sen A., Social Exclusion, 2004). The connection between social exclusion and capability deprivation is established as an approach to see poverty as multidimensional. However, by adopting a broader approach, Sen (2004) shows that the lack of freedom to do certain valuable things may lead to economic poverty which may lead to other deprivations. An understanding of the household resource allocation is crucial which is the manifestation of “relational roots of deprivation”. The asymmetries in the household resources allocation and responsibilities make the experience of poverty more pronounced for women (Fafchamps, FCND discussion paper No. 55), (Sudershan & Bhattacharya, 2004), (Bolt & Bird, 2003) making them vulnerable to diseases, and making their children also vulnerable to diseases, creating conditions of intergenerational transmission of poverty (IGT), (Radhakrishna, Rao, Ravi, & Reddy, 2006). The problem of inequality is aggravated and deepened with the loss of ‘power, voice and self confidence’ (UNDP-Report, 2010).

Exclusion and Consequences

Another exclusionary mechanism for women consists of the ways in which she is presented differently and unequally in the market (Fraser, 1989). Deprivation of social relation can result in deprivation in other dimensions. Boserup (1970) and Tinker (1990) argued that women’s exclusion from economic activities results in their impoverishment (Boserup, 1970), (Tinker, 1990). A study by Bardhan (1984) identified that landlessness and credit constraints have been the causes of social exclusion for women (Bardhan, 1984). However, Sen emphasized not on the endowments people possess, but on their capability to do so. The actual practice of ‘exclusion’ which women face are the inabilities which are not accidental rather they are the consequences of socially and culturally constructed patriarchal prejudices against women. The powerful dominating positioning of men coupled with inferior and subordinate position of women, prevents women from taking independent decisions (Fox, 1999). In her book Sexual Politics, Kate Millet blames the tyranny of conforming to a sexual stereotype for women’s immemorial subordination by linking her social status to the capacity
to bear children and making biology her destiny (Millet, 1970). The biological determinism has exerted an insidious force that “this is my destiny, my role, my place” which creates a barrier of ‘non-negotiable agendas’ in reshaping and wielding new roles, new activity, adding new dimensions (Beteille, 1999).

- **Exclusion and disempowerment**

So the starkest indicator of women discrimination as a manifestation of exclusion is the increasing trend of declining demographic indices (Sen A., Development as Freedom, 2000), (Agnihotri, 2000). International conventions and women’s movements highlight the urgency of improving women’s status¹ and narrowing the gender² gap in education, skill development, nutrition and health care. Women face gender gap in almost all important aspects of life which do not allow women to have informed choices on their health, nutrition and reproduction rights. Gendered pattern of household resource allocation makes the experience of poverty more pronounced for women (Fafchamps, FCND discussion paper No. 55), (Sudershan & Bhattacharya, 2004), (Bolt & Bird, 2003), making them vulnerable to diseases, and making their children also vulnerable to diseases, creating conditions of intergenerational transmission of poverty (Radhakrishna, Rao, Ravi, & Reddy, 2006). Mariarosa Dalla Costa recognizes women’s invisibility largely due to their economic functions in ‘breeder – feeder’ role, however Marxist economists view invisible services in ‘breeder – feeder role’ of women as the foundation of capitalism and its sustenance. Similarly, Dickenson’s view that women have always remained deprive of property in comparison to men also supports the same argument (Dickenson, 1997).

Men have occupied the center stage of the family and have been recognized as the ‘bread earner’. Most societies have dictated roles to men and women. By virtue of having a biological specialization of child bearing, the task of rearing goes to her, so woman who is confined to home serves as input for man’s freedom to get engaged in the outer world to become the ‘bread earner’

- **Disempowerment and Poverty**

N. Kabeer refers to the association of poverty and disempowerment that erodes the ability to exercise meaningful choices because of unavailability of alternatives. For example, during economic crises, adopting survival tactics is logically imperative for a poor household. Children are forced to leave studies in order to earn for the survival of the family. The necessity of income contribution by a child outweighs the significance of future gains from education of children. But often the axe of poverty in terms of coping strategy falls on girls and women as a result of gender discrimination. Naila Kabeer (2008) cited a study by A Du Toit (2004) which implies that women’s exclusion from mainstream drive chronic poverty and emphasizes that social power and assets are adversely influenced through patriarchal values. Study identified that the “wider systemic dynamics of inequality, impoverishment,
and conflict keep the labourers in a situation of chronic poverty and insecurity” (Eyben, Kabeer, & Cornwall, 2008).

Nelly P Stromquist (1999), believes that due to limited domestic infrastructure as a result of poverty, subordination of women takes place. Discrimination against women prevents their entry into employment on equal monetary terms with men. A British Prime Minister remarked that enacting a legislation of equal pay for equal work for men and women is only a beginning. To make it a reality, minds and hearts of men have to be transformed. Provision of education alone is not sufficient to reduce ‘gender wage gap’ as it emerges not due to an educational difference alone but due to gender discrimination (Stromquist N. P., 1999).

Therefore, it would be grossly misleading if we consider women’s disempowerment largely a matter of poverty. A systematic gender difference in basic fundamentals of survival and well being (such as good healthy adequate shelter, clean water and reasonable clothing) that reflects inequalities in capacities is due to factors other than the consequence of grinding poverty. Farther, a reduction in poverty does not automatically reduce gender inequalities in basic fundamentals of well-being. Capability deprivation that gets reflected in the inequality of resource ownership has been continuing due to socially constructed barriers. The inequality of access to resources and opportunities are exacerbated if women belong to a minority class (Thorat, 2013).

2.3.3 Status and Disadvantages of Women

Now against the backdrop of this introduction, a pertinent question arises as to why women do not acknowledge the all pervasive discrimination faced by them. On one hand, women fear to lose self worth and on the other they fear to have tension owing to power relations in the system in which every man and women are guaranteed equality.

Whereas women’s preoccupation with family’s well-being, restricted her mobility and created the sense of self sacrifice, certain behaviors which are socially constructed are perpetuated by herself through socialization, because they internalize what is expected from women (not only from husband, family and society but by themselves) (World Bank, 2001).

Acceptance of oppressive gender relation has been inculcated by building a mindset and behavior through socialization which provides a ground for its sustenance (Chomsky, 1986). The adverse implication of acceptance of inferior social status of women by internalizing gender discrimination is the loss of well-being of their own and of other female members. By internalization of their status, women are seen to choose those behaviors themselves unquestionably which are expected from them in maintaining the dominant position of husbands.

Accepting the conditions of disadvantage like discrimination and inequalities as ‘granted’ would build a ‘pernicious form of agency’ that would diminish the capacity to aspire for a better and different
relationship and behavior. The problem of inequality is persistently strengthened when the disadvantage group teams with negative institutions which results in self exclusion from public domain and low self esteem.

Easter Boserup in her work focused on disadvantages specific to women and pointed out the injustice done towards women by not acknowledging their vital contributions to economic development. It was her eminent work of intellectual and compassionate concern which made us think ‘development’ in connection with patriarchal gender relations (Boserup, 1970). The failure to achieve poverty eradication was due to its orthodox assumption that economic growth meant automatic trickling down of benefits to poor masses and due to lack of consideration to gender based division of labor in the development policy. Cagaty rightly observes, “the Gender-based division of labor between paid and often reproductive labor and unpaid labor renders women economically and socially more insecure and vulnerable” (Cagaty, Gender and Poverty, 1998). From the mid 19th century to 20th century women continued to be recognized as the ‘custodians of traditional cultural values’ and are looked upon as responsible for upholding the family and play a complementary role to their husbands as discussed by (John, 2012). However, the husband by virtue of being bread earner and head of the family, has the responsibility of taking decisions within the household.

That inclusion of women in public discourse and policy is the outcome of the changing intellectual climate has been revealed by Shirine M Rai in her eminent work (Shirine, 2008). An important development in feminist works as argued by her, has been a shift in plea for inclusion of women in empowerment literature, from seeing women aspiring to step into the men’s domain, to be seen as a victim in patriarchal socio-political system and later to be acknowledged as ‘agent of development’ which propagates gender mainstreaming. The trajectory of development of women’s empowerment in literature is reflected in policy making being adopted at national level also.

2.3.4 National Policy: Reflecting a Trajectory of Women’s Empowerment

Gender equality in the sense of equal access to and opportunities for men and women, has been advocated by UN System and its various agencies ever since it adopted the Universal Declaration of Human Rights in 1948. But Vina Mazumdar considers the year 1931, a landmark in the history of the international women’s movement because the Chinese Communist Party agreed to adopt gender equality as a resolution (Mazumdar V. B., 1975).

- Approaches Towards Gender Equality in Plans

Since the launch of first five year plan in India, gender mainstreaming got priority in order to honor the constitutional obligation towards gender equality and several specific legislations and programs have been formulated. However, the process of refinements continued throughout the planning process in the light of the experiences and recommendations and resolutions passed at international
level and national levels. However, our constitutional obligations are yet to be realized (Report of Steering Committee). Vina Mazumdar regarded that the persistence of trends such as the institutions like dowry, domestic oppression, prostitution, and commercial use of women as the reasons for remaining constitutional guarantees on gender equality unfulfilled. Vina Mazumdar concluded by saying that most Indian nationalists quite did not understand the “political significance” of gender equality in the national building process, despite of Nehru’s assertion quoted by Dr. Sarvpalli Gopal that the real test of civilization depends on how woman is treated in the society (Mazumdar V. B., 1975).

Up to fifth five year plan ‘women in welfare’ approach continued to recognize women as passive recipients of benefits of development in terms of education and health. Their participation in economic development was never stressed upon. Vina also argues against conservatives who associate women only with ‘proper role’ in the society (as being mother and wife), therefore opposed women’s labor participation in paid employment that further put her in a deplorable and vulnerable position (Mazumdar V. B., 1975). They remained marginalized as no economic resources to ensure their participation in decision making were earmarked and government showed dismal performance even in social sectors (Heward, 1999). The concept that there can be no gender equality without economic independence was incorporated only in India’s sixth five year plan.

In 1980s, a shift in approach from ‘women in welfare’ to ‘women in development’, gained momentum which propagated ‘gender analysis’ in recognizing the gender inequalities, but fell short in understanding the complex and interdependent nature of gender relations within the household that reduced the effectiveness of policies meant for women. Therefore her specific needs, her constraints and her unacknowledged contributions couldn’t draw attention in policy making (Report of Steering Committee).

