

HUNGER WATCH-II

February 23, 2022

What is Hunger Watch?

The Right to Food Campaign in association with the Centre for Equity Studies and a number of other networks and organisations conducted the first Hunger Watch survey after the national lockdown in 2020 with three broad objectives. First, to track and document the hunger situation among vulnerable communities through in-person surveys. Second, to coordinate local action demanding access to rights and entitlements as a follow up to the survey. Third, to draw public attention to the scale of the problem and build public consciousness around the prevailing situation of hunger in the country. The report of the first round of the survey that was conducted in November, 2020 can be found [here](#).

When and how was the second round of the Hunger Watch surveys conducted?

The second round of surveys, henceforth referred to as Hunger Watch-II, was conducted in 14 states in December 2021-January 2022. With the same objectives as before, Hunger Watch-II sought to document the hunger situation six months after the devastating second wave of COVID-19 in India. Vulnerable communities in rural and urban areas were identified by local activists/researchers who then shortlisted households to be surveyed based on group discussions with the community. A simple questionnaire was developed and administered using smart phones. The survey itself was done in person. While the results being presented may not be representative of the district, state or country, they do, however, tell a story of deprivation of lakhs of households in similar situations.

What is the overall context of precarity?

Malnutrition and food insecurity in India are very high. The recent round of National Family Health Survey data (NFHS-5) shows that improvements in malnutrition have slowed down since 2015 (NFHS-4). Some progress had been made on this front with the universalisation of school meals and supplementary nutrition through the Integrated Child Development Scheme (ICDS) and the expansion of the Public Distribution System (PDS) (orders passed under the 'Right to Food' case, PUCL vs Union of India CWP 196/2001). This was further strengthened with the National Food Security Act (NFSA), 2013, which guarantees 5 kilos of cereals per person per month at highly subsidized prices to 67% of the population. However, the budgets for many of these social safety nets have been declining in the last few years. The budget for ICDS has seen a 38% cut in real terms in 2022-23 compared to 2014-15 and the mid-day meal scheme (MDMS) has seen nearly 50% reduction in real terms¹.

Numerous studies have pointed to the debilitating impact of the pandemic and the associated economic slowdown, especially on the informal sector. Despite contributing to nearly 50% of the country's GDP and constituting 86% of the workforce, the conditions of workers in the informal sector has significantly worsened over the last two years². It is estimated that an additional 23 cr individuals have

¹Road Scholarz: <https://twitter.com/roadscholarz/status/1494158026588114950?s=20&t=L5wLHKTJaLPX0RbjKwj2gg>

² NCEUS. 2008. Contribution of the Unorganised Sector to GDP Report of the Sub Committee of a NCEUS Task Force. New Delhi.

fallen below the daily wage threshold of Rs 375 per day³. In fact, there is evidence suggesting increased informality even among salaried workers⁴. A well-nourished and healthy society is not just a constitutional imperative but is also critical for the economy.

Hunger Watch I showed that six months after the national lockdown (end-2020), the hunger situation was grave. Many households reported lower levels of income (62%), worsened nutritional quality (71%) and decrease in quantity of food consumed (66%) compared to the pre-lockdown period. Hunger Watch-II shows that many of these issues remain pressing concerns even now.

What are the big concerns as per Hunger Watch II?

- **Income shock:** Two years into the pandemic, 66% of the respondents said that their income decreased as compared to pre-pandemic period.
- **Poor food intake:** Only 34% of the overall sample reported that their household's cereal consumption in the month preceding the survey was sufficient. Using the Global Food Insecurity Experience Scale (GFIES)⁵ it was found that 79% of the households surveyed reported some form of food insecurity, and an alarmingly high 25% reported severe food insecurity.
- **Poor diet quality:** 41% of households reported that the nutritional quality of their diet had deteriorated compared to pre-pandemic levels.
- **Access to Government Programmes:** 84% of the households had a ration card and over 90% of those who had any ration card that is eligible for subsidised grains, said they received some food grains. However, a quarter of households with eligible members said that they did not receive MDMS or ICDS provisions. Many are left out of the food security net, calling for urgent strengthening and expansion of these schemes.

