

# ACHIEVING SUSTAINABLE DEVELOPMENT GOALS (SDGs) IN THE WESTERN REGION

## UNDERSTANDING INTERSECTIONALITY AND THE NEED FOR DISAGGREGATION OF DATA

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THE NEED FOR DISAGGREGATION OF DATA**

The Human Rights Advocacy and  
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## LIST OF ABBREVIATIONS

<b>ASHA:</b>	Accredited Social Health Activist	<b>NSM:</b>	National Skill Mission
<b>BMC:</b>	Brihanmumbai Mahanagar Palika	<b>NSSO:</b>	National Sample Survey Office
<b>BPL:</b>	Below Poverty Line	<b>ODF:</b>	Open Defecation Free
<b>CMIE:</b>	Centre for Monitoring Indian Economy	<b>ONOR:</b>	One Nation One Ration
<b>COVID-19:</b>	Coronavirus disease	<b>PDS:</b>	Public Distribution System
<b>CSO:</b>	Civil Society Organisation	<b>PHC:</b>	Primary Health Centre
<b>GDP:</b>	Gross Domestic Product	<b>PLFS:</b>	Periodic Labour Force Survey
<b>HLRN:</b>	Housing and Land Rights Network	<b>PMAY:</b>	Pradhan Mantri Awas Yojana
<b>HRF:</b>	Human Rights Advocacy and Research Foundation	<b>PMJAY:</b>	Pradhan Mantri Jan Arogya Yojana
<b>ICDS:</b>	Integrated Child Development Services	<b>PMUY:</b>	Pradhan Mantri Ujjwala Yojana
<b>ILO:</b>	International Labour Organization	<b>PwD:</b>	Person with Disability
<b>INR:</b>	Indian Rupee	<b>RTI:</b>	Right to Information
<b>JJM:</b>	Jal Jivan Mission	<b>SBM:</b>	Swachh Bharat Mission
<b>LNOB:</b>	Leave No One Behind	<b>SDG:</b>	Sustainable Development Goal
<b>LPG:</b>	Liquified Petrol Gas	<b>ULB:</b>	Urban Local Body
<b>MDG:</b>	Millennium Development Goal	<b>UN:</b>	United Nations
<b>MDM:</b>	Mid Day Meal	<b>UNDESA:</b>	United Nations Department of Economic and Social Affairs
<b>MMRDA:</b>	Mumbai Metropolitan Region Development Authority	<b>UNESCO:</b>	United Nations Educational, Scientific and Cultural Organization
<b>MOSPI:</b>	Ministry of Statistics and Programme Implementation	<b>UNICEF:</b>	United Nations International Children's Emergency Fund
<b>NFSA:</b>	National Food Security Act	<b>WHO:</b>	World Health Organisation
<b>NGO:</b>	Non Governmental Organisation	<b>YUVA:</b>	Youth for Unity and Voluntary Action
<b>NITI Aayog:</b>	National Institution for Transforming India		

# EXECUTIVE SUMMARY

The 2030 Agenda for Sustainable Development recognises and calls for action around the three pillars of sustainability: economic, environmental and social. With nine years to go, the need for global collaboration, through learning and practice, is necessary if poverty is to be eliminated by addressing its root causes. The framework of the Sustainable Development Goals (SDGs) is a statement of agreed intention and a clearly mapped direction, yet its ingenuity is that it allows each country to contextualise the goals and prioritise its course towards inclusive development.

Several efforts have been made to monitor the progress of SDGs by international agencies, as well as the Indian government, through NITI Aayog, yet the aggregate statistics rarely reflect the conditions of poverty which define the lives of the most vulnerable and excluded sections of society. Considering, one of the key principles of the SDG framework is to 'Leave No One Behind', it is imperative that the most vulnerable be enabled to and assisted in escaping poverty first, for which it is of utmost importance to track the progress of the SDGs among these communities, separately.

Urbanisation is a force that is gaining precedent within the present models of development, with estimates that the world's urban population will reach 6.3 billion in 2050. By endorsing a stand-alone goal on cities (Goal 11), known as the 'urban SDG', the international community recognised cities as a transformative force for development. Therefore, how countries manage urbanisation will be critical to reducing poverty and assuring environmental sustainability, and, ultimately, will define governments' ability to achieve most goals (Lucci & Lynch, 2016).

This study has examined the conditions of the urban poor residing in two cities of India, Mumbai and Bhopal:

Mumbai, hailed as the financial capital of the country, holds the aspirations of millions. Despite economic growth it has set an imbalanced stage with growing disparities in economic opportunities and incomes. Its population of 16 million people, reside in one of the most densely populated cities in the world (approx. 28,000 people per sq. km.). More than half of the city lives in informal settlements, a majority of whom are from socio-economically marginalised communities including Adivasis, Dalits, minority religions and genders, and are engaged in daily wage work in the informal economy. As one of the growing urban agglomerations, it is necessary to see how it tackles social and economic inequalities in the journey towards sustainable growth and development.

Bhopal is the capital of Madhya Pradesh. With a population of 1.8 million, the Tier-II city has seen dark days marked particularly by the Gas tragedy at the Union Carbide plant in 1984, which continues to have adverse effects on the lives of people and environment. The governance structures were struggling to make a breakthrough with the last development plan having been approved, by people and legislators, in 2005. Yet in 2016 the city began to make strides in urban development, after being selected as a pioneering Smart City in India. The mission will have to take into its helm the real crisis of unequal development, as 26.68% of Bhopal's residents live in informal settlements with limited access to basic infrastructure and services.

This report presents the findings of a mixed-method study conducted in these two cities. The aim of the study was to monitor the progress towards SDGs among the severely vulnerable populations, and so four informal settlements were selected: Ambujwadi and Behrampada in Mumbai, and, Ehsaan Nagar and Gautam Nagar in Bhopal. The first phase was conducted between October 2019 and February 2020, but with the rapid spread of COVID-19 and the

visible worsening of conditions of the urban poor, a second phase was initiated in September 2020, to measure the impact of the pandemic and subsequent lockdown.

The findings from the study show significant differences between the population groups surveyed and the state/national averages, thereby indicating that the progress in SDGs reflected in aggregate reports often doesn't reflect the conditions of the vulnerable. The key disadvantages experienced include:

**1. Systemic Exclusion:** The surveyed population groups were denied access to several essential services and were largely excluded from availing the social welfare schemes initiated by at the national/state levels. The most significant areas of dispossession were in food security, health, education towards employment, access to sanitation, and adequate housing. Without access to basic needs, their bargaining power and participation in the development planning was not only difficult but often not a priority. Moreover, with the lockdown, many of these vulnerabilities were exposed and aggravated with little assistance from urban local bodies or other independent agencies.

**2. Insecurity is the Norm:** Since all the households were located in informal settlements, with three in non-notified slums, insecurity of tenure casts a shadow over the certainty of their shelter, but also several basic necessities including water and electricity. In addition to the looming threat of eviction, many found employment in the informal economy and hence were not guaranteed job security. These conditions were further exacerbated during the lockdown when people were denied the chance to work while some lost their livelihood altogether, as a result of which they were unable to feed themselves and their families, and in some cases lost security of shelter.

### 3. Intersectional discrimination is violence:

The people who reported the worst conditions were often female and transgender workers, who received unequal wages and faced repeated threat to their safety when they ventured out, and the *Pardhis* of Ambujwadi, Ehsaan Nagar, Gautam Nagar, who carried the stigma of the long delegitimised criminal status and were excluded and often rebuked by state machinery. Hence, individuals who find themselves at the bottom of more than one pyramid, of sex, gender, religion, caste, etc., face more complex challenges and threats from enjoying their right to the city.

Keeping this in mind, it is necessary to adopt an equitable approach towards development where the needs of vulnerable and socially excluded communities feature at the top. In urban areas, this will require reframing the narrative to include several citizens who have long been invisibilised and ignored.

The findings from the study have shaped some recommendations that have been presented through the SDG framework. They have also allowed the identification of key stakeholders whose involvement is crucial and provided strategic planning and monitoring approaches. Below is a summary of the recommendations:

**1. SDG 2:** There is a need for universalisation of ration cards along with focusing on fast tracking the One Nation One Ration scheme to ensure food security and eradicate hunger. Nutritional needs of children, adolescent girls and lactating mothers require additional policy interventions.

**2. SDG 3:** The COVID-19 pandemic has highlighted the existing fault lines in the medical infrastructure, the need to strengthen it and ensure its access to vulnerable populations. Additionally, medical insurance needs to be prioritised and schemes such as the Pradhan Mantri Jan Arogya Yojana (PMJAY) needs to be extended to include out patient expenses as well.

**3. SDG 4:** Reasons for high drop out rates of children from the school system need to be identified and addressed. The significantly adverse impact on children's education due to the pandemic induced lockdowns and resource poverty require special attention and interventions. Furthermore, it is important to move beyond the mandate of enrolment and retention towards quality education that can lead to gainful employment.

**4. SDG 6:** Adequacy of habitat for vulnerable populations needs to be prioritised and guaranteed to all those who formulate the backbone of economic growth in urban areas.

**5. SDG 7:** Access to clean cooking fuel needs to be extended to all vulnerable groups and efforts should be initiated for moving towards renewable energy sources to meet the consumption requirements.

**6. SDG 8:** Social protection mechanisms and laws that ensure dignity and security of employment should be instituted keeping in mind the predominantly informal workforce in urban areas.

**7. SDG 11:** There is need for decentralisation in urban areas that can be achieved by activating Urban Local Bodies or self-governance units that ensure and promote inclusive and sustainable growth.

## i INTRODUCTION

In a momentous agreement, in September 2015, the United Nations member states agreed on a shared intention towards ending poverty while keeping social justice and environmental consciousness at the fore. The 2030 Agenda for Sustainable Development was articulated as a 15-year plan to achieve 17 SDGs.

Since, many countries had committed to the preceding 15-year partnership, aimed at meeting the 8 Millennium Development Goals, the learning from that process has had an impact on the vision of the SDGs. It was realised that the progress had 'been uneven across regions and countries, leaving significant gaps' and that 'millions of people [were] being left behind' (UN, 2015). These people identified as the poorest and most vulnerable in society. In countries where development came at the cost of environmental degradation, poverty rates escalated; in land-locked and post-conflict countries the effects were felt most harshly by the socially and economically vulnerable sections; natural and man-made disasters often reversed the development efforts and deepened the resource inequalities. Hence, in addition to people, the planet and peaceful

relations were seen as key drivers of determining universal poverty eradication, and further action would require to address the disparity of wealth between the richest and poorest in urban and rural areas, while taking into account the effects of climate change, conflict, and access to basic services (UN, 2015).

Bearing in mind the conditions of the marginalised, the members committed to a universal principle of 'Leave No One Behind' which represents 'the unequivocal commitment of all UN Member States to eradicate poverty in all its forms, end discrimination and exclusion, and reduce the inequalities and vulnerabilities that leave people behind and undermine the potential of individuals and of humanity as a whole' (UNSDG, LNOB). This commitment requires fundamental changes in the current situation of impoverished regions and people, by first recognising and prioritising their needs in national policies. Simultaneously, there is a need for availability of critical data from these communities to measure the extent of their inclusion and empowerment.