In mid 1980s, India was one among the one hundred and eighty five countries that signed the convention for the elimination of all forms of discrimination against women (CEDAW), gave boost to women’s empowerment programs to ensure the percolation of the benefits of development to women. As early as 1985, the majority of the developed and developing nations established formal machinery for the elimination of all forms of discrimination against women (CEDAW) and promote gender equality.

Gender equality in the sense of ‘equal access and opportunities for men and women’ has been advocated by UN systems and its various agencies, ever since it adopted the Universal Declaration of Human Rights in 1948.

The concept of women’s empowerment was initiated by feminist activists at the Fourth World Conference on women in Beijing in 1995 and is considered as the process of gaining control over
their lives and bringing about changes in gender inequality. Bette (2006) supported the idea that empowerment is a process through legal and cultural changes.


Consolidated efforts were made for spreading awareness and some major steps were taken to facilitate the poor, disadvantaged, propertyless, powerless and voiceless women through provision of crèche services for employed mothers. It also highlighted the significance of nutrition, formation of self help group for their economic and social empowerment (Report of Steering Committee).

Besides celebrating the year 2001 as women’s empowerment year, the National Policy for Empowerment of Women 2001, was formulated in conformity with the strategic objectives underpinned in the Beijing Platform for Action, CEDAW states that “all appropriate measures shall be taken to educate public opinion to direct national aspirations towards the eradication of prejudices and the abolition of customary and all other practices which are based on the idea of the inferiority of women” [Article 3 of United Nations’ declaration on the Elimination of Discrimination against Women (CEDAW) in 1993] and India’s commitment to achieve United Nations MDGs (2000).

As envisaged in National Policy 2001, the 10th Plan sought to bridge the gap between policy commitment and allocation of scarce resources meant to eliminate gender discrimination in all forms, for gender mainstreaming. Several activities meant for economic empowerment through training, employment and income generation were initiated, while social empowerment through education and awareness generation was proposed. Government of India launched several initiatives like Rashtriya Mahila Kosh and Mahila Samkhya Programs in order to protect the interest of women belonging to weaker sections, engaged in the informal sector, (Approach Paper to the tenth Five Year Plan (2002-2007)), (Report on Government of India). The 10th Plan laid stress on specific measures to reverse the juvenile sex imbalance (an indicator of inferior status of women), which is an indicator of non fulfillment of constitutional policy ‘Social Safety Nets’ formulated under the National Policy on Empowerment of Women 2001, in the Ninth Plan, in order to ensure “the requisite access of women to information, resources and services” and achieve the targets set in the National Populations Policy 2000, for sustainable development (Report on Government of India).

Under poverty alleviation program, empowerment of grass root women’s group would not only benefit poor women, (who is being recognized as an agent of growth) but would contribute to growth. Women are labeled as vulnerable, not only because they are poor, asset less and illiterate as compared to men but also due to reasons of their vulnerability that arises from their inability to bargain within and outside the household and also due to the lack of participation in the process of
integration with the mainstream economy, society, cultural and political system. Despite the development strategy, women continue to be deprived of benefits emerging from the normal, market led growth process as they remain unable in realization of their full potential (Approach Paper to the tenth Five Year Plan (2002-2007)).

2.3.5 Meaning of Women’s Empowerment

The term ‘empowerment’ with reference to women is the result of discourses on women’s unequal status, held at national and international platforms. The concept of ‘empowerment’ has been widely interpreted in different contexts and is considered as multidimensional. Many scholars have used the concept of ‘power’ in relation to empowerment as an inseparable component. Oxaal and Baden (1997) associated the term ‘power’ as the core of ‘empowerment’ in the following ways; firstly power over a relationship of subordination; secondly power to take a decision that involves authority; thirdly power to organize to realize common goals; and lastly power at the individual level that involves self confidence, awareness and consciousness (Oxaal & Baden, 1997). Beteille defined ‘power’ citing Max Weber, as an ability to realize one’s goals even against resistance which requires active or passive resistance. She also stated that the process of empowerment and disempowerment goes simultaneously (Beteille, 1999). The concept of ‘empowerment’ as defined by Naila Kabeer (2005), Rajimwale (2004) and Sachidananda and Kumar(2006) as the process which requires a radical transformation of power relations, as Luke in 1974 presents ‘power’ as insidious when it becomes a way of life (Kabeer, Gender Equality and Women's Empowerment, 2005), (Rajimwale, 2004), (Sachidananda & Kumar, 2006). In similar thinking, Sachidananda and Kumar (2006), asserts that empowerment is the redistribution of power that challenges the male ideology and domination that perpetuates gender discrimination. “The principal goal of empowerment has not been the assertion of power over men, it has been to reduce and eventually eliminate the power differential between men and women and thus liberate themselves from oppressions and wrought by male domination” (Troutner & Smith, 2004).

Empowerment is the process with which people attain consciousness of their own interest and can participate in and influence the decision making affecting their quality of life, and involves change. A change required to be enabling in the sense of Naila Kabeer (2001) who defines empowerment as “the expansion in people’s ability to make strategic life choices in a context where this ability was previously denied to them”. Empowerment programs can create conditions for capability building to make strategic choices through participation in the strategic domains of life pertaining to individual, societal and community level (Kabeer, Reflections on the Measurement of Women's Empowerment in discussing Women's Empowerment-theory and practice, 2001).

There are several and diverse opinions on the ways through which empowerment may be achieved. Control of resources would enhance empowerment. Dyson and Moore (1983) try to associate
enhanced empowerment with women’s access to land through right to inherit property. But the actual empowerment depends not on the legal entitlements in favour of women but on the acceptance by the community itself (Dyson & Moore, 1983). It has also been observed in literature that in order to save the relations from turning ugly, or from getting killed by their own family and community, women succumb under tremendous pressure, as they find no alternative but to waive off their rights to inherit property. N. Kabeer (2001) observes, “changes in the resources that individuals enjoy, but which leave intact the structures of inequality and discrimination may help to improve their economic welfare without necessarily empowering them”. In other words, change in social structure is empowering which would enhance their welfare.

Nancy Hartsock refers to ‘power’ in the sense of capability to bring meaningful change. Naila Kabeer (2004) finds a close and mutually reinforcing connection between ‘Power within’ and ‘power with’ (Garrett D. J., 2008), which have been identified as modes of empowerment (Troutner & Smith, 2004). Dahl (1961) captures the notion of power in the sense of capability when he asserts that the ownership of resources does not indicate power but the decision to use the resources does indicate it. However, Rowlands believed in a much broader notion of empowerment which is more than just participation in decision making but includes the process that leads people to perceive themselves as able and entitled to make decisions (Rowlands, 1997).

Resources, agency and achievements are three dimensions of empowerment. Resources (material, social or human) offer dignity and self-worth. ‘Agency’ often tends to be operationalized as individual decision making either through “bargaining or negotiation or deception or manipulation or resistance or protest (Kabeer, Sida Studies No. 3, 2001). ‘Agency’ another aspect of unobservable power in the positive sense refers to people’s capacity to define their own life choices and to pursue their own goals, even in the face of opposition from others, and in negative sense agency refers to the lies, violence, coercion to capture other’s agency (Sen A., Commodities and Capabilities, 1985). According to Sen capacity is determined by resources and agency together. The term empowerment as elaborated in Draft Policy Guidance Note (2008) (Draft Policy Guidance Note: Social Protection, Poverty Reduction and Pro-poor Growth, 2008), has been adopted by members of POVNET who do not include the notion of power while referring to empowerment. But they mean broadening the horizon of freedom of poor people’s choices and action, resources and capabilities making them capable of taking charge of their lives by participating, negotiating with, influencing, controlling and holding institutions accountable for the decisions that affect their lives (Kabeer, Magnus, & Stark, Global Perspective on Gender Equity: Reversing the gaze, 2008). So it is the kind of freedom in Jean – Paul Sartre, a French philosopher and writer’s way who states “Freedom is what you do with what’s been done to you”. Naila Kabeer et al (2008) used the explanation of Draft Guidance (2008) to achieve the freedom that brings improvement in livelihood, reduction in discrimination, and overall contribution to the realization of human rights. It would bring changes in their own lives.
The major discussions on various components of women’s empowerment in the major International Conferences in 1990s, highlighted five key elements:

1. Women’s sense of self worth.
2. Their right to have and determine the choices.
3. Their right to have access to opportunities and resources.
4. Their right to have the powers to control their own lives, both inside and outside the house.
5. Their ability to influence the direction of social change to create a more just social and economic order.

To conclude, women’s empowerment has been envisaged as a multidimensional dynamic process involving interrelated and overlapping dimensions with which

- people attain consciousness about their own interest
- can participate and influence the decisions affecting
  - the quality of life of their own
  - ‘well-being’ and ‘well-becoming’ of their children.

It requires change by changing the relations of power that have been keeping them in subjugation and poverty. Therefore, to make the process of empowerment meaningful and sustainable, a change must occur not merely on the surface at the micro level but beneath the surface at macro and meso level also.

**2.3.6 Enabling Environment / Paths to Empowerment**

The Ninth Plan emphasized the need to create an enabling environment for empowering women through effective convergence and integration of existing resources, services, infrastructures, and manpower, for a broader and changed role to women as opposed to socially constructed stereotype restricted roles. Empowerment program creates conditions and opportunities as an enabler through awareness generation.

It would enable them to exercise their rights freely and like equal partners as men (Ninth Five Year Plan), both within and outside the home and help in bringing substantial change in their lives in different dimensions.

The information and awareness through radio, T.V., NGOs, etc. raise consciousness and encourage to them assert their rights within and outside the home. Devadoss and Selvaraj (2008) placed high priority to the realization of full identity and powers in all spheres of life, generating better outcomes.

Sudarshan and Swapna (2003) argued very correctly that equalities in other areas do not seem to be real unless economic equality is realized. Gender equality in the tangible sense, can be achieved by providing enabling environment in terms of legal and constitutional framework of rights/obligations,
would help her raise her voice and change the ascribed role. Therefore, the main focus is to bring change in the ‘ascribed’ roles of men and women in realizing the goal of gender equality (Mukhopadhyya & Ratna, 2003).