[See enclosed note with highlights from the Hunger Watch II Survey and a copy of the ppt].

In light of these findings, what are our demands?

As seen above, the PDS reached most of the households that were eligible although there were larger gaps in delivery of other schemes such as ICDS, MDMS, maternity entitlements, and pensions. Considering the high levels of food insecurity and vulnerability, there is a need to expand, universalise and strengthen each of these programmes. We demand universalisation of the PDS with inclusion of pulses, millets and oils, adequate allocation of funds for MGNREGA and for provision of 200 days of work per household, revival of mid-day meals and anganwadi meals with inclusion of eggs, milk and fruits, maternity entitlements of at least Rs. 6000 for all pregnant women without conditionalities, social security pensions of at least Rs. 2000 for the elderly, single women and disabled, child care services and improved working conditions for frontline workers.

[See enclosed note with detailed demands]

³ State of Working India Report, 2021 of the Centre for Sustainable Employment, Azim Premji University

⁴ Abraham, R and Amit Basole, Jan 7, 2022, The India Forum <https://bit.ly/33H4Soz>

⁵ See Annexure 1 for details on the Global Food Insecurity Experience Scale. Hunger Watch II survey included all the questions from this tool. A raw score on GFIES \geq 1 indicates some food insecurity and GFIES \geq 7 is severe food insecurity.

HIGHLIGHTS FROM THE HUNGER WATCH II SURVEY

23 FEBRUARY 2022

Some highlights from the Hunger Watch II survey are presented below. Based on the capacity and resources of the local organisations, a varied number of households have been surveyed in different states. The figures presented here are not weighted by the sample size or population of the states but are simple averages. A detailed report with further details and disaggregation will be released soon.

Profile of Respondents

- 6,697 respondents from 14 states. 4,881 in rural areas and 1,816 in urban areas.
- State-wise number of respondents: Uttar Pradesh (508), Madhya Pradesh (821), Gujarat (549), Rajasthan (105), Maharashtra (1182), Chhattisgarh (254), Jharkhand (166), Delhi (280), Telangana (98), Andhra Pradesh (150), Himachal Pradesh (260), Bihar (178), Karnataka (154) and West Bengal (1992)
- 31% of the surveyed households were STs, 25% were SCs, 19% belonged to the General category, 15% OBCs and 6% were Particularly Vulnerable Tribal Groups (PVTGs).
- About 64% identified themselves as Hindus while 18% were Muslims.
- 71% of the respondents were women.
- 24% were single woman headed households, 6% of the respondents had households with a member who was disabled and 8% of the respondents were older person households without caregivers.
- 41% were non-agricultural casual labourers, 19% were agricultural casual labourers, 11% cultivators and 18% were regular salaried informal workers. 6% of the respondents were unemployed.
- 70% of the respondents reported household income of less than Rs 7,000 per month.

Two years into the pandemic, incomes are low compared to pre-pandemic levels

- 66% of the respondents said that their income decreased as compared to pre-pandemic period. Among those who suffered a decline in their income, close to 60% said their current income was less than half what it had been before the pandemic.

- Overall, 40% of the households with working members and 31% of the total Hunger Watch-II sample reported that current incomes are less than half pre-pandemic levels.
- Close to 45% of the households had some outstanding debt. Among those with outstanding debt, 21% of the total respondents have a total amount of debt of more than 50,000 rupees.