## SDGs AND THE CITY

It is both necessary and relevant to look at the SDGs in the context of cities, particularly among vulnerable groups, as the urban population is rapidly expanding. Since the 1970s, there has been a universal migration from rural to urban areas, with the proportion of people living in cities growing faster. While the trend began in high-income countries, it is projected to impact the entire world, with countries in Asia and Africa experiencing the shift by 2030 (Montgomery,

2008). Other estimates claim that the world's urban population is expected to reach 6.3 billion in 2050, with 90% of this growth taking place in urban areas in these two regions (UN DESA, 2014).

Rapid and unplanned urbanisation has overlooked the fact that development is uneven, and that there are negative effects of a changing economic basis on the population (Birkinshaw & Harris, 2009). A report

by the World Bank, hints that urbanisation has been 'messy and hidden' as an effect of which South Asian nations have struggled to realise the potential of their cities for prosperity and liveability (Ellis & Roberts, 2016). The case of India is particularly interesting, when in 2011, for the first time since independence, the absolute increase in urban population was higher than that in rural populations (Bhagat, 2011), yet the rate of urbanisation had slowed down by 1.15% between the Census of 2001 and 2011. Still, it cannot be disregarded, as more than 31% of the population, comprising 377 million people, reside in urban areas (Census, 2011).

Economic pull-factors are the main drivers for the rural-urban migration. Whilst it is often considered an indication of increasing economic growth and therefore progress towards attainment of the SDGs, in India it has not necessarily reflected this assumption (Kundu, 2011). In most Indian cities there are limited employment opportunities for incoming migrants, and they have met with a failure of urban planning processes to address and include these communities with dignity (Ahluwalia, 2014). Hence, India fares poorly on poverty indices: The World Bank cut off for extreme poverty is \$1.25, according to which an estimated 377 million Indians fall below the poverty line, amounting to one-third of the global poor. National estimates by the Economic Advisory Council to the Indian government deemed that an urban family living on under 47 rupees (78 cents) a day, or a rural family living under 32 rupees (53 cents) a day, estimating that 363 million were poor in 2011-12 (Joseph, 2014).

The speed at which the population in India's cities is growing has been faster than the urban planning bodies were prepared for, despite the development models pushing aggressively for urbanisation. Hence, in 2012, over 860 million people were living in slums (Subbaraman and Murthy, 2015). Mumbai is estimated to have the highest proportion of informal

settlements in the world, with more than half of the population living in notified and non-notified slums<sup>1</sup> (Subbaraman and Murthy, 2015). In addition to inadequate housing, structural inequalities have led to the failure to address other issues. Informal settlements are densely populated, lack infrastructure and are often excluded from municipal programmes, such as waste collection. This has led to an array of issues, such as air quality and pollution, which causes environmental damage and directly impact people's health. With more than 7 million premature deaths in the world associated with this risk annually (WHO, 2014), it is important to note that residents of India's non-notified urban slums continue to be highly dependent on biomass for cooking (Ghergu et al., 2016), due to the absence of adequate documentation to avail of cleaner fuels subsidised by the government. Another issue is water pollution; rapid urbanisation and the lack of access to sanitation among a predicted 81% of slum residents (NSSO, 2010) leads to high contamination of water sources. This results in a dependence on 'informal' water distributions systems which increase risk to water-borne diseases (Subbaraman et al., 2013), whilst leakage of contaminated water from the slums exerts pressure on freshwater bodies such as rivers, lakes and oceans.

Beyond informality in residence, informal labour contributes to the vulnerabilities experienced by India's urban poor. Informal workers are not recognised or protected under legal or regulatory frameworks (Indranil et al., 2015) and do not have access to the social security benefits attributed to the workers in the formal sector. Yet, a bulk of India's growth in employment rate since the 1990s has been in informal labour (Ghosh, 2010), and millions continue to migrate from rural to urban areas annually in search of a better future (YUVA, 2019). Hence, the assumption that economic growth and urbanisation will result in reduced poverty stands questioned, yet the underlying message that cities offer a better future continues to fuel urban migration.

Instead of succeeding in reducing poverty cities often reproduce it in different forms, hence it is imperative that dignified ways of including and lifting

the vulnerable and excluded sections of the urban population be instituted, in fulfilment of the pledge to leave no one behind.

## INTERRUPTED BY THE PANDEMIC

The coronavirus pandemic has exacerbated the need for more equitable and inclusive development. The virus, itself carried the world into the trenches of one of the worst health crises, but simultaneous lockdowns across the globe have resulted in an economic and humanitarian crisis.

In India, the pandemic weighed heavy on an already weary health system; at the same time the lockdown nearly shutdown the economy, leaving millions without a livelihood. With insecurities, of work, housing, education, and food, looming heavily in the city, a mass exodus was triggered and many returned to their native villages. The villages, too, were not equipped for such a scale of reverse

migration, and several state governments had to step in there. But for the workers who stayed back in the cities, the hardships exposed the layers of exclusion. A comprehensive study on the plight of migrant workers, showed that 78 per cent of the urban workers lost their jobs during the lockdown, and of the remaining 49 per cent received no wage, 15 per cent received only a partial wage; hence, only 36 per cent of the continued to receive full wages through the lockdown (Action Aid, 2020). This had a material impact on the access to several essential needs and services, and many have hinted as to how it might have forced India, along with other countries in the world, to take a few steps back on its progress towards meeting the SDGs.

<sup>1</sup> Notified slums are recognised by the government and included - to an extent - in policy agenda's and initiatives. Individuals living in these slums are typically granted tenure and entitlements that come with it (i.e., access to water, city services, property rights). However, 59% of slums remain non-notified (Census 2011). These non-notified slums are not recognised by the government and continue to be perpetually excluded from programmes aimed at improving the living situation of the urban poor, being largely deprived of secure tenure and access to municipal services and government schemes (YUVA, 2018).

## ii METHODOLOGY

Cities are often considered the vehicles and centres of development, yet data of the marginalised residents is often either not gathered, or hidden in aggregate statistics. The aim of the study was to elaborate on the acute vulnerabilities of the urban poor in the Western Region of India through disaggregated data from two cities, Mumbai and Bhopal.

Using the framework of the SDGs, an attempt was made to understand the multiple intersecting vulnerabilities that highlight and determine the varied experiences of poverty. Below is an elaboration of the broad areas that fell into the purview of this study:

SDG Goal	Targets	Primary Data Collected
<b>SDG 2:</b> End hunger, achieve food security and improved nutrition and promote sustainable agriculture	<b>2.1:</b> By 2030, end hunger and ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round	1. Access to food grains through enrolment in the PDS
<b>SDG 3:</b> Ensure healthy lives and promote well-being for all at all ages	<b>3.8:</b> Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all	1. Access to essential/public health services 2. Monthly out-of-pocket-expenditure towards healthcare
<b>SDG 4:</b> Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all	<b>4.1:</b> By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes. <b>4.2:</b> By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education. <b>4.4:</b> By 2030, substantially increase the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship	1. Access to public education services 2. Annual out-of-pocket-expenditure towards education 3. Completion rate of education measured among adults, by sex 4. Participation rate of children in early education systems 5. Access of youth and adults to skill-development programmes

<b>SDG 6:</b> Ensure availability and sustainable management of water and sanitation for all	<b>6.1:</b> By 2030, achieve universal and equitable access to safe and affordable drinking water for all <b>6.2:</b> By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations	1. Source of drinking water 2. Availability of drinking water (hours per day) 3. Cost incurred to purchase drinking water per household 4. Availability of safely managed, personal sanitation facilities 5. Hygienic conditions of sanitation facilities
<b>SDG 7:</b> Ensure access to affordable, reliable, sustainable and modern energy for all	<b>7.1:</b> By 2030, ensure universal access to affordable, reliable and modern energy services	1. Access to electricity in the household 2. Monthly out-of-pocket-expenditure towards electricity 3. Usage of clean fuels as primary source of cooking fuel 4. Cost of purchasing cooking fuels
<b>SDG 8:</b> Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all	<b>8.3:</b> Promote development-oriented policies that support productive activities, decent job creation, entrepreneurship, creativity and innovation, and encourage the formalization and growth of micro-, small- and medium-sized enterprises, including through access to financial services	1. Employment-based distribution, by a. sector b. sex
<b>Goal 11:</b> Make cities and human settlements inclusive, safe, resilient and sustainable	<b>11.1:</b> By 2030, ensure access for all to adequate, safe and affordable housing and basic services and upgrade slums <b>11.2:</b> By 2030, provide access to safe, affordable, accessible and sustainable transport systems for all, improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, women, children, persons with disabilities and older persons <b>11.3:</b> By 2030, enhance inclusive and sustainable urbanisation and capacity for participatory, integrated and sustainable human settlement planning and management in all countries <b>11.6:</b> By 2030, reduce the adverse per capita environmental impact of cities, including by paying special attention to air quality and municipal and other waste management	1. Access to adequate and affordable housing facilities a. Type of housing structure b. Affordability of housing c. Accessibility of housing 2. Access to public transport 3. Percentage of people participating in urban planning forums 4. Inclusion into municipal waste collection systems

Table 2.1: SDG goals, targets and indicators used during data collection for the purpose of the study

## DATA COLLECTION

The study employed a mixed methodology to collect information about the basic rights and entitlements of people living in two communities of Mumbai and Bhopal. It was divided into two phases, marked distinctly apart by the COVID-19 induced lockdown.

The first phase offered a critical assessment of the SDG targets, by collecting data relevant to the indicators determined for each target. Quantitative data was gathered through a survey, in order to understand of the nature of poverty, and provide insights about the layered exclusion that citizens face in urban India. This phase lasted from October 2019–February 2020.

With the rapid spread of the COVID-19 pandemic, and the ensuing lockdown declared by the Indian Government on 24 March, 2020, the nature of the crisis brewed into more than just a health crisis, but a social, economic and humanitarian crisis as well. On considering the circumstances, particularly of those

of migrant workers who were stranded in the city, a second phase was initiated. After the lockdown was lifted, qualitative data was conducted through key person interviews to understand the effect of the lockdown on the lives and livelihoods of the urban poor, in June 2020 in Mumbai and December 2020 in Bhopal.

The process of data collection was based within the rights framework, through which youth from the community were trained with the data collection tool. The tool was re-framed keeping in mind their awareness about their settlement and the people who resided there. Then an application was developed that enabled them to gather the information on smart-phones or tablets, and it fed back into the system. For the qualitative interviews, some were conducted over the telephone while the latter few were face-to-face interviews which were recorded. In the interest of the respondents' security, all names have been changed in the report.

## SAMPLING

While all the households from the settlements in Bhopal were included in the study, the approach in Mumbai was slightly different. Owing to the vast numbers, the settlement was divided into clusters where purposive sampling was used to ensure

proportionate representation (a little over 10 per cent of the total number of households from each settlement), thereafter random sampling was used to select households within clusters.