Dreze and Sen (1996) evidently support the idea that the ability to earn an income independently through remunerative employment would enhance voice in the family which would improve her well being (Dreze & Sen, 1996). Rosalind and Nila Kabeer (2008) attempted to prove through research that the belief that economic empowerment as an entry point of empowerment in other domains does not hold (Eyben, Kabeer, and Cornwall, 2008). However, women’s freedom to get into the labor market and their autonomy in the household is the true indicator of empowerment (Hoddinott and L, 1995), (Hoddinott & L, 1995). Helen I. Safa (1981) cited by Sue Ellen M. Charlton on associated issues of women labor participation, observes that “a job may give women a degree of economic autonomy and loosen the bonds of a patriarchal family but it also exposes them to a new form of capitalist exploitation and state control” (Charlton, 1984).

Physical mobility attained on account of employment has been acknowledged by many in the literature but many find it illusionary. A question, whether working out is a kind of enforced mobility or real freedom, also arises. However, the experience shared by working women associated with SEWA shows more than just income in the form of spillover effects in terms of self confidence and new roles when they work together (Bhatt, 2006).

But role reversal is not easy though men may tolerate gender equality to some extent. Even greater participation of women in paid employment may not provide freedom in decision making or ensure autonomy automatically. Paid Employment as a medium of achieving empowerment is not that easy.

Swapna Mukhopadhyya cited the reference of Abadian (1996) showing that control over their fertility behavior is a good indicator of ‘autonomy’ (Mukhopadhyya & Ratna, 2003). Ability and freedom to choose partner and to decide the preferable age of marriage and level of education are related to one’s autonomy that reflects social consciousness. They also observed that domestic power to women comes with the birth of a son or with the growing age (Mukhopadhyya & Ratna, 2003).

This argument is supported by Sunny Jose with evidence. The vast majority of women work from dawn to dusk but their innumerable physical contributions remain unremunerated. Consequently, they are reduced to ‘non entities’ (Jose, 2008).

The freedom to get into the labor market to earn income and to be able to contribute perceptibly in the family gives force to women’s voice and autonomy, resulting in reduction of women’s relative and absolute multidimensional deprivations (improving intra household resource allocation), lowering of fertility and mortality. Her involvement in remunerative job positively affects agency role, which works through many channels. Through her enhanced autonomy she is able to look after the well-
being of her children and enables her to get equal share and appropriate entitlements for her female child (Sen A., Development as freedom, 1999).

Sunny Jose (2008) asserts that women in paid job enjoy more autonomy. But their poverty induced employment cannot be associated with enhanced autonomy significantly. Tinku Paul (2009) holds that work participation brings overall empowerment of women besides making them financially independent, confident with high esteem but the importance of quality of employment, women are engaged with cannot be undermined (Paul, 2009). Woman being poor and barely literate, constipated with restricted mobility, who has to seek permission from elders in the family, does not consider herself a regular worker, finds rescue in informal sector (Jose, 2008). So compartmentalization of activities requires hard work but no skill and technology from women. On the bases of this argument, N. Andal explores why women are found disproportionately in the least skilled lowest paid jobs (Andal, 2002).

The informal sector as characterized by Professor C.S. Venkata Ratnam et al., engages people in deplorable conditions of work, with long hours, less remuneration with no social protection and security (C, Thakur, & Santosh, 2007). Therefore, poverty induced paid employment cannot be associated with more ability and power in decision making; rather it increases their work load and reduces the opportunity to rest. Because working outside the house would entail making a choice between income and leisure, thus she would sacrifice her leisure but would never fail to do the ‘prescribed’ stereotypical role in the household.

Self employment provides women flexible hours, permitting them to look after children and perform household chores besides contributing income in the family pool. But Ela R. Bhatt (2006), describes the struggle of self employed women for their survival who often ignore their own health due to lack of nutrition and health care despite of awareness of the significance of their body, the only asset they have (Bhatt, 2006).

2.3.7 Relationship between Gender Equality and Reduction in Poverty

The statement given by former Un Secretary General Kofi Annan, “Gender Equality is more than a goal in itself, it is a precondition for meeting the challenge of reducing poverty, promoting sustainable development and building good governance” shows how valuable gender equality is. MDGs have also recognized the importance of gender equality and empowerment as an end and means of combating poverty and starvation and promote sustainable development. It is only through this path ‘a world fit for children’ can be created. MDG should be viewed as endorsing already existing agenda of gender equality adopted at several international conferences by adopting the strategy of gender mainstreaming.
A similar argument is carried by Mayra Buvenic et al (2007) who maintain that Millennium Development Goal Three i.e. “Empower women and promote equality between men and women” is a key to achieve other targets like combating poverty, hunger, disease and illiteracy (Buvenic & King, 2007).

The study conducted by the World Bank on the data from DHS (Demographic and Health Surveys) demonstrates through empirical evidence that access to better schooling and resources by women relative to men would result in better nutrition, thereby reducing ‘Child Mortality’ (MDG 4) and increasing child survival rates.

“In order to reduce childhood deaths occurring within 28 days after birth, requires innovative solutions to provide some sort of incentive for women to deliver in designated centre. Increased nutrition interventions, such as early and exclusive breastfeeding, will reduce not only under-nutrition but also the prevalence of pneumonia and diarrhea” (Human Development Report, 2010).

The research done by UNDP (1995) highlighted the gendered nature of poverty, termed as “feminization of poverty”. It shows poverty with a woman’s face as 70 percent of women are shown in poverty [UNDP, (1997) C:87]. Cagaty (1998) rightly supports this phenomenon by highlighting three maladies: Firstly higher incidence of poverty of women than men is seen, secondly women’s poverty is more severe than that of men and thirdly increasing trends of poverty among women, as lone women headed families are on the rise (Cagaty, 1998).


“People who are marginalized and excluded from mainstream institutions, systems and networks are still incorporated in ways that work to undermine their opportunities for growth. Understanding chronic poverty means looking at the intimate and mutually reinforcing links between income related poverty and poor household’s lack of social power. Workers find themselves embedded in a patriarchal system which is reinforced both within the household (by father and husbands) and in the work context (by farmers and managers). These patriarchal values heavily influence the ways workers are treated. Women laborers lack the basic assets necessary for household food production or entrepreneurial activity, and their consequent dependence on insecure paid jobs and on networks of patronage renders them profoundly disadvantaged “ (Eyben, Kabeer, & Cornwall, 2008).

Poverty aggravates gender disparities in accessing productive resources or in accessing schooling, health care: on the one hand it limits the horizon of their capacity to participate in the labor force productively and on the other hand society has to pay the price in terms of poverty and low standard of living. However, women labor participation can help their households in finding an exit route from poverty and improve living standards. Cagaty (1998) convincingly argues that women instead of being viewed as passive victims of society, should be viewed as agents who in order to combat
poverty often use coping strategies by sacrificing their meals to ensure food for their family (Cagaty, 1998).

The United Nations 4th World Conference on women emphasized the need to develop policies and programs to promote equitable distribution of food within the household because the danger of falling into poverty is higher in women than in men and their experiences are worse than others. Therefore, in order to stop the vicious circle of poverty, her productive capacity should be enhanced by literacy, credit facility, information /awareness, skill development and access to resources, which would bring change in the perception of women, in their spirit, and ensure empowerment. Impact of GRC activities can be determined by observing the outcomes of women and children of GRCs and Non-GRC.

Hunger project also supports the relationship between women’s empowerment and poverty reduction:

“The hunger project firmly believes that empowering women to be key change agents is an essential ingredient to achieving the end of hunger and poverty. So the goal of programs launched by UNICEF remains to support women and build their capacity, at grass root level by providing education and awareness to help prevent preventable diseases” (FAO, 2010).

Although the relationship between gender disparity and growth is not fully tested yet, but research findings documented from many countries indicate that bridging the gap between men and women in terms of access to economic opportunities, is instrumental in reducing poverty and accelerating the pace of economic development (Lawson, 2007), (World Bank, 2001).

2.3.8 Different Indicators of Measurement of Women’s Empowerment

Gender equality is a core development issue but different cultures and societies can follow distinct ways in achieving equality in rights, resource and voice. Greater access to resources enhances their capacity to earn and contribute their income for the improvement of the standard of living. She finds herself in a better position to determine resource allocation and in decision making to invest in physical or human capital investment of children. An attempt to measure women’s empowerment has been made by Varghese (2011) based upon five independent variables. She evidently showed poor performance in the domain of social empowerment in comparison to better performance in household and economic empowerment (Varghese, 2011). The third round of NFHS has constructed women empowerment Index, based on their participation in household decision making pertaining to owning health care, major household purchases, daily purchases, visits with family and friends (NFHS-III, 2005-06). Since women’s empowerment, is a multidimensional interconnected phenomenon consisting of access to decision making in all family, political, and social matters, a pioneering study conducted by Malhotra et al, used six dimensions viz. economic, social, household, political,
psychological, legal, to measure women’s empowerment at micro, meso and macro level (Malhotra, Sidney, & Carlor, 2002).

**Qualitative Interpretation**

However, a women’s empowerment Index explores the level of outcomes but does not explain the fundamental cause of empowerment. Causality works in both ways. Low level of education adversely affects the level of empowerment and on the other hand low level of empowerment results in low levels of education. Therefore, finding interrelationship among various attributes and the direction of outcomes is not sufficient to establish causality. Therefore, a qualitative interpretation to have in-depth knowledge of the situation is essential (Doucet & Mauthner, 2009).

This trend of providing education would bring positive change in gender relations at the household level as documented by Bendra Stella (1999). Though women empowerment seems to be simplistic in the existing wide literature on measurement, but actually it is not. Some variables create potential for empowerment but do not translate into actual empowerment (Bendra, 1999).

To what extent the possession of entitlement of resources, paid employment, get translated into actual autonomy or decision making agency is shown by Naila Kabeer (2001), by citing the ‘decision-making indicators’ being adopted by researchers in different countries (Kabeer, Sida Studies No. 3, 2001). Some of the decisions used as indicated by many researches quoted by Naila Kabeer, in DHS, and in NFHS III are based on different dimensions.

1. Control over fertility.
2. Education of children
3. Health of children
4. Minor purchases
5. Major purchases of household
6. Physical mobility
7. Women’s work outside

Naila Kabeer (2001) for instance finds evidence in discussion by Folbre who considers equal participation in labor as an indicator of gender equality. Equality of leisure is also considered as an indicator of gender equality (Kabeer, Sida Studies No. 3, 2001).