High incidence of food insecurity

- We administered the Global Food Insecurity Experience Scale (GFIIES), an 8-item scale that has been used in many countries around the world (See Annexure)
- Close to 80% of the sample reported some form of food insecurity in the month preceding the survey. 31% reported mild food insecurity, 23% moderate, and a staggering 25% reported severe food insecurity.
- More than 60% worried about not having enough food, were unable to eat healthy or nutritious food or could eat only a few kinds of foods in the month preceding the survey.
- About 45% of the respondents reported that their household ran out of food in the month preceding the survey.
- Close to a third of the respondents reported that they or someone in their household had to skip a meal or sleep without eating in the month preceding the survey.

Overall decline in nutritional quality and quantity, even the relatively better off affected badly

- Only 34% reported that their consumption of cereals in the last month was sufficient.
- Consumption of nutrient rich foods was poor. A large proportion of households reported that they had eaten nutritious foods fewer than 2-3 times a month: 28% households reported having eating pulses fewer than 2-3 times a month. The corresponding figures for other foods are as follows: 28% for dark green leafy vegetables, 50% for milk or eggs, 55% for flesh foods, and 58% for fruits.
- Compared to pre-pandemic 41% of the respondents said that the nutritional quality and quantity of food the household eats had deteriorated.
- More than one-third of the respondents perceived that their food situation would remain the same or get worse in the next three months.
- 67% could not afford cooking gas in the month preceding the survey.

Health impacts of COVID -19

- 3% reported that someone in the household died of Covid-19, however, fewer than 45% of those reported receiving any death compensation.
- 23% of the households incurred a major health expenditure. Among those households, 13% incurred an expenditure of more than 50,000 INR and 35% of more than 10,000 INR.
- 32% of the households reported that a member stopped working or lost wages due to COVID-19.

Impacts on children

- At least one in six households reported that their children have dropped out of school.
- At least one in sixteen households reported that children in their households have entered the workforce.
- These numbers are calculated from the full sample, some households of which might not have young children, and hence are likely to be conservative estimates of the impact on child education and labour.

Access to Entitlements

- 84% have some kind of ration cards that give them subsidised grains (priority, AAY, state ration cards etc). 2% had other cards such as temporary cards/coupons.
- Over 90% of those who had any ration card that is eligible for subsidised grains, said they received some food grains, including the free grains under PMGKAY during the last six months.
- 68% of those who had NFSA ration cards (5,936 households) said that they received free grains every month under PMGKAY during the last six months.
- 24% of households with eligible members reported not receiving any MDM transfers either in the form of cooked meals, dry rations or in cash; this rose to 28% for the ICDS transfers to eligible mothers or children, who are among those most vulnerable to hunger and malnourishment.
- Only 13% of those eligible said they had received Pradhan Mantri Matritva Vandana Yojana (PMMVY) maternity benefit entitlements regularly since the start of the pandemic. This number was 29% for pension payments among those households with an eligible member.

Towards Universalisation with Quality: Our Demands

As the Hunger Watch-II findings show, the PDS has been one of the few safety net mechanisms that has worked for those who can avail transfers. Many also expressed the added vulnerabilities they have faced, especially in ensuring nutritious meals for children in the absence of the school and anganwadi meals. The need, therefore, is to ensure universal access to these schemes as well as to expand entitlements during this period of crisis. In this context, we demand the following:

1. **Universalisation of the Public Distribution System** to provide subsidised rations to everyone who demands it. To begin with, the quotas under the NFSA should be immediately expanded on the basis of the population projections for 2022 to include all vulnerable persons especially migrant workers, homeless, sex workers, trans people and all other vulnerable communities. Redetermining the state wise quotas in light of the increase in population since the 2011 census has also been directed by the Supreme Court in the migrant workers case.
2. **Expansion of the PDS** to provide millets and other nutritious commodities such as pulses and oils while procuring these at the Minimum Support Price (MSP)
3. **Extension of the Pradhan Mantri Garib Kalyan Anna Yojana** till such time that the pandemic continues, with the provision of edible oils and pulses to each household.
4. Ensure **immediate implementation of the June 29th, 2021 order of the Supreme Court**, in the case ‘Problems and Miseries of Migrant Workers (Suo Motu WP(C) 06/2020)’, wherein the Court directed that dry rations should be provided to all migrant workers being non ration card holders and that community kitchens should be opened to provide cooked food to people in need.
5. **Hot cooked meals under ICDS and midday meals** should be revived immediately. The budgets for these programmes should make adequate provisions for inclusion of eggs and nutrient dense diet in the meals. Hot cooked meals should extend to children under three years of age through crèches and to pregnant and lactating women through community kitchens.
6. **Maternity entitlements should be universalized and made unconditional.** The amount of benefit should be increased to at least ₹6,000 per child, as per the provisions of NFSA.
7. Central government contribution for **social security pensions should increase at least to ₹2,000.**
8. **Revive National Family Benefit Scheme (NFBS)** by making it simple and transparent and raising the amount of the NFBS benefit to at least Rs.1 lakh (as per the initial intention to peg it 80 per cent of India’s per capita GDP).
9. **Child-care services must be expanded** through making adequate budgetary provisions for anganwadi-cum-creches, expansion of the National Creche scheme, creches under the NREGA and so on.
10. **Allocation for NREGA should be increased to provide at least 200 days of work per year** to all rural households seeking employment on demand, at least at the statutory minimum wage. Delays in wage payments are a direct consequence of inadequate budget allocation. A substantial supplementary allocation must be made in the first quarter of the new financial year to meet demand.
11. Wages of all workers providing care work, such as **Anganwadi Workers and Helpers, ASHAs**, should be enhanced and decent working conditions for them ensured.

Annexure

The Global Food Insecurity Experience Scale (GFIES)

Developed by the Food and Agriculture Organization (FAO) of the United Nations as part of its Voices of the Hungry project, the [Global Food Insecurity Experience Scale](#) (GFIES, or FIES for short) is a short 8-item scale that measures experience-based food insecurity and hunger. The tool has been used in many countries across the world and has been shown to provide estimates of food insecurity that are valid and comparable across contexts. The 8-items are arranged roughly in increasing order of severity and are posed as follows:

During the last [x] months, was there a time when, because of lack of money or other resources:

1. You were worried you would not have enough food to eat?
2. You were unable to eat healthy and nutritious food?
3. You ate only a few kinds of foods?
4. You had to skip a meal?
5. You ate less than you thought you should?
6. Your household ran out of food?
7. You were hungry but did not eat?
8. You went without eating for a whole day?

The typical reference period for the GFIES is over the preceding 12 months but it can be adapted for use in survey settings where a shorter reference period is more appropriate. Given its short length and easy to understand questions the GFIES has been used extensively in COVID-related phone surveys in the region (including in India) with varying reference periods. To minimize recall bias and increase the accuracy of responses we limited our reference period to the month preceding the survey.

The responses to the FIES are to be analysed as a scale. Individual responses to the 8-items are useful in determining whether the scale is operating the way one intends, i.e. that more severe items are less prevalent than less severe items, but it is not recommended that they be used individually. The recommended method for combining the responses on all 8 items is the use of the Rasch model, which accounts for the varying severity across items and computes a food insecurity estimate along a linear scale. For this presentation, we chose instead to use a simpler method to aggregate responses on the GFIES, one that weights all questions equally. All 'yes' responses were scored as 1, all 'no' responses as 0, and a raw score for each household was computed as the sum of scores on each of the 8 items. An overall raw score of 1-3 (out of 8) on this scale meant that the household experienced mild food insecurity, a score of 4-6 meant they experienced moderate food insecurity, and a score of 7-8 indicated severe food insecurity. Note that this method of combining responses could underestimate the severity of food insecurity, as the question of worrying about not having enough food (a 'milder' form of food insecurity) is given the same weight as going without eating for a whole day, which is arguably more severe. Our estimates, therefore, can be loosely interpreted as a lower bound on the severity of food insecurity.