	Settlement	Population	Households (Actual or Population)	Sample size of surveyed households
1.	Ambujwadi	37,952	8,328 (Actual)	890 (2,579 individuals)
2.	Behrampada	41,153	8,230 (Population)	880 (3,262 individuals)
	<b>Mumbai</b>	<b>79,105*</b>	<b>15,790</b>	<b>1,770 (5,841 individuals)</b>
3.	Ehsaan Nagar	273	58 (Actual)	58 (273 individuals)
4.	Gautam Nagar	265	62 (Actual)	62 (265 individuals)
	<b>Bhopal</b>	<b>538</b>	<b>120</b>	<b>120 (538 individuals)</b>
	<b>Total</b>	<b>79,643</b>	<b>15,910</b>	<b>1,890 (6,379 individuals)</b>

Table 2.2: Settlement wise and City wise sampling for household and individual surveys

\* Source – Data provided by Health Post Officials to YUVA representatives

## MUMBAI

**Ambujwadi** is a non-notified slum located along the coast in the north-western region of Mumbai. The settlement is situated on 2,21,117 sq. m. officially registered as Collector's land. Hence, the population of approximately 60,000 persons face issues of security of tenure.

Given its location, it also finds itself at the fault lines of ecological and developmental upheavals. In 2004, when the Municipal Corporation launched a mass demolition drive, Ambujwadi saw the largest scale of demolitions that aimed to evacuate the area. In time, people returned and rebuilt their homes and the community expanded. However, with the government classifying the area as Coastal Regulation Zone and later a No Development Zone, the threat of displacement remains. Currently, the migrant population, of construction workers, street vendors, rag pickers, and other informal workers, continues to deal with regular disruptions in the supply of water, electricity and other basic services as they find themselves in the shadow of neglect, often kept away from their basic rights and entitlements.

## BHOPAL

**Ehsaan Nagar** is a non-notified slum located on the outskirts of Bhopal, inhabited predominantly by Pardhis, one of the 198 'denotified' tribes in India. The slum came up in 2002, and is home to approximately 60 households who live on a quadrant of 1 sq. km. In 2003, the land owner Gyan Chandani, a philanthropist, gave the land for a 29-year lease period to the *Pardhi* households who then shifted from Bairagarh to Ehsaan Nagar.

While the community members are traditionally hunters, by outlawing of hunting and criminalising the group under the Criminal Tribes Act, 1871, the people find it difficult to get jobs easily. Even after the Indian government revised the nomenclature to 'de-notified tribe', the stigma remains in the social consciousness, and the community is looked at

**Behrampada** is a Muslim-dominated settlement stationed on the Bandra East side of the railway lines of Western Mumbai. Officially located partly on railway land, the rest of the settlement falls under the jurisdiction of the Mumbai Metropolitan Region Development Authority (MMRDA). The mixed-use settlement is home to a population of approximately 50,000 people, whose houses are interspersed with several commercial units, primarily small textile enterprises.

The demography, with a majority of Muslims, has placed the settlement on precarious grounds, and the extent of violence saw its worst during the riots that set the city ablaze in 1992-93. Ever since, the settlement has been neglected, and performs extremely low on a range of social and development indicators. Behrampada has also seen its share of demolitions, most recently in 2017 when it resulted in a fire that destroyed people's homes and businesses.

with doubt in many spaces. They are now primarily employed in the informal waste segregation system, and their workforce is dominated by the women of the community.

**Gautam Nagar** is a non-notified slum located close to Bhopal's city centre. The informal settlement is home to approximately 500 people from the *Pardhi* tribe. Despite having lived on the site for more than 35 years, all the households take shelter in kutcha structures made from wood, plastic and tin. Considering the frequency of demolition, the last one being as recently as 2019, the residents find efforts to improve the housing structures futile. None of the households have access to personal toilet facilities, and many use the public toilet which is located 500 m. outside the settlement, often at a cost.

Most of the community members are engaged in waste picking, and recently some have been integrated into the Municipal Waste Management

system on a contractual basis. However, there too they are not guaranteed safety gear or any social schemes.

## LIMITATIONS OF THE STUDY

This study was envisioned to provide a glimpse into the development process in Urban India, particularly through the lives of the socially vulnerable and excluded communities. An attempt of diversity was made by including two cities, from different states and with different trajectories of development. Yet since it was conducted on a limited sample it cannot be generalised to the entire population of

urban poor. Also, as the focus was through 4 slum settlements, this study doesn't include the experience of the homeless in cities. However, it provides the opportunity to look at disaggregated data presented through the SDG framework, and highlights certain trends and systemic gaps that can be further analysed and acted upon.

## iii SDG 2: END HUNGER, ACHIEVE FOOD SECURITY AND IMPROVED NUTRITION AND PROMOTE SUSTAINABLE AGRICULTURE

'Halving Hunger by 2015' was the first of the MDGs (MDG Monitor, 2017). At the time, it was a leap of good faith, and while the target was not met, the belief retained that food security at the heart of the struggle to tackle global poverty should not be abandoned, but instead strengthened. Hence, the second SDG was framed with the vision of eliminating the hunger crisis through the triumvirate forces of achieving absolute food and nutritional security, for individuals and communities, while also addressing the need for economic and ecological sustainability in the mode of food production, agriculture.

India has a long journey ahead if it is to reach this specific goal, with the condition of hunger being qualified as 'serious', according to the Global Hunger Index conducted in 2020. The country ranked 94th out of the 107 qualifying countries, and it is suggested that there is a possibility that the situation might actually be worse as these figures measured the pre-pandemic situation.

**2.1 By 2030, end hunger and ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round**

For migrant workers and people living in urban poverty, welfare schemes are critical to ensure that their basic needs are met. The Targeted Public Distribution System (TPDS) was launched in 1997, which entitled citizens to subsidised food grains at

easily accessible fair price shops on the production of a ration card, issued to the household. This was later incorporated into a larger mission to provide food and nutritional security through the National Food Security Act (NFSA) 2013, which aimed to ensure access to adequate quantity of quality food at affordable prices to people covering 50 per cent of the urban population and 75 per cent of the rural population.

The primary data from the vulnerable urban communities in Madhya Pradesh and Maharashtra revealed that among the marginalised communities there is a low enrolment in the PDS. Of the 1890 households surveyed, approximately 56 per cent of the urban households have access to subsidised food grains through NFSA cards. According to the Multi-Foodgrain Bulletin published by the Department of Food and Public Distribution in June 2020,

Enrolment in the PDS (number of households)		
Location	Yes	No
Ambujwadi	55.10%	44.90%
Behrampada	52.40%	47.60%
Ehsaan Nagar	62.07%	37.93%
Gautam Nagar	54.84%	45.16%
<b>India*</b>	<b>99.51%</b>	<b>0.48%</b>

Table 3.1: Enrolment in the Public Distribution System (PDS)

\* Source: Ministry of Consumer Affairs, Food and Public Distribution (2019-20)

1 There are two 'entitled' categories of ration cards under the NFSA - Priority and Antyodaya (poorest of the poor). As per NFSA norms, among Priority households, each member is entitled to 5 kgs of grain per month at INR 2/kg for wheat and INR 3/kg for rice. Antyodaya households get 35 kg/month at the same price, irrespective of family size. (Khera & Somanchi, 2020)

62.6 per cent of urban Madhya Pradesh and 45.4 per cent of urban Maharashtra is covered by the PDS (Department of Food and Public Distribution, 2020). Hence, while enrolment among the residents

## A POST COVID-19 ANALYSIS

The importance of the PDS in ensuring food security was accentuated during the lockdown. For many, the COVID-19 health crisis was amplified by the hasty lockdown that estranged them from their livelihood. Those who possessed ration cards were partially or completely protected against extreme hunger. However, some reported lapses in this system. Despite food grain quality being guaranteed, some ration card holders reported that this was not satisfactory. Ravi, a youth leader in Bhopal, reported, *"Although we have a ration card, the wheat that we receive is often of a poor quality. The rice is full of insects and can take hours to clean. The chana also gets spoiled soon."*

But quality was not the only issue, others reported that they were not getting their due in weight. Nadir, a resident of Ehsaan Nagar, said, *"When I went to the PDS shop, I noticed that after measuring the grain when it was being transferred into the sacks a lot was falling out. Under the pretext of not touching it, a COVID-19 precaution, we were provided a smaller amount than we were entitled to."* There were other cases where people mentioned that the fair price shops were not fully stocked with supplies and they had to make multiple trips to receive their food supplies.

Another limitation that emerged during the lockdown was the distance from the fair price shop. Anagh, a resident of Ehsaan Nagar, pointed out that the fair price shop was located at a distance of 2 kilometres (km) from the settlement. He reported the difficulty in transporting the food supplies back home. *"The rich take the auto rickshaw and get their ration easily. But most of the time we walk."* Since people were advised to stay indoors, on venturing out to avail of their food entitlements they often received stringent questioning on the part of authorities.

of Ambujwadi and Behrampada in Maharashtra exceeds the state average, the residents of the two communities in Madhya Pradesh fall below the state average.

In such dire circumstances, and in the absence of consistent support, many families whose diets were previously nutritionally insufficient began sleeping on empty stomachs. Ritika, a young girl from Ambujwadi, recalled how she had noticed that in the absence of a ration card her friend's family had no food in their kitchen for days. But they received community support, when she shared, *"I told my aunt who has begun to share the rice she received through the ration shops with them. But I don't know how long this will last, for we too have only 10-12 days of food remaining."*

Moreover, the guaranteed food grain only supplemented a portion of the diet necessary for nutritional security. With an absence of fresh vegetables, milk and meats that contribute to the health of people, people still had to scrape together their savings to buy these supplies.

In the wake of the COVID-19 initiated crisis, it was evident to the authorities that the hunger crisis was escalating. Since ration cards was often a mandatory document to access food through the PDS as also other relief packages, the hunger crisis in many households worsened. Some state governments drew up alternative methods to ensure that people received some food supplies. In Maharashtra, children who had Aadhaar cards, received their food entitlements (previously served as mid-day meals) through the Integrated Child Development Services (ICDS). Shameena, from Behrampada, informed *"My youngest child, going to anganwadi, received on lot of ration for the month of April, which included 1 kg of rice and wheat, and half a kilo dal, chana, upma and bhel."* However, in cases where the family didn't possess a ration card and lost all other avenues to procure food, the entire family would eat off the child's nutritional supply. In Madhya Pradesh, the government began

to distribute food to some Aadhaar Card holders. However, this information had to be verified by several government departments before it was approved and people lost out in the process. Nadir, a community worker in Ehsaan Nagar, said *"For the ration, lists were prepared that were verified by an authority, and then only the food supplies were provided. The complexity of this process was beyond many, and even those who did understand it found it difficult to follow every step of the procedure correctly. Especially with the threat of COVID-19 looming, it was difficult to go from department to department to get a verification stamp."*

In the case of circular migrants, whose ration cards bore the address of their place of origin, and of people who did not possess cards at all, they had to rely solely on their meagre incomes. At this juncture, numerous individuals, local Civil Society Organisations (CSOs) and political representatives, garnered resources to provide food to the vulnerable communities. Food came in the form of cooked or uncooked packages, and this helped the people tide some of the time away. Akhila, a waste picker from Gautam Nagar, shared *"We had no money, even the grain was over. There were some NGOs who brought us grain and flour. But that too began to run out, and was finished in eight days... Then, once they supplied uncooked food. Unable to gather firewood, we ate the food raw and filled our stomachs."*

## KEY FINDINGS:

1. 56.1 per cent of the households in the sampled informal settlements were enrolled in the PDS, and were in possession of NFSA Cards.
2. Enrolment did not guarantee access to all the entitlements, under the PDS, as this depended on the availability of supplies at the ration shop. Supplies were particularly limited during the lockdown, forcing many families to subsist on the bare minimum. Inadequacy of food was experienced in most households, despite some government and CSO interventions.