The wide literature available at national and international level shows that education empowers women and provides capacity to take decisions regarding their fertility, participation in paid labor and take strategic decisions. It has investigated different aspects of autonomy in order to find the relation between education and autonomy, on the data sourced from world fertility survey and DHS Demographic Health Survey for the United Nations Population Fund.
One of the findings of her study shows that education has a negative relation with fertility but in more developed and urban settings. Several years of education would induce people to postpone the age of marriage in order to reduce the desired size of family, in a society where there is a strong preference for son as an “old age security”. But in patriarchal settings, education not less than secondary, is required to enable a woman in attaining an autonomy to regulate the size of family (Kabeer, Sida Studies No. 3, 2001).

The World Bank considers education as the best contraceptive because the need to have more children would be reduced for an educated mother who would look after children in a better way, thereby lowering child mortality.

2.3.9. Changing Perception of Women

When women are more aware about nutrition, safe water, vaccination, equal rights of women, benefits of savings, social connectedness, it would change not only their perception but would also change the perception of community. It would result in better socialization of children who would better understand the significance of reducing gender gaps in three dimensions, which can improve quality of life of women and children and as an interrupter of chronic poverty.

To Nelly P. Stromquist (1998), provision of education is the appropriate strategy for marginalized and disadvantaged women to achieve empowerment (Stromquist & Mankman, 1998). Access to education would reduce dependency of women on children, thus changing not only perception towards the ideal size of family but also factors like ‘sex composition of family’.

Since child birth is an essential reproductive duty of a woman, efforts should be made to foster an enabling environment on preventing maternal mortality which ‘is exacerbated by factors such as poverty, gender inequality, age and multiple forms of discrimination, as well as factors such as lack of access to adequate health facilities and technology, and lack of infrastructure’. Prevention of maternal mortality as suggested by Hunt and Gray (2013) “requires the effective promotion and protection of the human rights of women and girls, in particular their rights to life, to be equal in dignity, to education, to impart information, to have freedom from discrimination, and to enjoy the highest attainable standard of physical and mental health, including sexual and reproductive health” (Hunt & Gray, 2013).

2.3.10. Studying Intra-household Resource Allocation

Since women play both productive and reproductive roles, an insight into the relationship between these two roles would reflect their position in society (Stromquist N. P., 1999). The household is the site which plays a pivotal role in shaping gender relations, the legacy of differential of rights, resources, autonomy and expectations from men and women. It is transmitted to the subsequent generation through socialization (Stromquist N. P., 1999), thereby creating, maintaining or reducing
gender disparity. But the decision taken within the households are encouraged or discouraged by larger institutions like society, community and economy.

Normally in an idealistic situation as assumed by Bolt and Bird (2003), a household is a sharing, and co-operative body with a unitary utility function. But a household is a site of multiple voices, gendered interests, unequal resource allocation and conflict. Therefore, different levels of wealth, consumption, leisure and work are seen within the same household (Bolt & Bird, 2003).

“Numerous culturally, temporally and spatially specific dimensions, of social differences affect the intra household decision making and resource allocation” (Bolt and Bird 2009). Study of Intra household resource allocation is a tool which would build a picture of both sexes in a household to understand their relative roles, status, priorities, diverse needs, interests, expectations and ideologies. The study of household as a unit would reveal neither the differential in acuteness of poverty on men and women nor the impact of interventions on their relative status.

A scrutiny of the intra household dynamics is capable of contributing to our understanding of the process of how resources are generated, controlled and distributed in a household. Ratna Sudarshan et al. emphasized on studying the intra household resource allocation closely to have an insight into factors operating at personal, familial, societal and natural level. As quoted in Ratna Sudarshan et al (2006), Aggarwal (1994) observes that women’s relative bargaining power within the household is the outcome of their position outside especially in the work place, in the community and at the state level (Sudershan & Bhattachrya, 2006), (Agarwal, 1994).

For social and economic analysis of a household, data on dietary intake, anthropometric measures, allocation of responsibilities and time within the household members needs to be recorded (Bolt & Bird, 2003). In order to study the experience of poverty of different members of the same household, an analysis of intra-household resource allocation is made by Ratna Sudershan et al in the study. It is observed that out of several factors, gender based disadvantage due to discrimination emerges as the strongest and conventional factor. One feels concerned over the barriers to access the productive resources and the constraints imposed as a result of household duties because these barriers prevent women’s entry into the labor market (Sudershan & Bhattachrya, 2006). World Bank (2005) also highlighted such barriers that curb women’s basic freedom to choose, resultant negative consequences for their children, families and communities in many developing countries (World Bank Report, 2005).

Methods to study poverty and chronic poverty at national level mask large disparities between men and women which can be captured by analyzing the intra household resource allocation which would deliver a complete and accurate depiction of gender disparity within the household. This insight is essential for policy designers to formulate effective development programs.
It involves the collection and analysis of quantitative data disaggregated by sex, based on the information pertaining to areas such as education, health, income, asset holdings, freedom of mobility etc. It would be supported by qualitative information through interviews, observations, and meetings with groups. In depth interviews, surveys, focused group discussions with community leaders and members, NGOs, mother NGOs should be undertaken.

If we take on the definition of human development as a process that expands the horizon of peoples’ choices and use the capability approach of A. Sen then it is easy to comprehend that in most societies, women are facing multidimensional deprivation of capabilities such as food and nutrition, health and education. They face gender bias in the household resource allocation and distribution of work. Therefore quantitative methods fail to locate any heterogeneity existing within the home. Thus treating households as harmonious units would fail to understand the conflict and inequality as well as co-operation and sharing (Sen A., Gender and Cooperative Conflict, 1990), (Aggarwal, 1997). It is really important to determine the root cause of poverty. The ‘human poverty’ concept would overcome this limitation, by focusing on relative deprivation in basic education, food and nutrition, health care.

2.3.11 Ineffective government programs require other players for facilitating empowerment

Programs which lack participation of the targeted or needy people in planning and execution often fail to achieve the goal of poverty alleviation and therefore cannot improve the socio economic conditions of the disadvantaged poor.

Poor people seem to have no information as to how and from where to get assistance meant for them. These voiceless, powerless poor people are ill treated by the institutions which are supposed to assist them in finding an exit route from poverty in one way or the other. Poverty alleviation strategies were initiated for the first time in sixth five year plan (1980-85) to achieve reduction in poverty 7.

“For making the Government system more responsive to the poor, efforts are being made to create a forum for the participation of the poor in the decision making process” (Heward, 1999).

There are many fields of poverty alleviation where it becomes difficult for the nation to participate effectively. The horrifying nature and dimension of this massive problem, requires collaboration and involvement of actors other than the state. The National Population Policy (2000) urgently called for collaboration and co-operation of NGOs for creating opportunities, facilitating empowerment “where Governmental capacities are insufficient and the participation of the private sector unavailable, focused on service delivery by NGOs effectively, complementing Government efforts” (National Population Policy, 2000).
A widespread recognition to the effective performance of Non-Government Organizations for their strong grassroots presence and deep insight into women’s issues have contributed to the expansion of scope for NGOs. These NGOs have been acting as catalytic agents in achieving women empowerment by undertaking activities for building capacity through skill development, providing education, generating awareness and promoting self-help groups.

NGOs being better informed about the heterogeneity across communities regarding their culture, asset distribution and their specific issues, are in a position to locate the actual beneficiaries. Therefore, these systems are better equipped in sharing the responsibility of distribution of resources and services to the needy on the basis of their need (Ghosh, 2001).

Section 3-

2.4. Capacity Building through Gender Resource Centre

“Strength does not come from physical capacity. It comes from an indomitable will”- 

(Mahatma Gandhi)

2.4.1. Introduction

The capability approach does not refer to just acquisition of capabilities. It aims at giving people the necessary condition of a life with human dignity. The capability approach propounded by Amartya Sen (1999) includes capabilities, functionings and agency (Sen A., Development as freedom, 1999). Another approach given by Alsop (2006) is worth mentioning as it defines empowerment as capacity in two terms, agency and environmental (Alsop, Bertelsen, & Holland, 2006). Nussabaum classified capabilities into three types, basic capabilities, internal capabilities and combined capabilities (Garrett, 2008). Garrett explains that the aim of the public policy is the promotion of combined capabilities which promote internal capabilities through basic capability (i.e. education and training). It also focuses on providing material conditions for improving functioning. The concept of ‘human Development’ adopted by the UNDP’s Human Development Report in the 1990s, resembles the meaning of development used by Sen as enlarging people’s choices through capability building for sustainable development that enables their participation. Jose Antonio Ocampo in his opening statement at United Nations Headquarters in 2006, states:

“We must build on the capacity of women to lift themselves and their families out of poverty” (Report of International Forum, 2006).

2.4.2. GRC and Women’s Empowerment

In order to save the households from chronic poverty reducing the risk of health shock, improving health, and reduction in health disparities are very significant. WHO (CSDH, 2008) recommends equal distribution of power and resources for gender equity and empowerment (World Health
Organization, 2008). World Bank studies have shown that enhancement of women’s earnings would have a more profound effect on the welfare of the family as a whole since increase in women’s income is more directly associated to better education, health and nutrition for children.

Dharam Ghai (2002) considers capacity development to be attained at the individual level by acquiring skill, aptitudes, knowledge and capabilities, resulting in rise in standard of living, attaining economic and social security, raising productivity, and achieving sustainable development (Ghai, 2002).

Looking at this chain relationship between women’s empowerment and reduction in poverty, the effort of GNCTD, in setting up Gender Resource Centre to achieve the desired Delhi Development Goals which are in tune with United Nations MDGs (Millennium development goals, 2000), has been a very apt initiative to reach out to the unheard, voiceless, marginalized and disadvantaged community, especially the women victims of several deprivations as a consequence of either spatial, social or occupational or simultaneous vulnerabilities and exclusions.

Given the multi-faceted nature of poverty, the need to develop multiple capacities through micro credit has been advocated and assisted by UN organizations and agencies in six countries (Madagascar, Mozambique, Nepal, Philippines, Tanzania, and Vietnam) which were ranked in the bottom third of Human Development Index over much of the 1990s, as explained by Peter Morgan (2002), (Morgan & Mvududu, 2002). The list of interventions for capacity development at sector level propagated by UNO, mentioned by Peter Morgan (2002) consisted of “education” (WHO, UNESCO, and UNICEF) including the primary and technical vocational levels, “health” (WHO, UNICEF, UNFPA), population and reproductive health (UNFPA), agriculture (FAO), economic growth and industrial development (UNDP, FAO), governance (UNDP) and gender (most UN organizations) (Morgan & Mvududu, 2002). The genesis of Gender Resource Centre has been the outcome of a long journey, striving to focus on women’s empowerment through concerted efforts.

GRC as having a good feel of issues of the grass root people and the conditions in which they grow, live, work and age can effectively apply package of empowerment interventions through capacity building for women, preparing them to play a larger role in the mainstream of the society. By acting as mentors, GRCs are supposed to kindle capacity to bring women at the forefront for gender mainstreaming to attain women’s empowerment to enable them to take decisions for the ‘well-being’ and ‘well-becoming’ of children in terms of better health and education, preventing factors conducive for transmission of poverty across generations.

2.4.3 Genesis of Gender Resource Centre in Delhi for capacity building

While inaugurating the Sixth South Asia Regional Ministerial Conference at Beijing, the President of India, Pratibha Devisingh Patil, who was also a member of the Indian Delegation to Beijing, said:
“India’s economic planning process for women has evolved over the years from a purely ‘welfare’ approach, where women were regarded as objects of charity, to a ‘development’ oriented phase and currently to the plank of ‘empowerment’ that seeks to promote gender equality. We have embarked on our 11th Five Year Plan period that seeks faster, more broad-based and inclusive economic growth by providing more people access to basic infrastructure as well as health and educational services to all. Gender will be a cross cutting theme” (The Sixth South Asia Regional Ministerial Conference, Beijing, 2008).

Despite the constitutional guarantees and specific legislations to protect the interest of women, they continue to suffer because of ignorance of their legal rights and a strong social resistance to giving women their due share. Social Welfare Department in the last four decades has been trying to reach to deprived and needy segments of society. But the task is gigantic, as Delhi has a very large population with approximately 3,49,448 families in most vulnerable and 3,99,122 families in vulnerable categories as identified in ‘vulnerability survey’ conducted by Samajik Suvidha Sangam in 2008-09 at community level. After careful consideration against this backdrop the State Government has decided to undertake a pilot project and spend all resources to develop a convergence model for the state for bringing about qualitative empowerment in the lives of urban poor communities, by going beyond the conventional approach.

GNCTD decided to achieve the desired, national and international goals by encouraging the volunteer organization to come forward and actively involve in the welfare and rehabilitation work and effectively tackle the multifaceted and multidimensional problems of marginalized urban poor women living in slum clusters. In the year 2001, under the theme of citizen partnership, the Department of Social Welfare was appointed as the nodal department for launching the pilot project “Stree Shakti” by the Chief Minister of the NCT of Delhi for overall development and employment of women. This pilot project focused on health, literacy and income generation, through Gender Resource Centre (GRC) and Stree Shakti Camps (SSC), to derive optimal benefits from these Stree Shakti Camps (a long term strategy being evolved for sustainable empowerment of women in the form of ‘Stree Kosh’, i.e. Gender Resource Centre).

Gender Resource Centre (GRC) is the outcome of the follow-up measures of ‘Stree Shakti Camps’ launched by the Government of NCT of Delhi under the Bhagidari Scheme for the overall empowerment of each and every woman under tenth five year plan. The model of GRC for women’s empowerment emerged in Delhi in 2002, resembles a program ‘Bolsa familia’ being adopted in Brazil since 2003 which led to positive social outcomes resulting in poverty decline by 15 percent during this period.

The Chief Minister of Delhi Sheila Dikshit inaugurated the first GRC on September 18, 2002 at Shahbad Daulatpur, Delhi. From four centres in 2004, the number increased to 40 in 2006-07 and
crossed the number 100 in 2008-10 and reached 192 in 2011. The GRCs have been augmented and strengthened with the increase in the scope of activities, roles and responsibilities under mission convergence since 2008.

The journey of GRCs passed through two phases:

- Pre-mission convergence (2002-2008)
- Post-mission convergence (2008 onwards).

**Pre Mission Convergence**

For poverty reduction and inclusive growth, emergence of GRC rests on Bhagidari Model in order to have effective outreach and to address community concerns in a holistic manner. GRC has been devised as an institutional mechanism with structures and human resources to address the problem (Poverty reduction by improving the status of women) by acting as the direct interface between the vulnerable groups and the Government by making the latter accessible and catalytic agent and former aware, enlightened, and empowered.

**Objectives of GRC**

The Gender Resource Centre (GRC) have been envisaged as being instrumental in bringing social, economic and legal empowerment to each and every woman in the community, particularly those belonging to the underprivileged section of the society to ably lead a healthy and respectable life.

The main objective of Gender Resource Centre (GRC) is to provide facilities for ‘Single Information and Facilitation Centre’ to provide welfare entitlements and launch development programs for underprivileged women by collaborative efforts of different government and non-government bodies in a particular district out of nine such districts.

**Post Mission Convergence**

The cabinet approved Mission Convergence in March, 2008 for reaching out and providing various socioeconomic benefits to unreached and disadvantaged people living in slums, at their doorstep. The public launch of Samajik Suvidha Sangam (SSS) in August, 2008 has been an endeavor towards making a positive difference in the lives of millions of people living in the city of Delhi by making Delhi an inclusive city. It has also adopted multi stakeholder model and seeks to reap the benefits of the programs of various departments together on a common platform, with a focus on ‘empowering women’ through intervention in the areas of livelihood, health, non-formal education and legal literacy.

The scope of mission convergence was much bigger compared to ‘Stree Shakti’ although some of the key elements remained same. ‘Bhagidari’ model was moved up to another level with multi
stakeholders where interventions are to be delivered through a unified structure in a decentralized manner but with a priority for action at the bottom of the pyramid in active collaboration with NGOs with a strong field presence by bringing out a partnership between the people, the community based organizations and the various government departments to make an impact of a package of interventions on the lives of underprivileged by empowering them.
Before we explore the uses and functions of GRC (SK), the knowledge of Institutional structure of Mission Convergence is crucial, which is clear from the chart below.

- **Institutional Structure for Mission Convergence**

The State Convergence Forum called Samajik Suvidha Sangam (SSS) is chaired by the Chief Secretary. Mission Convergence (MC) has a large network of Suvidha Kendras in different offices of Delhi – one at each district level (DRC) is attached to the role of the Deputy Commissioner and others at community level. A district approach was taken with the DCs as the significant contributor in the area of coordination, monitoring and inspection of the developmental efforts in the respective territories. Deputy Commissioners are the mainstays of the implementation mechanism. Under its wings, Program Management Unit (PMU) of SSS which is headed by Mission Director (SSS), is enabled by DCs to access NGOs to interact with poor people in combating poverty. The task of setting up of structures, norms and procedures are entrusted to PMU with the help of technical experts and mother NGOs.

SSS has direct interface with the service delivery partners, GRCs, DRCs, and various departments such as FPS, Schools, Empanelled Hospital, Social Welfare, WCD, Welfare of SC/ST/OBC/Minority, Urban Development, Labor and Information Technology which deliver public programs, strategies and services for the needy and eligible.

MC has been successfully making a difference in the lives of millions of people especially poor and disadvantaged women through a large networking of GRCs.
GRC – SK (Suvidha Kendras) : Roles and target under Mission

Given the multi-faceted nature of poverty, the need to develop multiple capacities has been emphasized therefore allocation of scarce resources meant to eliminate gender discrimination was earmarked in National Policy 2001, and in the 10th Plan. Through effective convergence and integration of resources, services, infrastructure and manpower to enable poor women to play a larger role as opposed to restricted role, GRCs would act as interface between government and poor.

1. Area mapping clearly indicates the target area and population of GRC – SK to avoid duplication of efforts by other GRC – SK.
2. Household Survey conducted by GRC helps in the identification of the vulnerable population, which links the welfare programs of the different departments of the Government to the direct service deliveries provided by the GRC for women’s empowerment leading to sustainable and inclusive growth.
3. Enroll identified eligible vulnerable under different schemes and programs in the catchment area.
4. Identify target population for women’s empowerment using database and enroll them in programs of capacity building

2.4.4. A Journey of GRC for Capacity Building

No single intervention program can defeat multifaceted and gendered nature of chronic poverty. People in persistent poverty need education, credit facilities, health care, advice and awareness in multiple concrete ways by increasing income, enabling women to confront systemic gender inequities to find pathways from chronic poverty. In order to improve the quality of life of underprivileged women, package of welfare schemes and other social development initiatives have been provided by Government through GRCs. With the aid of a strong team of local volunteers, each Gender Resource Centre is involved in channelizing the untapped, unpolished, productive potential of the masses. Capacity building through women-centric activities for holistic development can be better understood with the aid of the chart below:
Figure 2.2. Capacity Building

<table>
<thead>
<tr>
<th>Promoting Self-Help Group</th>
<th>Vocational Training and Skill Development</th>
<th>Education for Women and Children</th>
<th>Awareness and Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Micro credit</td>
<td>• Traditional set of skills</td>
<td>• Adult Literacy</td>
<td>• Legal aid and awareness</td>
</tr>
<tr>
<td>• Thrift activities</td>
<td>• Non traditional</td>
<td>• Mainstreaming of child dropouts</td>
<td>• Health care awareness and intervention</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Remedial Education</td>
<td>• Nutrition, child care and hygiene awareness</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Welfare schemes and public services</td>
</tr>
</tbody>
</table>

These well defined activities lead to empowerment (economic, legal and social) of women who are poor, unheard, under privileged, disadvantaged, unnoticed, facing gender discrimination, being exploited, being harassed and miss-behaved with everywhere, physically abused and mentally depressed and who are not safe even in their mother’s womb, who have no right to two square meals, from the lot they cook themselves. From the perspective of chronic poverty an analysis of household resource allocation is more relevant as her contributory role in the household is not acknowledged, therefore neither does she control resources nor does she have any say in the use of resources.

The Stree Shakti – GRC – Suvidha Kendera as created under mission would reach the target group at almost their doorstep in their catchment area after the suitable awareness process is initiated by volunteers. The target group is enrolled for development of human capital through capacity building, and is encouraged to form a self-help group for ensuring mortgage free credit at low rate of interest. Chief Secretary of GNCTD, Rakesh Mehta (2009), emphasized on provision of entitlements to the beneficiaries in a package “through a series of interventions which are a combination of cash based
incentives, in-kind incentives and income earning training and opportunities” committed to impact their lives in a positive manner.