## iv SDG 3: ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES

'The Future We Want', the outcome document of the United Nations Conference on Sustainable Development, identifies health as a precondition, driver and outcome of sustainable development (SDKP, 2012). It was with this shared intention that SDG 3 was introduced, and as a result, governments, around the world, are independently and collaboratively committed to ensure the physical, mental and social health and wellbeing of their populations.

### 3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all

At the level of health institutions, the obligation entails the access of every citizen to a healthcare system that is equitable and provides quality treatment. As a step in this direction, the Indian government launched the Ayushman Bharat Yojana in 2017, a mission to

provide affordable, quality healthcare to the most poor and vulnerable populations. In keeping with LNOB, the approach of the mission is two-pronged: (1) to establish 1.5 lakh Health and Wellness Centres to improve the delivery of healthcare services, and (2) the introduction of the Pradhan Mantri Jan Arogya Yojana, a health insurance scheme which aims to cover more than 10 crores of the poorest, vulnerable households, with an upper limit of Rs. 5 lakhs per year (NHP, n.d.).

Primary research has revealed that in Maharashtra, people living in slums continue to approach the public health institutions more frequently, with 67.6 per cent of Ambujwadi's and 89.8 per cent of Behrampada's residents approaching the hospital. In Behrampada the closest government hospital is located approximately 1.5 km away, while in Ambujwadi the Primary Health Centre (PHC) is at a distance of 3 kms, while the Shatabdi Public Hospital is approximately 10 kms away.

Healthcare service provider approached in case of required treatment (number of households)							
Location	Public Hospital	Private Hospital	Clinic	Health Post	Alternative Medicine	Other	Total
Ambujwadi	602	185	98	1	1	3	890
	67.60%	20.80%	11.00%	0.10%	0.10%	0.30%	100.00%
Behrampada	790	74	16	0	0	0	880
	89.80%	8.40%	1.80%	0.00%	0.00%	0.00%	100.00%
Ehsaan Nagar	Data Not Available						
Gautam Nagar	Data Not Available						
<b>All India (Urban)*</b>	<b>26%</b>	<b>27%</b>	<b>44%</b>	<b>-</b>	<b>-</b>	<b>3%</b>	<b>100%</b>

Table 4.1: Distribution of Healthcare service provider approached in case of medical need

\*Source: NSS 75th round (2017-18)

While quantitative data from Madhya Pradesh was not available, the interviews revealed that people from the two communities' approach public hospitals as their last resort. The reason that was shared was not about physical access, with public hospitals being at a 1.5 km distance from Ehsaan Nagar and 4 km distance from Gautam Nagar, but instead some of the barriers are of a social nature. Since most of the informal workers from these communities are employed as waste pickers, and are from the Pardhi community, Pramod, a community worker, testified that "the discrimination that they face during treatment due to their identity and appearance results in situations where many do not approach hospitals even when

they are unwell. There are cases where the doctor is afraid to even touch them. They observe them at a distance, and then write out the prescription for the medicines." Hence, to avoid ill-treatment, people prefer to approach smaller dispensaries or else go directly to the medical stores.

In India, a majority of healthcare expenses are borne by the individual. The National Health Accounts, 2013-14, estimates that more three-fourths of expenditures for healthcare are made out-of-pocket, and the majority of approximately 63 per cent is spent on purchasing medicines (Selvaraj S et. al).

Monthly expenditure on healthcare services (number of households)								
Location	None	Up to INR 200/-	More than INR 200/- to INR 300/-	More than INR 300/- to INR 500/-	More than INR 500/- to INR 1000/-	More than INR 1000/- to INR 2000/-	More than INR 2000/-	Total
Ambujwadi	33	187	343	210	48	52	17	890
	3.71%	21.01%	38.54%	23.60%	5.39%	5.84%	1.91%	100.00%
Behrampada	43	38	388	157	148	76	30	880
	4.89%	4.32%	44.09%	17.84%	16.82%	8.64%	3.41%	100.00%
Ehsaan Nagar	Data Not Available							
Gautam Nagar	Data Not Available							

Table 4.2: Monthly household expenditure on healthcare services

The study reveals that in both communities in Maharashtra, more than half the population spends between INR 200 and INR 500 a month on healthcare, with the expenses increasing drastically in the case of an emergency. While the same figures were not obtained from Madhya Pradesh, community workers estimated that the expenditure in the settlements might exceed these figures, as people find the hospitals inaccessible and hostile, hence they approach private dispensaries and medical stores for over-the-counter medicines and pay out of their pockets.

With regard to risk protection, it is premature to measure the impact of the PMJAY as most states launched the programme in mid-2018. Still, the interviewees revealed that many had in fact filled the form with the assistance of civil society workers but were yet to receive their identification card.

## A POST COVID-19 ANALYSIS

With health systems already out of the reach for vulnerable communities, the COVID-19 pandemic has only widened the gap. The SDG Report 2020, prepared by the UN DESA, indicated that the COVID-19 pandemic might reverse the progress of SDG 3 (The Lancet Public Health).

In the surveyed communities, the residents of both the slums in Maharashtra reported greater anxiety due to the fact that there had been positive cases in the community. Unfortunately, this fear was not met by a supportive medical system and so people chose to avoid the hospitals when they showed symptoms of the virus. Saadiq, a construction worker from Ambujwadi shared his experience: *"I was not well, and had a fever and a cough. My elder daughter, too, showed the same symptoms. When her condition worsened, we admitted her into the Shatabdi Government Hospital. However, she was surrounded by Corona-positive cases, and we felt like her life was in more threat there. So, we got her medicines and brought her home."*

Yet fear was not the only factor keeping people away from the hospitals. Many individuals who lost their primary source of income, and had scraped the ends of their savings, found medical treatment inaccessible for monetary reasons. Akshat, an informal worker from Gautam Nagar, shared that having no work through the lockdown, he found himself in a financial crisis. When his wife and child fell ill, he took the difficult decision of tending to their illnesses at home as he couldn't afford the journey to and treatment at a public hospital.

The communities of Bhopal had witnessed no positive cases, yet other illnesses struck more harshly due to deterioration of diets and lifestyle. Ravi, a young man from Ehsaan Nagar, shared how the police proved to be an obstacle when he tried to approach a local hospital. *"I had a cough and cold during this time. One of my friends took me to get treated. On the way we were stopped by the police and they instilled fear*

*in us. They questioned us as to why we were out. As he is disabled, they teased him about this and questioned him quite severely. We were forced to return, and I decided to quarantine myself to prevent my family from exposure."*

With the communities reporting limited screening, and the absence of any awareness programmes or counselling, those already excluded from healthcare found themselves in an information blackout, too. Few had received soaps, and almost all had heard of the necessity for masks, yet large parts of the community felt like they didn't know much about the virus and instead an atmosphere of fear was setting in.

### KEY FINDINGS:

1. The slums in Mumbai found greater takers for public health services with 78.7 per cent of the people reporting that government hospitals were their first option when unwell. Quantitative figures were not available in Bhopal, but people shared that they preferred to visit dispensaries which were closer and where the health workers were more approachable.
2. Monthly out-of-pocket-expenditure on healthcare featured among residents of the Mumbai slums despite them approaching public facilities which are to guarantee free medical treatment. Most households reported to spend between INR 200-500 a month.
3. During the lockdown, health facilities were experienced as more threatening environments with people fearing to contract the virus there. Moreover, the economic implications of the virus proved to weigh heavy on the choice of getting professional medical help.

There was some positive feedback on the treatment of pregnancies in this period. Two of the interviewees in Bhopal revealed that their wives had gone into labour during the lockdown. Abdul, a load-carrier, shared that his wife was *"the first priority in the family as she was carrying another human being with her. If she experienced any difficulty, I would take her to the nearby Anganwadi, where the doctors were available and attended to her needs."* Ravi had some difficulty availing of the ambulance facilities, but after he transported his wife to the hospital, she had a smooth and comfortable delivery there.

Most women reported poor menstrual hygiene particularly during this period. Some shared that they continued to use the old clothes, repurposed as pads during their menses. Bindu, from Ehsaan Nagar, shared that she believed that the predominant use of old cloth was the cause for much irritation and maybe even minor illnesses among women.

## SDG 4: ENSURE INCLUSIVE AND EQUITABLE QUALITY EDUCATION AND PROMOTE LIFELONG LEARNING OPPORTUNITIES FOR ALL

Education has the ability to both directly and indirectly reduce poverty and inequality.

It is commonly argued that education imbues an individual with certain skills that increase their opportunities of employment, and hence is a vehicle to improving the standard of living. However, the principle that education is not just a fundamental right, but can also be an enabling right (Krupar & Taneja, 2020) recognises its value that spans beyond the school. This is reinforced by education being emphasised to promote gender equality, improve health indicators, generate awareness of one's fundamental rights, and to foster greater democracy and peace.

SDG 4 locates education as the primary agent to eradicate poverty through universal, quality education which is accessible by all. The Global Education Monitoring Report, published by UNESCO, confirms this with the estimate that 60 million people could evade impoverishment with 2 more years of schooling, and approximately 420 million people could break free from the vicious cycle of poverty if they completed senior school education (UN, 2017). The targets of the fourth SDG, could be categorised to have three broad foci: (1) Access, (2) Quality, and (3) Continuity<sup>3</sup>.

**Target 4.1 By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes.**

The Indian Government has worked to draw young children into schools through the Sarva Shiksha Abhiyaan, launched in 2002 and born out of the District Primary Education Programme, with the aim of universalising primary education. In the initial years, the focus was on establishing or strengthening school infrastructure at an accessible location for all children. Additionally, there was an effort towards improving the quality of education, by widening the pool of teachers and building their capacities. In 2009, the Indian government introduced the Right to Education Act guaranteeing free and compulsory education to every child between the age of 6 and 14, thereby providing an impetus to state governments to accelerate enrolment and make public schools a more inclusive space. The latest figures, according to the Ministry of Human Resource Development 2016, report an aggregate of 99.6 per cent enrolment in primary education in India (MOSPI, 2020).

However, despite the rigorous effort to push enrolment numbers in public institutions, a study by Save the Children found that while there was a growing trend of privatisation in education since the early 1990s, there were other factors that increased enrolment in private schools. These included loss of faith among parents in government schools born out of over-crowding, class difference between students and teachers, and also the desire for an English-language education (PWC, 2015).