Empowerment through GRCs in catchment areas may be recognized as a local grass-roots endeavor through a process of social mobilization for poverty eradication, by motivating ‘power within’ (refers to affirmation of the individual) through education (formal or non-formal), skill development and conscientization of self understanding and awareness, and by motivating ‘power with’ (refers to collective action) through self-help group.

2.4.4 Ensuring Outreach to the Community

It is binding on the GRC-SK to ensure outreach to the eligible and an unreached section of the community by undertaking some steps shown in the chart given below:

Figure 2.3

Social mobilization and meeting together either at their doorsteps or within the gender resource centers, gradually enable the poor women to organize themselves into self-help groups (SHG outreach worker not only explains the concept of SHG but also creates awareness about the concept of thrift and credit operations). SHG programs apart from encouraging savings provide a space for women to access and learn about her rights.

NABARD aptly described SHG as a homogeneous group, voluntarily formed primarily to save an agreed amount and contribute to a common pool of fund of the group to be lent to the group members at the time of credit need at their doorstep. Poor people who have a low capacity to save and usually they have to depend on moneylenders or arrange for friends and relatives to smoothen away consumption worries (an urgent and most basic need of poor and chronically poor people). SHGs by increased awareness empower poor and underprivileged people and train them to fight against multi-dimensional deprivation in terms of training, nutrition and healthcare. This fighting spirit gives them
self confidence, solidarity and social security to control and way their path towards realization of their goals.

The micro credit program launched through GRC, linked to banks, is supposed to emerge as an effective tool in bringing greater equity and reducing poverty through financial inclusion. Despite the broad expansion of banking network in the nation, it has not been able to fulfill the needs of poor families and particularly women who not only lack the basic requirement of literacy and skill but also lack assets in their name, making them unworthy of availing formal financial services. The microfinance program initiated by NABARD, has now emerged as a Micro-finance movement in different parts of the world and is considered as the most desirable and pragmatic alternative to the conventional banking.

2.4.5 Capacity Building for Women Empowerment: Creating ‘Anti-Drivers, Anti-Maintainers and Active-Interrupters’ to Chronic Poverty

After looking at what kind of capacity did the GRC actually help to build, the study needs to address three key questions:

1. Does capacity building created by GRC through enabling factors bring perceptible and measurable changes in beneficiaries’ lives, and change their perception, and has become a significant source of information?
2. Does capacity building created by enabling factors impact autonomy of women (social, economic and household)?
3. Does the impact of capacity created by GRC on outcomes, would mean reducing vulnerability of the households towards chronic poverty by preventing child poverty in terms of education, immunization and anthropometric measurements, improve conditions at household level and improve respondents’ BMI?

Understanding the multifaceted nature of chronic poverty, UN System proposed to adopt a multifaceted approach for poverty reduction. The announcement of the MDGs in 2000 necessitates the acceptance of new capacities for eradication of poverty. Therefore ‘capacity building’ is recognized as a tool for human development. Evaluation of Gender Resource Centre would focus on tracing out the effectiveness of the interventions undertaken by GRCs in capacity building for women’s empowerment to bring about better outcomes of health and education of children through various programs which would result in enhanced autonomy in the household.

The association of capacity building with poverty eradication is more about indirect than direct, impact of intervening activities undertaken by GRCs with the aim of women’s empowerment. Hence these activities need to be looked at in a broader aspect. But at the same time it is difficult to disassociate other influences diluting or enhancing the impact on beneficiaries simultaneously in a dynamic society.
2.4.6. Creating power through GRC

It has generally been observed and explained by economists and sociologists that slums do create conditions conducive for creating and sustaining poverty (Tommy, 2007), (Sudershan & Bhattachrya, 2006). It is interesting to note that the overall target population of GRC-SK would be the households residing in notified and non notified, slums Jhuggi- jhompari clusters, resettlement colonies, and rural areas or any other areas as per the list of the Delhi Government with typical slum related issues. The aim of GRCs is capacity building for women’s empowerment of each and every woman living in slums.

- Women’s Empowerment as Focal Point of GRC

Empowerment, one of the key factors in determining the development, reflects the status and position of women in the society. Special focus on empowering women, girls and adolescent girls (at all stages of life) through capacity building to enable them to bring about significant changes in their lives and in their families, is the main objective of Gender Resource Centre. It is believed to be a crucial element in bringing long lasting social change in society. Ms. Haoua Dia finds a critical strategy of building women’s capabilities to participate fully in a society and economy to relieve them from dependency on male members of the family. To access assets, rights and voice in any patriarchal society, she emphasized on provision of education and health care services to them thus improving her well-being and support (Report of International Forum, 2006). A united and consolidated effort is made by GRCs to empower women (especially living in the slums who are either poor or vulnerable) by their mainstreaming (gender mainstreaming). It would facilitate diversification of source of income by enhancing WLP, change stereotype gender roles, control fertility, change gender ideology and enable them in bringing up their voice and provide information and spread awareness. Later Anti-Drivers, Anti-Maintainers and Active-Interrupters’ would be identified in the quantitative and qualitative analysis of three objectives.

2.5. ‘Anti-Drivers, Anti-Maintainers and Active-Interrupters’

1. Diversification of Source of Income / Double source of income

One of the findings of analysis of panel data set from five countries conducted by Mackay et al (2010), has one common element e.g. low endowments (in the forms of physical or human, or natural or financial or social capital) resulting chronic poverty. But the study is unable to establish evidence for asset based poverty traps, though does not rule out poverty traps. However, a household with many forms of asset endowments is seen as a positive factor which facilitates more diversified source of income, enabling the household to withstand the impact of any shock and reduce risk of poverty. Beside this household income, level of living has a significant impact on empowerment process. Chronic Poverty Research – 2 (2008-09) lays stress on policies which support diversification in finding an escape route from chronic poverty. Regular contribution of income from regular income...
from women (double source of income) increases the prospects of increased asset base (Chronic Poverty Research -2, 2008-09).

2. Change In Gender Specific Roles

The implication of socially constructed gender specific ‘roles as mothers, wives and daughters’, which consume their maximum time, energy and commitment, asserted by Vina Mazumdar, is loss of public assistance or opportunities (when the Indian constitution guarantees equal rights and opportunities to all men and women) (Mazumdar V. B., 1975) . The loss of opportunities restricts the horizon of freedom for women, in such a way that their ‘capacity to make as valuable a contribution to the public good as men’, which is regarded as a ‘negative tradeoff” becomes disempowering. At the same time, it is a matter of social injustice and violation of human rights. To minimize the negative tradeoff, capacity building for ‘gender mainstreaming’ is called for, but Naila Kabeer mentions persistence of patriarchy as a structural problem in actualizing the agenda of ‘gender mainstreaming ’ (Kabeer, Magnus, & Stark, Global Perspective on Gender Equity : Reversing the gaze, 2008).

3. Education

The broader concept of human development which reflects human welfare holistically, encompasses not only real income but also life expectancy and number of years of schooling, which reflect different dimensions in the interpretation of capacity building for poverty eradication (UNDP:1990). United Nations General Assembly emphasizes on the adoption of policies and strategies of investing in education and health for capacity building which would alleviate poverty besides minimizing potential tradeoffs (Report of International Forum, 2006).

The word ‘capacity’ means ‘ability’ or ‘means’ to accomplish a task successfully and education is considered as the ‘building block’ of an individual or an organization for achieving ‘capacity’ (Hilderbrand, 2002).

4. Control on Fertility

Control over fertility would result in better outcomes in relation to resources for women and children at household level and at national level. This has been identified in World Development Report 2007, which mentions that:

“A demographic window of opportunity’ is currently unfolding in many low income neighborhoods. A fall in dependency ratios means that there are more resources freed for investment in human capital”.

Therefore, even CPR-2 also promotes better provision of reproductive health services in order to prevent entry and promote exit from poverty. The study by Schuler and Hashemi (1994) also revealed the link between use of contraceptive as a reproductive health service and credit – programs for women empowerment (Schuler & Hashemi). The improved position of basic health and
sanitation reduces the need to have a large family, as better provisions of these facilities would result in reduction in child mortality. Therefore CPR-2 encourages those measures which bring household resource allocation in favour of women thereby preventing illness and impairment among children which would reduce the threat of chronic poverty (Chronic Poverty Research -2, 2008-09).

5. **Change in Gender Ideology by Changing Perception**

Several evidences from a study on the household division of labor show that women’s economic contribution and a liberal gender ideology would reduce gender inequalities and foster a more equitable distribution of labor. Greenstein (1996) discussed “Egalitarian Gender Ideology” which supports a reduction in women’s domestic burden. But does reduction in women’s domestic burden indicate an equivalent increase in men’s time spent in household chores? Forwarding the agreement of Shows and Gerstel (2009), Legreski clearly asserts that men would spend time in parenting but the role reversal in cleaning and laundering clothes (Lower order jobs), doesn’t seem to be easy (Legreski, 2010). The persistence of ‘doing gender’ is under the cumulative spell of ‘Gendered Selves’ and ‘Identity work’, which reinforce its practice at individual level. Similarly at the macro level, the outcome of socialization and internalized gender ideology among middle aged adults is deep rooted and long lasting. Kate Millet also maintains social conditioning experienced by her in her lifetime as the root cause of patriarchy (Millet, 1970).

“The gendering of work in the market and at home seems a continuing barrier to change despite the economic changes taking place. As long as women do both paid and unpaid labor they remain undervalued in the market and in the families and men’s masculinity remains tied up in paid employment, women’s ability to negotiate a new gender arrangement may be thwarted and the old gender order is likely to persist” (Legreski, 2010).

This reproduction of inequality and subordination will continue so long as her contribution is not recognized. Retendering is required to institute change in gender ideology. She should be made aware of the cause of her subordination oppression and exploitation. It is important for her to know that it is the unalterable natural difference (child bearing due to sex) that has become her destiny and has resulted in stereotype roles (rearing) assigned to men and women by the society. On this issue, very aptly, a self assertive statement has been given by Simon de Beauvoir, ”women are made they are not born”.