The primary data, from the two states, offers two very different scenarios:

Healthcare service provider approached in case of required treatment (number of households)			
Location	Public school	Private school	Other
Ambujwadi	95	88	3
	51.10%	47.30%	1.60%
Behrampada	128	149	3
	45.70%	53.20%	1.10%
Ehsaan Nagar	22	0	0
	100.0%	0%	0%
Gautam Nagar	15	0	0
	100.0%	0%	0%

Table 5.1: Type of school attended by children

In Maharashtra, the distribution of children in public and private primary schools is relatively balanced, with only 3.8 per cent more children in Ambujwadi attending government-run schools while in Behrampada 5.4 per cent more children attended private school. In Bhopal, though, the attendance was entirely in public schools, as they were located at a closer proximity, and promised a free education. Considering the acute nature of poverty in Ehsaan Nagar and Gautam Nagar, this appears as the only option.

The out-of-pocket expenditure on education might be for various reasons. If enrolled in private institutions, some children receive scholarships, while others are left to make these payments personally. In addition, there are the costs of books, transport, uniforms, extra-academic help, etc. The quantitative figures from Ambujwadi and Behrampada, show that these costs are incurred by those enrolled in private institutions as well as some in government-run schools, hence the idea that education is free doesn't reflect the authentic experience.

Annual Out of Pocket Expenses on Education (number of households)								
Location	None	Up to INR 500/-	More than INR 500/- to INR 1000/-	More than INR 1000/- to INR 2000/-	More than INR 2000/- to INR 5000/-	More than INR 5000/-	No response	Total
Ambujwadi	53	15	11	17	40	50	0	186
	28.50%	8.10%	5.90%	9.10%	21.50%	26.90%	0.00%	100.00%
Behrampada	145	11	6	28	22	66	2	280
	51.80%	3.90%	2.10%	10.00%	7.90%	23.60%	0.70%	100.00%
Ehsaan Nagar	Data not available							
Gautam Nagar	Data not available							
<b>All India (Urban)</b>	<b>INR 16,308</b>							

Table 5.2: Annual household expenditure on children's education

\*Source: NSS 75th round (2017-18)

<sup>3</sup> This study, will attempt to evaluate the first and third parameters.

With most of the population in Ambujwadi and Behrampada spending less than INR 5000 a year, the figures are substantially lower than the aggregate urban statistic. Still, financial expenses were suggested as a reason for people withdrawing their children from school, as Veera says, “We are all daily wage earners and our main issue is that we are not able to provide quality education to our children. We find it difficult to pay their fees, buy books and meet other expenses, and suggest that they quit schooling and help us run the house.”

Despite a nation-wide improvement in enrolment in primary education, there has been a great struggle of retention. Across the country, 29 per cent of children drop out before Class 5, and 43 per cent leave school before finishing upper primary school. In the end, high school completion is only 42 per cent (Sahni, 2015). The condition among vulnerable and excluded communities is often much worse. On examination, the completion rates among adults in the four communities points out to an extremely grim situation. In these communities, the people

Education level of Adults of 18 years or above age (number of individuals)											
Location	Cannot read, write or calculate	Can Calculate	Can calculate and read	Up to 5th	6th to 9th	10th Pass	12th pass	Graduate	Post Graduate or Above	Missing Value	Total
Men in Ambujwadi	77	37	158	264	168	164	82	43	4	12	1009
	7.63%	3.67%	15.66%	26.16%	16.65%	16.25%	8.13%	4.26%	0.40%	1.19%	100%
Women in Ambujwadi	154	90	147	209	128	76	47	19	3	16	889
	17.32%	10.12%	16.54%	23.51%	14.40%	8.55%	5.29%	2.14%	0.34%	1.80%	100%
Total for Ambujwadi	231	127	305	473	296	240	129	62	7	28	1898
	12.48%	6.90%	16.10%	24.84%	15.52%	12.40%	6.71%	3.20%	0.37%	1.49%	100%
Men in Behrampada	95	77	34	128	361	207	108	44	5	30	1089
	8.72%	7.07%	3.12%	11.75%	33.15%	19.01%	9.92%	4.04%	0.46%	2.75%	100%
Women in Behrampada	149	112	48	141	324	145	79	40	8	20	1066
	13.98%	10.51%	4.50%	13.23%	30.39%	13.60%	7.41%	3.75%	0.75%	1.88%	100%
Total for Behrampada	244	189	82	269	685	352	187	84	13	50	2155
	11.35%	8.79%	3.81%	12.49%	31.77%	16.31%	8.66%	3.90%	0.60%	2.32%	100%
Men in Ehsaan Nagar	25	15	9	15	9	7	0	1	0	0	81
	30.86%	18.52%	11.11%	18.52%	11.11%	8.64%	0.00%	1.23%	0.00%	0.00%	100%
Women in Ehsaan Nagar	40	18	15	5	3	0	0	0	0	0	81
	49.38%	22.22%	18.52%	6.17%	3.70%	0.00%	0.00%	0.00%	0.00%	0.00%	100%
Total for Ehsaan Nagar	65	33	24	20	12	7	0	1	0	0	162
	40.12%	20.37%	14.81%	12.35%	7.41%	4.32%	0.00%	0.62%	0.00%	0.00%	100%
Men in Gautam Nagar	32	10	5	17	5	3	2	0	0	0	74
	43.24%	13.51%	6.76%	22.97%	6.76%	4.05%	2.70%	0.00%	0.00%	0.00%	100%
Women in Gautam Nagar	34	9	2	13	3	3	3	1	0	0	68
	50%	13%	3%	19%	4%	4%	4%	1%	0%	0%	100%
Total for Gautam Nagar	66	19	7	30	8	6	5	1	0	0	142
	46.48%	13.38%	4.93%	21.13%	5.63%	4.23%	3.52%	0.70%	0.00%	0.00%	100%

Table 5.3: Gender wise distribution of adults on formal education, literacy and numeracy

who had no education or dropped out before Grade 5 amounted to 35.47 per cent of Ambujwadi's, 23.95 per cent of Behrampada's; 75.31 per cent of Ehsaan Nagar's and 64.79 per cent of Gautam Nagar's adult population. In all communities the figures of women's education are much worse.

The reasons for dropouts in the urban communities in Maharashtra present a range of influences and circumstances.

Reasons for children to never go to school or drop out (number of households)										
Location	Not interested in studying	Financial condition	Marriage	Need to help family to earn	School is not accessible for PWD	School is too far away	Travel to the school is unsafe	Other	No response	Total
Ambujwadi	355	20	3	0	3	1	1	54	14	451
	78.70%	4.40%	0.70%	0.00%	0.70%	0.20%	0.20%	12.00%	3.10%	100%
Behrampada	459	12	2	2	1	2	0	7	20	505
	90.90%	2.30%	0.40%	0.40%	0.20%	0.40%	0.00%	1.40%	4.00%	100%
Ehsaan Nagar	Data Not Available									
Gautam Nagar	Data Not Available									

Table 5.4: Reasons for children dropping out or never attending school

While a large number of children reported a lack of interest in studying, the underlying factors that promote this perceived feeling were not explored

adequately, and would require deeper inquiry. The countrywide estimates, from the National Family Health Survey (2015-16), measure that 6 per cent of

### A RESIDENT OF EHSAN NAGAR, REFLECTS ON WHY THIS MIGHT BE THE CASE AMONG THE PARDHI COMMUNITY::

Education completion and qualification is one of the most important concerns in Ehsaan Nagar. In our community, and its neighbouring settlements of Gandhi Nagar and Rajiv Nagar, you will find a limited 6-7 people who would have completed their 10th or 12th education, and encounter numerous cases of dropouts. This is because, the kind of lifestyle of the community members is very different from others. Moreover, the language that we speak in our homes is not the same as the one spoken in schools. Thirdly, since the main occupation of the community members is waste picking, many children find themselves assisting their parents in this work too. It is natural that they are often embarrassed to be seen doing this work by their school friends, other parents or teachers of the school. This comparison of their lives with that of their classmates results in many negative thoughts. Finally, the education of girls is also a concern. The norms of the community are very difficult to question, and so patriarchal ways dominate the functioning of the community. This mindset limits the scope of girls' education in the community.

If I was to share my experience, although I have completed my graduation, all through my education I have heard a lot of abuses because of the community from which I hail, from teachers as well. For me that was very demotivating. And this is a feeling which is shared by the youth in the community. And so, it is not unusual for them to drop out of the educational institutions.

children in urban India do not attend school (IIPS, 2017), and UNESCO ranked India to be among the top five countries with children left out the educational system (Sahni, 2015). The national aggregate figures project the number of children out of school to be 62.1 million (MHRD, 2018), however some studies reveal higher numbers among the Scheduled Castes, Scheduled Tribes and Minority communities.

**Target 4.2 By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education.**

In India, the commitment to early childhood education is enshrined in the 45th Schedule of the 84th Amendment to the Constitution. This

principle is partially realised through the Integrated Child Development Services (ICDS) program which envisions the holistic development of the child, under the age of 6, through health, nutrition and educational services. The Anganwadi, or Day-Care Centre, is often the site of these programmes.

An RTI query revealed that out of 7.95 crore registered beneficiaries of the Anganwadi scheme, only 55 lakhs were from urban anganwadis (Chandra, 2018). Hence, the coverage of early childhood education is acutely skewed towards the rural landscape. In the communities studied, however, the picture pointed towards the availability of Anganwadis, with more than two-thirds of the children in Bhopal aged below the 6 having enrolled at these centres.

Enrolment of children under 6 years in Anganwadi (number of households)			
Location	Yes	No	Total
Ambujwadi	Data not Available		
Behrampada	Data not Available		
Ehsaan Nagar	17	5	22
	77.27%	22.73%	100%
Gautam Nagar	10	5	15
	66.67%	33.33%	100%
<b>All India (Urban)</b>	<b>34.08%</b>	<b>65.92%</b>	<b>100%</b>

Table 5.5: Enrolment of children under 6 years in Anganwadi's

\*Source: Ministry of Human Resource Development, 2015-16

There were mixed reviews on the nature of the services delivered; many people commented on the nutritional and health benefits, and there was in fact little qualifiable evidence on the nature of education provided at these centres. In Bhopal, the maternal healthcare and support provided through the Anganwadis was appreciated. However, later in the child's growth stages people reported that their children didn't benefit from the flagship programme, the Mid-Day Meal (MDM); and hence the nutritional index scored poorly. In Mumbai, Anganwadis

functioned with varying regularity, ranging between twice and six days a week; some people even reported to have incurred costs while enrolling their children in the Anganwadi, which is otherwise mandated a free service.

**Target 4.4 By 2030, substantially increase the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship**

In order to reap the benefits of this demographic dividend, where 65 per cent of India's population is in the working age (Picarelli, 2017), the government launched the National Skill Mission (NSM) in 2015 to enhance the employability of the youth through

skills development. Under the helm of the NSM, the government and several other institutions provide training programmes to sharpen the job-required knowledge and skills.

Location	Skill training availed by a family member (Number of households)			Agency conducting training (Number of households)					
	Yes	No	No response	Government Institution	Private Institution	NGO Institution	Other	No response	Total
Ambujwadi	499	98	293	367	9	11	86	26	890
	56.07%	11.01%	32.92%	73.55%	1.80%	2.20%	17.23%	5.21%	100.00%
Behrampada	228	561	91	164	9	5	44	6	880
	25.91%	63.75%	10.34%	71.93%	3.95%	2.19%	19.30%	2.63%	100.00%
Ehsaan Nagar	Data Not Available								
Gautam Nagar	Data Not Available								

Table 5.6: Skill training availed by youth and distribution of agency conducting training

In Ambujwadi and Behrampada, the youth, in particular, enrolled in programmes that ranged from Computer training, Mobile Repair, Beauty Treatment, Auto/Car Repair, Driving, Stitching, English Speaking, etc. Most of these programmes were conducted by government institutions, yet the contribution of these

trainings to bridge the gap between education and employment was seen to be low. In both communities, approximately 93 per cent of the people who had attended a skills development training reported to have not gained any employment after the programme.

Employment after completing skill training (Number of households)				
Location	Got employment	Still looking for job	No employment	No response
Ambujwadi	11	6	461	21
	2.20%	1.20%	92.38%	4.21%
Behrampada	3	7	212	6
	1.32%	3.07%	92.98%	2.63%
Ehsaan Nagar	Data Not Available			
Gautam Nagar	Data Not Available			

Table 5.7: Employment status after completing skill training

Hence, perhaps the government has to devise other means to channel these skilled personnel into relevant avenues of employment.

In Madhya Pradesh, people from both communities reported to have received no such benefits. Nadir, a community worker, shared that the reason was not the lack of training organised on the part of the

government, but instead certain barriers to entry. He says, *“Since 2002, the Madhya Pradesh government has marginalised the Pardhi community from three districts – Sehore, Raisen and Bhopal – almost to the extent that it doesn’t consider the community to inhabit these regions. So, because of that they find it impossible to make a caste certificate, and without that they cannot benefit from government schemes.”*

## A POST COVID-19 ANALYSIS

The lockdown that was declared on March 24, 2020 caused many things to come to a standstill. Considering the rapid action that was needed to contain the spread of the virus, schools were asked to stay closed. Education was one of the institutions that fell prey, and a UN study has gone so far as to say that across the globe more than 1 billion children are at risk of falling behind due to school closures (UNICEF, 2020).

In India, a UNICEF report, found that the lockdown impacted 247 million children enrolled in elementary and secondary education, and approximately 28 million children enrolled at Anganwadis (n.a., 2020). Children from socially-excluded communities felt the compounded effect. Schools were encouraged to transition into an online mode of education, so as to prevent children from experiencing the gap in learning. This ignores the glaring digital divide that already exists; NSSO data from 2017-18 reveals that only approximately 42 per cent of urban Indian households have internet access (Kumar, 2020). Akhila, from Gautam Nagar, shared that *“Our children only studied when they went to school. Due to this pandemic, the school has also been closed. We are having problems due to everything being online; those who have a touchscreen mobile are able to see the classes. But what of those of us who don’t? Their education is left incomplete...”*

However, the problems arose not merely for those who were left out of the digital classroom. A few young children who had devices that enabled their access to their education reported of the unpreparedness of the teachers for such a change. Farrukh, a child with disabilities, said, *“We have classes online, but we are learning nothing.”* Ravi, a youth leader who works with children in Ehsaan Nagar, commented on the anxiety and psychological effects on the students, particularly those who were to appear for their secondary and senior-secondary examinations. *“The elder children, in particular the children who are in class X or XII, began worrying for their futures. They have no idea when the schools will open.”*

Bindu shares the plight of the pre-school children in her family. *“The anganwadi, behind the settlement, would provide children with satttu (roasted gram flour) or cooked dalia (porridge), but the meals have stopped during the lockdown.”* Hence, the integrated system of early childhood education and nutritional security was sorely missed and impacted the health of the youth. She goes on to say, *“The children have not studied since the schools have been shut, they are losing out.”*

Hence, among other uncertainties, and emergent effects on their physical health and finances at home, the young are being challenged to embrace this hiatus in their education until further clarity emerges on the way ahead.

## KEY FINDINGS:

1. Among the urban poor, the nutritional schemes offered at the Anganwadi were looked at more favourably and were often the main reason for enrolling children in these centres.
2. In Bhopal, all the children attended government-schools, due to lack of other opportunity as well as monetary barriers; while in Mumbai almost half the children attended public school (48.4 per cent). While there were cases of dropouts in all communities due to monetary reasons, among the Pardhis social exclusion was a key determinant of them opting out of education.
3. Women fared much poorer when it comes to educational completion than men in all groups.
4. Due to the lack of appropriate documents of identification, none of the youth or adults in the Bhopal settlements could avail of skills trainings. In Mumbai, 40.99 per cent of the youth reported to have attended these schemes, yet less than 2 per cent of them admitted that it had benefited them in gaining employment.
5. The call for shutting down schools during the lockdown put an end to formal education for many; after the classes moved online, resource poverty kept them away.

## vi SDG 6: ENSURE AVAILABILITY AND SUSTAINABLE MANAGEMENT OF WATER AND SANITATION FOR ALL

Water scarcity is rapidly affecting many communities of the world; the UN predicts that 40 per cent of the global population is affected, and envisages a rise in these figures along with the increasing temperatures (UNDP). However, the lack of water in physical quantities isn't the only issue, instead water stress arises when there is a lack or excess of 'useable' water to meet human and ecological needs.

The aim of the Millennium Development Goals (MDGs), with respect to water and sanitation, largely focussed on access. It aimed at halving the proportion of people without safe drinking water and basic sanitation, by 2015. In the conception of the SDGs, the scope of intervention in the realm of water and sanitation has been widened and also deepened through Goal 6. While clean water and sanitation are essential targets, there is also thought given to the quality, efficiency in utilisation and management of the global water resources, to ensure sustainability.

Further, this goal finds a deep connection to many other goals, as access to improved water and sanitation could be linked to a woman's sense of dignity and safety; a reduction of water-borne illnesses and an improvement in general health; and also, to food security.

### Target 6.1 By 2030, achieve universal and equitable access to safe and affordable drinking water for all

The Government of India has recognised the need for a holistic approach to water management, and has consolidated its work through the Jal Shakti Ministry. The ministry revealed that 42.49 per cent of the rural households had access through piped water system within their premises, while an urban profile is still being compiled (MOSPI, 2020). Simultaneously, the Jal Jivan Mission (JJM) scheme was launched to provide piped water connections (at 55 litres per head/day) to 14.6 crore rural households by 2024 (Sarkar, 2020).

According to the NSSO (2018), 72 per cent of urban households have access to safe drinking water through piped water connections within their household premises, all round the year. Primary research indicates limited personal piped water connections in the surveyed vulnerable communities of Bhopal and Mumbai. In fact, in three of the communities, the households with personal water connections amount to less than 2 per cent, and only in Behrampada do 25.3 per cent of the households have access to individual piped water.

Type of water connection used (number of households)									
Location	Personal	Shared	Common			Purchased	Other	None	Total
			Borewell	Piped connection	Well				
Ambujwadi	13	101	364	46	25	7	2	332	890
	1.5%	11.3%	40.9%	5.2%	2.8%	0.8%	0.2%	37.3%	100.0%
Behrampada	223	352	0	300	0	1	0	4	880
	25.3%	40.0%	0.0%	34.1%	0.0%	0.1%	0.0%	0.5%	100.0%
Ehsaan Nagar	0	0	42	2	0	7	7	0	58
	0.0%	0.0%	72.41%	3.45%	0.0%	12.07%	12.07%	0.0%	100%
Gautam Nagar	0	0	3	56	0	2	1	0	62
	0.0%	0.0%	4.84%	90.32%	0.0%	3.23%	1.61%	0.0%	100%

Table 6.1: Distribution of type of water connection used

People living in non-notified slums generally have poor access to many basic facilities and services, including water, due to insecurity of tenure. However, in December 2014, the Bombay High Court declared that every citizen within the city government's jurisdiction should have access to water supply, including residents of non-notified slums (Subbaraman & Murthy, 2015). This can be seen as a forward step in the severance of land tenure and provision of basic services. However, the loopholes emerge from the articulation of the law; it was stated that in non-notified slums water doesn't need to

be provided through personal household connections or at the same price as elsewhere in the city. These might indicate why the number of individual piped water connections still remain low in the surveyed communities.

While, infrastructure is a necessary aspect to the availability of services, it cannot be considered the only determinant. Effective water provision, includes the availability of adequate amount of water through the day.

Availability of Water in hours per day (number of households)								
Location	Less than Hour	One Hour	Two hours	Three hours	4 to 8 hours	9 and more hours	Missing	Total
Ambujwadi	155	217	172	188	135	15	8	890
	17.40%	24.40%	19.30%	21.10%	15.20%	1.70%	0.90%	100.00%
Behrampada	7	494	131	146	100	2	0	880
	0.80%	56.10%	14.90%	16.60%	11.40%	0.20%	0.00%	100.00%
Ehsaan Nagar	19	20	1	8	0	10	0	58
	32.76%	34.48%	1.72%	13.79%	0.00%	17.24%	0.00%	100%
Gautam Nagar	5	36	1	0	0	20	0	62
	8.06%	58.06%	1.61%	0.00%	0.00%	32.26%	0.00%	100%

Table 6.2: Availability of water in hours per day

In the socially excluded communities of Bhopal and Mumbai, more than half the people have access to water for a period of less than 2 hours, daily. With water collection timings being limited, people's lives are often woven strictly around the availability. This might affect, and most definitely determine, large parts of their life, especially their livelihood. Often women, in the community, are entrusted with this responsibility, and plan their days around water collection times. *"It comes at any time, and stops anytime. Sometimes when there is no one around to fill water, it spills away, and at other times there is no water for us at all,"* shared Veera from Ambujwadi while highlighting the difficulties stemming from limited and unreliable timings.

Another determinant of water is the cost incurred. Despite it being an essential commodity, some people reported to have extremely high expenditures on water. In Ambujwadi, severe water shortage resulted in many households spending large amounts of money to procure water; 64 per cent of the households spent more than 500 rupees every month to access water which they often have to carry long distances. While the expenses in the other communities is not as high, it still marks a perceptible dent in their monthly expenditure.

Monthly cost of water (number of households)									
Location	No Cost	Up to INR 100/-	More than INR 100/- to INR 200/-	More than INR 200/- to INR 500/-	More than INR 500/- to INR 800/-	More than INR 800/- to INR 1000/-	More than INR 1000/- to INR 2000/-	More than INR 2000/-	Total
Ambujwadi	42	41	76	162	186	184	144	55	890
	4.70%	4.60%	8.50%	18.20%	20.90%	20.70%	16.20%	6.20%	100.00%
Behrampada	610	63	123	46	20	9	7	2	880
	69.30%	7.20%	14.00%	5.20%	2.30%	1.00%	0.80%	0.20%	100.00%
Ehsaan Nagar	40	4	1	2	3	0	1	7	58
	68.97%	6.90%	1.72%	3.45%	5.17%	0.00%	1.72%	12.07%	100%
Gautam Nagar	59	2	0	0	0	0	1	0	62
	95.16%	3.23%	0.00%	0.00%	0.00%	0.00%	1.61%	0.00%	100%

Table 6.3: Monthly household expenditure on water

With 28 per cent of urban households lacking access to potable water (Kapil, 2019), of which a majority reside in slums, the government has before itself a herculean task if it is to achieve the targets set out by SDG 6 before 2030.