The expression used by Engel “the world’s historical defeat of the female sex” has been cited by Andrew Heywood (2003) to indicate the economic interest of capitalism continuing from generation to generation. The knowledge of gender inequalities and gender differences in the experiences of poverty has given rise to gender sensitive poverty alleviation strategies which necessitate the importance of targeting women by policy makers (Cagaty, 1998).
6. Voice

A report by Chronic Poverty Research Center (2010) indicates clearly that women succumb to the oppressive and abusive relationship. While discussing the rigid boundaries of activities in the household involving either cooperation or conflict, N. Kabeer, tried to relate it not only to the weak bargaining power of women but also to the lack of voice, in the absence of fallback position (Kabeer, Reversed Realities, Gender Hierarchies in Development Thought, 1994). Therefore protection from absolute deprivation comes to her at the cost of voice and choice and she has to face domestic violence. It is significant that she needs to know that domestic violence is not the result of any misfortune but has to be fought with. She also needs to know that should to be heard, respected and responded to (CPRC, 2010).

7. Information and Awareness

In the opinion of Harris (2007), transformation of society cannot take place without transformation at the individual level (Harris J., 2007). To make it happen, women’s perception of themselves as inferior and incapable, needs to be changed. Besides piece of information on child care practices and maternal care would improve quality of life preventing transmission mechanism of inter-generational poverty and many other pieces of information would enhance her ability. In order to deconstruct the socially constructed and entrenched values, a broad-based informational base which relates to an individual’s action is a prerequisite (Raju, 2009).

2.6. Significance of Information on Different Topics

1. Method of family planning

Family planning is an essential component of the rights of women as individuals for self-determination. It contributes both to the fulfillment of personal aspirations and to the achievement of broad national goals (Helen I Safa, 1981). Hoque and Murdock (1997) noted that family planning programs would enhance women’s empowerment in regulating reproductive behavior. As asserted by Andrew shepherd et al (2006), that it is not only the cultural, socioeconomic and relational barriers a poor woman faces in deciding the size of family but the problem lies with the inadequate or inaccessible public services and required information (Shephard & Mehta, 2006). Informed choice of family planning is an indicator of reproductive rights, and is recognized as crucial for women empowerment and eradication of poverty for achievement of all the MDGs, as observed by Sunila Abeysekera (a defender of women human rights) (Abeysekera, 2010).

2. Importance of smaller family

A large number of children in a household increase the vulnerability of falling into poverty. Adverse demographic features of the household with a few income earners especially in the situation of assetlessness create obstacles in finding exit from poverty (Bhide & Mehta, 2006).
It has been observed at the individual level that there is a gap between perception towards the ideal size of family and actual practice. The actual behavior which lowers the desire to have small family is determined by ‘sex composition of the family’ in which ‘son survivorship’ a practical necessity ((May & D, 1968); (Anker & Anker, 1982); (Cain, 1984); (World Fertility Survey, 1980). These factors create barriers in forming the perceptions about small family in practice. Consequently, one cannot propose that information alone would benefit in maintaining smaller size of household. One cannot ignore the importance of the availability of such facilities.

3. **Safe deliveries through a skilled staff**

Shashanka Bhide et al (2006) identified health shock as one of the drivers of chronic poverty and inadequate access to healthcare facilities as one of the maintainers of chronic poverty. Skilled birth attendance is a critical component of the continuum of maternal care. The proportion of births attended by skilled health personnel 1 as an indicator to measure adequate care for pregnant women has been adopted in Demographic and Health Survey and Multiple Indicator Cluster Surveys (Indicators For Monitoring the Millennium Development Goals , 2003) , (Hunt & Gray, 2013). If deliveries take place in hospitals with skilled staff then maternal mortality can be reduced (it is one of the eight Millennium Development Goals established by the UN) as it provides necessary supervision, adequate care, and advice to pregnant women. Women need to be aware and encouraged to seek these facilities to reduce the plight of women at the crucial time of delivery when she finds herself helpless and gets fearful in the hands of untrained people.

4. **Removal of gender discrimination**

Discrimination is said to have more tangible effects on the body and less tangible but more profound effects on the minds of women. Research conducted by UNDP evidently shows that societies which discriminate against women have to sacrifice development. Removal of gender discrimination in access to food, nutrition and education would result in reduction of poverty (Buvenic & King, 2007). GRC–SKs conducts gender sensitization programs towards vulnerable community to enhance knowledge of their rights and responsibilities.

5. **Significance of pre and post natal checkups**

Much of the danger and the sufferings during child birth could easily be avoided, if women were examined early in their pregnancies for diagnosis of abnormalities (Indicators For Monitoring the Millennium Development Goals , 2003) . Antenatal and neonatal checkups and provision of reproductive health services and post primary education would help in getting freedom from the traps which enable passing on the poverty to subsequent generations  (Chronic Poverty Research -2, 2008-09); (CPRC, 2010) . Therefore awareness on these issues would generate demand for public health services.
6. **Special diet for breastfeeding mothers**

Pregnancy and lactation increase women’s requirement for energy, protein, iron, and most other nutrients. Nutritious diet is very crucial not only for lactating mothers themselves but also for the maturation of the children, which impacts the intergenerational transmission of poverty.

7. **Breastfeeding is great for children**

Breastfeeding is a strategic and significant indicator adopted for monitoring MDGs and is recognized as a vital component of the continuum care (Hunt & Gray, 2013). Breastfeeding if stopped too early leads to human suffering and waste. Shlomo Reutlinger et al (1976) in an attempt to measure malnutrition concluded that decline in breastfeeding owing to woman labor participation could adversely affect the nutritional status of the child (Reutlinger & Selowsky, 1976). A study by MkNelly and Dunford (1999) showed positive results of micro-credit with health education on better breastfeeding practices (MkNelly & Dunford, 1999).

8. **Immunization of children against DPT, Polio, BCG and Measles**

With the government’s commitment to distribute free vaccinations as part of basic health package to insure that the child has a broad set of immunization to prevent morbidity and mortality (Indicators For Monitoring the Millennium Development Goals, 2003), the need to create awareness among women (caregiver) and community has taken the center stage (MkNelly & Dunford, 1999). Lack of accurate information on the size of the cohort of children makes immunization difficult. Children aged 13 to 60 months need to receive three doses of polio, three rounds of DPT, BCG, and measles vaccines. It depends on the information the caregiver has. However, it has also been observed by UN development program in 2003 that girls’ immunization rates are lower than boys probably due to cultural factors and not due to lack of information.

9. **Nutritional and safe method of cooking**

Less number of respondents who have been beneficiaries of credit programs, complained of problems related to severe malnutrition in comparison to non-beneficiaries (Bhuiya, 2001). Since cooking and food related activities are the prime responsibility of women, the knowledge of nutrition is of enormous significance for the health of babies. But it is also ensured that women are unable to utilize this piece of information because the preference of husband for food outweighs the nutritional consideration for children while preparing food. We need to investigate cultural determinants of food habits which can influence malnutrition.

10. **Use of green leafy vegetables**

The study conducted by Radhakrishna et al (2006), evidently shows a significant relationship between growth in consumption of leafy vegetables and decrease in malnutrition of a child. It is also known
that good nutritional status of child and mother would act as an interrupter to chronic poverty (Radhakrishna, Rao, Ravi, & Reddy, 2006).

11. **Significance of safe drinking water and sanitation and methods of making water safe**

These two indicators (reasonable access to safe drinking water and sanitation) are internationally compiled indicators and are used as common country assessment indicators to measure the progress of the Millennium Development Goals. It has been used by censuses and surveys conducted by more than 100 countries, in Multiple Indicator cluster Surveys, in Demographic and Health Surveys, and in Living Standards Measurement Study Surveys (Indicators For Monitoring the Millennium Development Goals, 2003).

Access to safe drinking water and sanitation (excreta-disposal facility) have a significant impact on underweight children, has been showed by Sylvia Walby (2005), using Ethiopia Demographic and Health Survey 2000 (Walby, 2005). Lack of access to safe drinking water is one of the multiple deprivations resulting in premature deaths from preventable diseases reported in Chronic Poverty Centre 2008-09. Unsafe water as the direct cause of several diseases in developing countries has been propagated by the United Nations. The know-how of making water safe is of great significance. It is evident from the findings of the study by SEWA, Elizabeth et al (2003) that Self Help Group improved access to safe drinking water and sanitation (Littlefield, Morduch, & Hashemi).

Sanitation is an issue related to a woman’s dignity and safety, besides it has significant impact on the underweight children.

12. **Significance of education and training to women**

In a much publicized speech in Copenhagen, Hillary Clinton emphasized on the relationship between girls’ education and reduction in poverty. Naila Kabeer’s notion of empowerment maintains that the process of acquiring the ability to make choice, to access education and training enhances the capacity and is recognized as ‘enabling’ factor under which choices are made. Education provides the capacity to question (Human Development Report, 2010). Jejeebhoy (1995) propagates the significance of education for five elements of autonomy which includes knowledge of the external world, decision making in the family, freedom of physical mobility, emotional autonomy, self reliance and financial independence (Jejeebhoy, 1995). A survey conducted by Thomson Reuters Foundation Poll highlighted that there are systematic denial of basic human right to education, to access to health care to women and this phenomenon has been recognized as ‘hidden danger’ (Rashtra Mahila, 2011). High female literacy results in high levels of health-searching behavior by women (Hunt & Gray, Conference Presentations, 2013). Education and employment have conventionally been thought of as inputs in agency enhancement (Raju, 2009).
13. Equal rights for both sexes

The constitution of India grants equal rights to both men and women in all spheres of life and means to protect women’s rights by passing several articles from time to time. The awareness generated on this subject by GRC would instill confidence in them and trust in the legal system. Apart from this, appropriate programs increased decision-making role of women as it reflects empowerment, ensured equal access to food, education and medical care to female children (Cheston & Kuhn, 2002).

14. Significance of social connectivity

Social connectivity is the pathway which enhances women’s negotiating power both in the society and in their respective families (Charlton, 1984). Social connectivity increases the chances of finding an exit route from chronic poverty (Kothari, 2002). It refers to a social network of positive relations which leads to increased productivity in several aspects by building trust, achieving fulfillment in life. Establishing connections with the outside community is not only advantageous in finding jobs, in obtaining resources in time of emergency, sharing childcare, ensuring their safety, borrowing money, influencing others and raising voice, but also in accomplishing goals which otherwise wealth (money, time, education) possibly could do. As demonstrated by Putnam and others, social capital has a beneficial shaping impact on health and well-being not only of an individual but also of children.