**Target 6.2 By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations**

Improved sanitation is inextricably linked to better health indicators. The WHO estimates that 4.32

million deaths across the world are caused by poor sanitation, of which 60 per cent represent diarrhoeal deaths. While the main idea behind building toilets is linked to health benefits, there are other reasons too. From a macro-economic perspective, the Ministry of Health and Welfare declared that more than 12 billion rupees is spent annually on illnesses resulting from poor sanitation, and the World Bank estimated that poor sanitation impacted the Gross Domestic Product (GDP) by 7 per cent (PWC, 2015).

While better sanitation might benefit the economy, the benefits for the individual are manifold: having access to a private toilet might mark an increase

in social status, in some cultures, but this sense of increased privacy has marked benefits on the sense of security experienced, particularly by girls and women. For the latter, it has also helped in improving school attendance and performance. Through an essentially economic lens, improved sanitation and subsequently health will decrease the household expenditure of medicare and increase the livelihood capacities of the individuals. Hence, access to improved sanitation is intricately linked to eliminating poverty and ensuring a dignified life for individuals.

The Indian Government has recognised the multiple advantages of universal sanitation coverage, and so on 2 October 2019, the Prime Minister launched the Swachh Bharat Mission (SBM). The first phase of the mission focussed on working towards making India

Open Defecation Free (ODF); with the government claiming to have achieved this in late 2019, it has now entered Phase II which will reinforce ODF behaviour and focus on providing safe management of solid and liquid waste. According to the WHO, the mission was successful in preventing at least 300,000 deaths from diarrhoea and protein-energy malnutrition between 2014 and 2019 (Sharma, 2019).

However, the primary data revealed that most of the households located in slums did not have access to toilet facilities within their premises and were instead using public facilities, while some still preferred to defecate in the open. In Ambujwadi and Behrampada the number of people using public toilets was sizeable, and in Gautam Nagar, 79.03 per cent of the population uses public toilets.

Monthly cost of water (number of households)							
Location	Personal toilet	Shared toilet	Community toilet	Public toilet	Open defecation	Other	Total
Ambujwadi	198	1	303	382	6	0	890
	22.20%	0.10%	34.00%	42.90%	0.70%	0.00%	100.00%
Behrampada	372	20	107	381	0	0	880
	42.30%	2.30%	12.20%	43.30%	0.00%	0.00%	100.00%
Ehsaan Nagar	37	1	0	12	7	1	58
	63.79%	1.72%	0.00%	20.69%	12.07%	1.72%	100%
Gautam Nagar	0	2	4	49	6	1	62
	0.00%	3.23%	6.45%	79.03%	9.68%	1.61%	100%

Table 6.4: Distribution of the type of toilet used

Ehsaan Nagar stands out, in contrast, with 63.79 per cent of the people using personal toilets. A community worker in Ehsaan Nagar shared that the Municipal Corporation had built toilets for all the houses under the SBM. He shared that of the toilets constructed the ones which were usable were where people bore a part of the expenses, contributing anywhere between INR 1000 and 5000. Yet some people found these unusable, so they continued to use other facilities: *"Some of the toilets that were built under the Prime Minister's scheme were not made to be so effective.*

*It was almost as if they were built as a proof of completion, with little heed paid to the quality: the drainage is extremely poor, many parts are missing, and the space is also less. Especially in the case of large families, they find one toilet to be inadequate for their needs,"* said Nadir. This corroborates the condition of the toilets, where the people of Ehsaan Nagar report that 81.03 per cent of the toilets have no water connection, and 96.55 per cent have no proper sewage drains.

Monthly cost of water (number of households)								
Location	Water connection		Sewage connection		Cleaning of toilets			Total
	Yes	No	Yes	No	Yes	Some-times	No	
Ambujwadi	670	220	376	514	703	138	49	890
	75.30%	24.70%	42.20%	57.80%	79.00%	15.50%	5.50%	100.00%
Behrampada	655	225	518	362	586	199	95	880
	74.40%	25.60%	58.90%	41.10%	66.60%	22.60%	10.80%	100.00%
Ehsaan Nagar	11	47	2	56	7	37	14	58
	18.97%	81.03%	3.45%	96.55%	12.07%	63.79%	24.14%	100%
Gautam Nagar	51	11	52	10	36	11	15	62
	82.26%	17.74%	83.87%	16.13%	58.06%	17.74%	24.19%	100%

Table 6.5: Condition of toilets based on quantitative indicators - availability of water connection, sewage connection and frequency of cleaning

The people from the remaining communities, reported some problems in the state of the toilets; with people from Ambujwadi and Behrampada reporting problems with the sewage connections.

Nagar, 89.66 per cent of the households incurred no costs as they had toilets within their households. In Behrampada, too, a sizable amount of the population, 54.2 per cent, reported to have no costs towards toilet usage.

The final determinant of usability considered was the costs incurred while using the toilets. In Ehsaan

Cost of using toilet (Number of households)							
Location	No Cost	Up to INR 50/-	More than INR 50/- to INR 100/-	More than INR 100/- to INR 200/-	More than INR 200/- to INR 500/-	More than INR 500/-	Total
Ambujwadi	251	76	166	85	212	100	890
	28.20%	8.50%	18.70%	9.60%	23.80%	11.20%	100.00%
Behrampada	477	68	25	214	73	23	880
	54.20%	7.70%	2.80%	24.30%	8.30%	2.60%	100.00%
Ehsaan Nagar	52	2	0	0	1	3	58
	89.66%	3.45%	0.00%	0.00%	1.72%	5.17%	100.00%
Gautam Nagar	22	20	7	8	4	1	62
	35.48%	32.26%	11.29%	12.90%	6.45%	1.61%	100.00%

Table 6.6: Monthly household expenditure for using toilets

In the other two communities people reported greater expenditure on accessing the basic toilet utilities. In Ambujwadi, 71.8 per cent of the people, and in Gautam Nagar 64.52 per cent of the population incurred expenditures towards toilet facilities.

## A POST COVID-19 ANALYSIS

Public spaces emerged as hotspots for community transmission of the virus, and so it was necessary for people to follow the norms of social distancing, hand-washing, etc. Yet for many, who did not have individual toilets at home and were forced to use public toilets, the precautions were more necessary. Rashid, a toilet operator and resident of Ambujwadi, reported, "It is very risky. The BMC has only sanitized the toilets from the outside with medicine, inside they are only being cleaned with water. People in public community toilets are not wearing masks." Another resident of the same slum talked of crowding in the public toilet; he said, "There are many corona patients in our area so it is a risk. We are afraid to use the public bathroom, and so we try to go only after 9 am, when the rush reduces."

While some facilities remained open, many said that with the lockdown the public toilets were shut as there was no one to operate them. Iqbal, from Behrampada, said, "During the lockdown the toilet facility was often closed. People found it difficult to control their urges and many began to go out, in the open." Hence, the cases of open defecation clearly increased in this period. Despite many having toilets in their houses, in Ehsaan Nagar, Ravi shared similar trends when he reported, "With everyone locked up at home, the pits in the toilets filled up quickly. During the lockdown, it was sad to see women and old people being compelled to go outdoors for their job as they have to face many uncomfortable situations. They feared that the policemen should not come at those times, because they don't allow people to go out during the lockdown. But what will people do if the pits are full? Should they empty them on their own?"

Not having access to clean and safe toilets is also critical when examining it from the viewpoint of the women. With toilet facilities in such few households, many women have to venture out into poorly-maintained public facilities while others prefer going out in the open in the early morning hours, hence further threatening their safety and sense of dignity.

### KEY FINDINGS:

1. While the SDG 6 aims at piped water connection within the household premises, on an average 76.03 per cent of households among the surveyed settlements claimed to use shared or common facilities outside their houses. Here, too, the availability of water was irregular, with 80.27 per cent of the households reporting to have water for less than three hours a day. Ambujwadi residents also reported to make considerable expenses on water, every month.
2. Despite the national mission to equip each household with a toilet, only one informal settlement has benefited from the SBM. The remaining continue to use public facilities which are poorly maintained and increase their household expenditures.
3. During the lockdown, very few communities reported to have shortage of water, yet among the residents of Ambujwadi the cost of water/litre increased. Greater difficulties were experienced while accessing toilets, which were sometimes locked, rarely cleaned, and where people reported few COVID-19 specific precautions being taken. Amidst these circumstances, some people returned to their practice of defecating in the open, hence creating a dent in India's image of becoming ODF.

The cost of using these facilities was also seen to be a greater burden at a time when most had lost any source of livelihood.

With respect to the availability of water, there were community spaces that continued to get water through their common wells and piped facilities, particularly in Bhopal. However, for some the frequency of water reduced, and people who purchased water were being charged more during this period. Ritika, a young girl from Ambujwadi shared, "Our water needs are not met here. We were paying INR 2 for a container of water, earlier, but after the

*lockdown we were asked to pay INR 3." A transgender resident of the same community felt the water bills to be an increasing burden in the absence of any earning, "We pay INR 25 for a can of water, and use bore well water for other uses. Every month I have an INR 350 expense for water. This month I am using it on loan, I don't have the money to pay my bills."*

Considering members from these communities are severely impoverished it is worrisome that they spend a substantial portion of their meagre incomes on poor water and sanitation facilities.

## vii SDG 7: ENSURE ACCESS TO AFFORDABLE, RELIABLE, SUSTAINABLE AND MODERN ENERGY FOR ALL

Energy has historically been closely associated with the development of societies. Post-industrialisation, it has played a pivotal role in the development of modern economies, and with the mechanisation of industries increasing many nations have seen the need to consciously expand the sources and scope of energy production to meet future demands. With the rapid growth of this sector, it is important to look

at sustainability – both economic and ecological – in addition to inclusivity. In this light, the seventh SDG is a global call for accelerated electrification and a universal transition to clean forms of energy, for individuals and industry.

**7.1 By 2030, ensure universal access to affordable, reliable and modern energy services**

### ELECTRICITY

There has been a global intensification in the drive to provide universal clean energy. With renewables still gaining momentum as a credible alternative, it might only be possible to look at the degree of electrification at this stage. The access to electricity, without specification of the source, shows that there has been an improvement, with approximately 90 per cent of the global population having access in 2018, as opposed to 83 per cent in 2010. However, the complete achievement of this target stands on the shoulders of governments as 789 million people remain without any access to electrification for lighting or heating (IEA, 2020).

The Energy Progress Report (2020) points out that while urban areas are advancing slowly towards the achievement of the target, with 97 per cent of urban areas electrified in 2018, the pace of growth is inadequate and is falling behind the expansion of urban populations (IEA, 2020). Often the poorer regions in the city and in the peri-urban regions are overcast in darkness, while 24-hour electrification is guaranteed to the more industrialised areas and city centres. According to the World Bank, 64 million Indians continue to have no access to electricity (UN, 2020).

In keeping with the Goal 7, the Central Government had launched the Pradhan Mantri Sahaj Bijli Har Ghar Yojana (SAUBHAGYA) in September 2017 to ensure universal household electrification by providing last mile connectivity. It also guarantees the provision of free electricity to households identified as being Below Poverty Line (BPL). Tracking of this programme reveals that Maharashtra and Madhya Pradesh have achieved 100 per cent electrification.