15. Significance of women’s labor participation

Helen I. Safa (1981) as cited by Sue Ellen M. Charlton on women's labor participation observes the significance of job in getting a woman a degree of economic autonomy and also in letting loose the bonds of a patriarchal family. But at the same time, it also exposes her to a new form of capital development and state control (Charlton, 1984). Women’s entry into labor force would not only reduce economic dependency on men and enhance status and but would also reduce the preference for sons. It also enhances agency (Raju, 2009).

Thus, there is a need to endorse woman labor participation and for that there is a need to change ‘imposter syndrome’, which refers to the acceptance of women’s ideology about themselves as weak and dependent. (Alsop, Bertelsen, & Holland, 2006), (Andal, 2002).

16. Benefits of savings

Barret, Carter and Ikegami (2007) refer to the importance of sufficient savings to surpass poverty. But negative shock of income, health, and asset adversely affects the capacity to save (Barrett, Carter, & Ikegami, 2007). According to Calvo and Dercon, lack of savings increases the vulnerabilities to chronic poverty which occurs when an individual is exposed to irreversible shocks (Calvo & Dercon, 2009). It is because savings provide capacity to withstand any shock and protect the interests of children. Therefore, an implicit stress is mounted on poor households which lack sufficient resources.
(savings) for investment in children, in order to stall the intergenerational transmission of disadvantage. SHGs promoted by GRCs provide a ‘win win’ situation for poor and voiceless women by encouraging saving and lending activities and help break the debt cycle, as reported by Anton Simanowitz (Simanowitz & Walters, 2002).

17. Significance of maintaining hygiene

Smith and Haddad emphasized on maintaining hygiene as crucial for care giver for better outcomes of children in terms of health (Smith & Haddad). But making aware of the significance of maintaining hygiene, which has direct bearing on outcomes of women and children in terms of health, requires infrastructure. Therefore lack of either of two factors results in poor hygiene.

18. Entitlement

Andrew Shepherd et al. (2006) opined that “a strong focus on providing information about rights entitlements and obligations to the poor may be a precondition for escaping persistent poverty,” (Shepherd & Mehta, CHRONIC POVERTY & DEVELOPMENT POLICY IN INDIA, 2006). Martha Nussabaum believes in provision of entitlements to women in order to remove gross inequalities which generate differentials in maternal nutritional status, health care, body’s integrity and emotional well-being which affect the life chances of child even in the womb. GRCs with the objective of building social empowerment holds sessions where beneficiaries can have access to relevant information crucial to their basic rights and entitlements.

2.7. Conclusion

Chapter two is based on extensive study of literature of three key aspects of the present study, namely, chronic poverty, women’s empowerment, and genesis of Gender Resource Centre. Wide literature on different dimensions of these three topics, with converging areas provides ample scope for the study. Yet there exists a definite gap in the field of evaluation of a program from the perspective of chronic poverty as there is a paucity of literature on the adoption of the perspective of chronic poverty.
2.8. Notes

(Section I)

1. Considering the relationship between non income deprivations such as health and education and child poverty as timing of poverty is very crucial. Isabel Gunther and Stephan Klasen (2009) in ch.4, pp 77-101 in Poverty Dynamics Interdisciplinary perspectives ed. By Tony Addison, David Hulme, and Ravi Kanbur focused on education poverty and health poverty to understand the depth of poverty.

2. The United Nations Millennium Declaration of 2000 signed by 189 countries showed a strong commitment towards achieving interrelated eight Goals including 18 time bound targets to create an environment at the national and global levels which is conducive to development and the elimination of poverty. (http://www.un.org.millenium/declaration/ares552e.htm) (Indicators For Monitoring the Millennium Development Goals, 2003).

3. A. Sen (1976) uses two steps for traditional measurement of poverty. The first step requires the identification of poor from the population, which can be accomplished by setting up a poverty line which can be drawn between poor and non poor. The second step involves the aggregation of the number of poor who fall below the predetermined criteria of poverty line by constructing poverty index on the basis of crucial information (Sen A., An ordinal Approach to Measurement, 1976).

4. PG (Poverty gap), is the near shortfall from the poverty line expressed as a percentage of the poverty live.

5. Social exclusion refers to the differential in access to opportunities for economic resources, political privileges, organizational influence, cultural experiences and limited participation in normal activities of the society, as described by Mendola (2009) (Mendola, Busetta, & Milito, 2009).


7. The term ‘Spell’ used by Cesar Calvo and Stefan Dercon in Chronic Poverty and All That, refers to the time unit. It refers to mean that poverty can be decomposed into ‘spell’. The term ‘Spell’ used by Cesar Calvo and Stefan Dercon in Chronic Poverty and All That, refers to the time unit. It refers to mean that poverty can be decomposed into ‘spell’.

9. Multi dimensionality of poverty:-HDR 2010 UNDP states in its report that “Poverty is multifaceted and thus multidimensional” in order to stress the superiority of multidimensional poverty index reflecting deprivation in capability in array of dimension in comparison to money-based measures. For detailed discussion see chapter 5, page 101-111, in HDR 2010, UNDP.

10. (Ninth Five Year Plan)

11. More examples of child well-being index developed in other countries can be seen in Smith Wazir “child poverty”.

12. But the biggest drawback with “composite index” as mentioned by Ravallion (2011) may not explore the inequality in access to resources within the household, though different dimensions of poverty are shared by the members of the same household, but their experience and impact may differ (Ravallion, 2011).

13. Lewis, in ‘La Vida’s strongly believes that, coping strategies like holding low aspirations, fatalism, compromising with self respect when adopted over years and across generations create “culture of poverty” with a structure of its own beliefs, value systems, attitudes and behavior entrapment in poverty by letting go the opportunities which can pave their way out of poverty (Lewis).

14. Poverty stricken neighborhood inflicted with social pathologies including high rate of crime, inadequate or poor schools, and lack of adequate medical healthcare and lack of job opportunities.

15. Maintainers of chronic poverty:- See (Bhide & Mehta, 2006), Shashanka Bhide et al (2006), highlights a number of factors that can be termed as drivers, Interrupters and maintainers of poverty by reviewing some of the panel data based on chronic poverty for the Indian subcontinent. The list of identification of ‘Anti Drivers, Anti Maintainers And Active Interrupters’, is based on Bhide and Mehta (2004a).

16. The study reviewed the literature giving references of, (Hulme, Karen, & Shepherd, 2001) (Yaqub, 2000), (Guiha, Are the Chronically poor also the Poorest in India, 1989).


18. Modes of IGT of poverty :- Hulme and Shepherd (2003), emphasized on how poverty related capital can be transferred from older generation to younger generation through different modes of transmission. Views reflected by Green and Hulme, (2005) acknowledge poverty as dynamics.

19. Aber J. Lawrence and Neil G. Bennett (1997,) used these terms in context with the present and future welfare of children. For detailed discussion to understand the word,”Well-being” and “Well-becoming” see Shelly Phibbs. Health outcomes for children in Conferrada, England, Norway and the U.S. Social Indicators Research Series. Smith et.al (2006) pinpointed that systematic gender discrimination create barriers in getting benefits of interventions meant to combat poverty. They also emphasised the significant role played by early life experiences thus
leaving long lasting impact on’ well-being’ of a child influencing ‘well-becoming’ influencing later achievements in life.


Chapter 2 (Section II)

1. Status: Refers to relative social standing. But improvement in status may not increase autonomy. Therefore both are not inter usable.

2. ‘Gender’ refers to socially constructed roles, which are likely to vary across societies and it evolves over time and change as societies develop, but is independent of economic growth. It is used differently to sex which being a biologically determined attribute, which is not easy to change. The term ‘Gender’ is conveyed to GRC volunteers during gender sensitization training programme refers to “the social identity of female and male human beings. It defines the boundaries of what women and men can and should be and do. It shapes and determine the behavior, roles, expectations and entitlements of women and men in a particular society”.

3. ‘Agency’ refers to by UNDP, HDR report on page 34, (2010), as an important component of human development which means “enabling people and groups to act –to derive valuable outcomes”. For detail refer to Sen 1985b. and also Mayra Buvenic and Elizabeth King (2007) “Smart Economics”.

4. ‘Achieved Status’ and ‘Ascriptive Status’ play a significant role in the construction of gender in a society. ‘Achieved Status’ is ‘a status acquired by and individual through her efforts, often through competition and the use of special abilities knowledge and skill’. It is determined by such attributes as education, health, work participation and so on. Individual decisions can influence or change the direction of these attributes. ‘Ascriptive Status’ includes factors that are not in the control of the individual and represent a collective consciousness or community norms, such as family and kinship norms, the nature of the conjugal contract, levels of seclusion, religion etc.


7. For direct attack on poverty. Poverty alleviation strategies were started for the first time in sixth five year plan (1980-85) and achieved reduction in poverty. It focused on generation of self and wage employment along with area development for detail discussion, see Rural Development Report, 1999.

Chapter: 2 (Section iii)

1. Equity refers to equal opportunities available to an individual to lead a life of his / her choice and be able to be free from extreme deprivation in outcome. (W.D.R. 2006). Greater equity reduces poverty but economic, political and social inequalities create “Inequality Traps” which perpetrates internality and pass on its negative impact on generation by its will, (World Bank, 2006).

2. Mission Convergence developed criterion to identify the eligible persons for welfare schemes. Those with spatial and occupational vulnerability are considered as vulnerable whereas, those with spatial and social vulnerability are identified as most vulnerable category.


4. Gender mainstreaming: The Beijing Platform for Action 1995, highlighted gender mainstreaming as the mechanism for achieving gender equality. Caroline Moser and Annalise Moser (2005), refers gender mainstreaming a strategy for making women’s and men’s concerns and experiences an integral dimension of the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and social spheres in order to achieve gender equality. Gender mainstreaming is recognized as a diverse entity and “ needs to be rethought with special attention devoted to the understanding of the problematic of gender inequality that underlies it and the articulation of the relationship between gender mainstreaming and societal change”, (Daly, 2005).

5. Patriarchal hierarchies are reflected in formal and informal social structures and institutions (family, clan, community, market, state). Patriarchal value systems sustain women’s subordination by making it seem Natural glorifying it through moral arguments and by creating institutions that replicate gender hierarchies. Retrieve from http://jagori.org/wp-content/uploads/2009/12/.


7. Definition of skilled health personnel has been taken from the list of quantitative indicators for monitoring progress towards the eight goals and eighteen targets derived from the United Nations Millennium Declaration (table), that says “Skilled health personnel include only those who have
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