Primary data on the degree of electrification doesn't always reflect this picture. In line with national aggregate, in Maharashtra, the number of people with no access to electricity remains less than 1 per cent; yet in Madhya Pradesh the degree of electrification in the sampled communities is nowhere near the state projections. In Ehsaan Nagar, 12.07 per cent of the households have no access to electricity, which could be attributed to its location on the periphery of the city, yet Gautam Nagar which is located in the heart of the city faces a graver predicament, where 16.13 per cent of the households reported no access to electricity.

In addition to access of electricity, there are several other factors that determine the benefits for individuals. The reliability of energy can be

categorised as the number of interruptions and the duration of interruptions.

Availability of Electricity (number of households)			
Location	Full Time	None	Partial
Ambujwadi	880	6	4
	98.90%	0.70%	0.40%
Behrampada	875	1	4
	99.40%	0.10%	0.50%
Ehsaan Nagar	8	7	43
	13.79%	12.07%	74.14%
Gautam Nagar	43	10	9
	69.35%	16.13%	14.52%
<b>All India*</b>	<b>99.77%</b>	<b>0.23%</b>	<b>0%</b>

Table 7.1: Availability of electricity

\*Source: Ministry of Power, 2019-20

In this study, Ehsaan Nagar stood out with 74.14 per cent of the households testifying to the insufficient hours of electricity in the settlement. In Gautam Nagar, the situation was not as grave with 14.52 per cent of the population reporting partial access to electricity.

In Mumbai, both the settlements reap the advantages of being located in the financial capital and facing minimal electricity cuts; 1.1 per cent of Ambujwadi's and 0.6 per cent of Behrampada's interviewees spoke of any electrical woes.

Affordability is another determinant of the enabling nature of electrification.

Monthly Electricity Expenses (number of households)							
Location	None	Up to INR 500/-	More than INR 500/- up to INR 1000/-	More than INR 1000/- up to INR 1500/-	More than INR 1500/- up to INR 2000/-	More than INR 2000/-	Total
Ambujwadi	27	262	520	51	16	14	890
	3.03%	29.44%	58.43%	5.73%	1.80%	1.57%	100.00%
Behrampada	36	35	393	305	58	53	880
	4.09%	3.98%	44.66%	34.66%	6.59%	6.02%	100.00%
Ehsaan Nagar	Data Not Available						
Gautam Nagar	Data Not Available						

Table 7.2: Monthly expenditure on electricity

An examination of the figures from Maharashtra shows a majority of the resident in both informal settlements incurring high expenses for electricity. With most people in both settlements spending between INR 500 and 1000 (58.43 per cent of Ambujwadi and 44.66 per cent of Behrampada), residents of Behrampada seem to have an excessive out-of-pocket expenditure, with 47.09 per cent of the population spending more than INR 1000.

Electrification goes beyond simply providing light and heat, as is often assumed. A well-lit settlement is safer for women, enables children to study into the evening, allows for various forms of home-based employment; these being some of the supplementary targets that could be influenced by increased electrification.

## FUEL

The access to clean fuels for cooking determines ecological indicators, as also the general health of the household. Clean fuels are defined according to their effect on indoor air quality, to include electric, Liquefied Petroleum Gas (LPG), natural gas, biogas, solar, and alcohol-fuel stoves. According to WHO estimates, 2.8 billion people continue to depend on polluting fuels (charcoal, coal, crop-waste, dung, kerosene, and wood) for their cooking needs (IEA, 2020).

cooking fuels for the poor, thereby promising to distribute 50 million LPG cylinders to women from BPL households. The inclusion of women as the primary recipients of this social welfare scheme recognised them as the primary stakeholders, for the effects of poor cooking fuels affect them severely. The recent figures released by the Ministry of Petroleum and Natural Gas claim that 98.1 per cent of households now use clean cooking fuels (MOSPI, 2020).

The commitment of the Indian Government to address the prevalence of polluting fuels in the kitchen was evident with the launch of the Pradhan Mantri Ujjwala Yojana (PMUY), launched in 2016. The articulation of the scheme recognised the need for improved

Primary research showed that the communities in Maharashtra were nearabout the national average, with residents of Behrampada having more access (99.2 per cent). Yet the situation in Madhya Pradesh was starkly different.

Cooking fuel used (number of households)						
Location	Coal	Firewood	Kerosene	LPG Cylinder	Other	Total
Ambujwadi	2	8	22	857	1	890
	0.20%	0.90%	2.50%	96.30%	0.10%	100.00%
Behrampada	0	0	6	873	1	880
	0.00%	0.00%	0.70%	99.20%	0.10%	100.00%
Ehsaan Nagar	0	37	0	18	3	58
	0.00%	63.79%	0.00%	31.03%	5.17%	100%
Gautam Nagar	0	39	0	19	4	62
	0.00%	62.90%	0.00%	30.65%	6.45%	100%
<b>All India*</b>	<b>Clean Cooking Fuel: 98.1%</b>					

Table 7.3: Distribution of the type of cooking fuel used in households

\*Source: Ministry of Petroleum and Natural Gas, 2019-20

In both Ehsaan Nagar and Gautam Nagar, almost two-thirds of the population relied on firewood as their primary cooking fuel, with only 31.03 per cent and 30.65 per cent of the community members in the respective communities saying that they had access to LPG gas. While poverty is definitely a determining factor, the real issue is the lack of documents that act as proofs of eligibility. Pramod, a community worker in Gautam Nagar, points out that “most of them don’t have their basic documents and so accessing any public scheme or facility is difficult.” In order to avail

the PMUY, the families need documentary evidence of their Aadhaar Card, Jan Dhan Account/Bank Account, and proof of their BPL status (ration card/certification from panchayat/municipality). Since many families in these communities do not have this documentation, they cannot avail of the scheme, and continue to use firewood to cook.

Regardless of the nature of their cooking fuel, each surveyed family incurs an expense to run their kitchens.

Cost of cooking fuel (number of households)						
Location	Up to INR 500/-	More than INR 500/- to less than INR 700/-	More than INR 700/- up to INR 800/-	More than INR 800/-	No response	Total
Ambujwadi	66	268	503	53	0	890
	7.40%	30.10%	56.50%	6.00%	0%	100.00%
Behrampada	12	242	612	14	0	880
	1.40%	27.50%	69.50%	1.60%	0%	100.00%
Ehsaan Nagar	32	3	14	9	0	58
	55%	5%	24%	16%	0%	100%
Gautam Nagar	34	2	8	16	2	62
	55%	3%	13%	26%	3%	97%

Table 7.4: Monthly household expenditure on cooking fuel

In Ehsaan Nagar and Gautam Nagar, people don’t report great expenses as they gather twigs from around the community or surroundings to light their cooking fires. However, in the two communities in Mumbai, where people use LPG the expenses are much higher, with most families (86.6 per cent in Ambujwadi and 97 per cent in Behrampada) reporting to spend between INR 500 and 800 a month on purchasing cooking fuel.

Urbanity is not uniform, and the type of urban agglomeration that one inhabits determines the access to certain resources. Hence, the residents of slums in Mumbai, considered the financial capital of India, fared significantly better on the indicators of SDG 7, than those in Bhopal.

## A POST COVID-19 ANALYSIS

While there were very few reports of a change in the circumstances during the COVID-19 induced lockdown, Satya, a resident of Ehsaan Nagar, pointed out that since the access to all services was affected, similar effects was seen in his community when it came to access to cooking fuel. “We haven’t got a cylinder, but even those who had a cylinder from the scheme ran out of gas during the lockdown.”

There wasn’t any admission or complaint on increased electrical trouble during this period.

### KEY FINDINGS:

1. Vast majorities of India have not transitioned to renewable sources of energy for lighting as the government’s steps remain limited. Yet the force to ensure electrification unto the last household has picked up speed. While cities often experience greater electrification, the kind of urban area greatly determined the kind of supply. In Bhopal, 14.10 per cent of the people living in the slums had no electricity while the same figure in slums of Metropolitan Mumbai was 0.4 per cent.
2. With respect to cooking fuel, similar trends are noted depending on the type of urban agglomeration. In Mumbai, 97.75 of the households in the surveyed settlements reported to use the cleaner LPG connections, while in Bhopal only 30.84 per cent of the households reported to have access to the fuel as the others didn’t possess the necessary identification documents and so preferred to collect firewood from their surroundings to light their stoves.

## viii SDG 8: PROMOTE SUSTAINED, INCLUSIVE AND SUSTAINABLE ECONOMIC GROWTH, FULL AND PRODUCTIVE EMPLOYMENT AND DECENT WORK FOR ALL

Economic growth is often looked at as a precursor and determinant of greater development for all, with the assumption that the wealth of the nation will trickle down to every citizen. However, the fact is that despite better growth rates in several developed and developing countries, over the years greater inequalities manifested in those societies. Hence, the eighth SDG broadens the vision of economic growth, by coupling it with “full and productive employment and decent work for all.”

SDG 8 imagines work as not simply a source of income, but a promoter of social wellbeing. Hence, decent work can encompass a range of social justice indicators including security of employment; safe and decent work environment and hours; adequate wages; social protection; labour rights and the right to collectivise to improve working conditions.

**8.3 Promote development-oriented policies that support productive activities, decent job creation, entrepreneurship, creativity and innovation, and encourage the formalisation and growth of micro-, small- and medium-sized enterprises, including through access to financial services**

Informality in employment is not just a trend but the norm; globally 61 per cent of the workforce is employed in the informal economy. In India, this plight is more critical at 81 per cent, i.e., more than twice the number of people employed in the informal economy. Linking informality with poverty, a recent report by the International Labour Organisation (ILO) states that while poverty is not contingent on informal employment, an analysis of economic trends across the globe revealed that ‘the poor face higher rates of informal employment and that poverty rates are higher among workers in informal employment.’ (Bonnet et. al, 2019).

Among the communities that participated in the survey, informal employment was prevalent. The findings present only the primary source of employment, even though many participants reported to engage in several different occupations as they weren’t guaranteed regularity in one type of employment.

Education level of Adults of 18 years or above age (number of individuals)															
Location	Unemployed	Students	Home Maker	Daily wage Labour	Contractual Labour	Industrial Worker	Home Based Work	Domestic Worker	Sanitation Worker	Hawker/ Street-Vendor	Driver	Self-Employed	Other	Missing	Total
Men in Ambujwadi	60	113	24	402	32	77	16	12	7	20	108	66	57	15	1009
	5.95%	11.20%	2.38%	39.84%	3.17%	7.63%	1.59%	1.19%	0.69%	1.98%	10.70%	6.54%	5.65%	1.49%	100%
Women in Ambujwadi	92	60	612	23	3	5	15	31	0	3	2	12	21	10	889
	10.35%	6.75%	68.84%	2.59%	0.34%	0.56%	1.69%	3.49%	0.00%	0.34%	0.22%	1.35%	2.36%	1.12%	100%
Men in Behrampada	67	63	17	307	28	104	85	16	7	70	74	140	96	15	1089
	6.15%	5.79%	1.56%	28.19%	2.57%	9.55%	7.81%	1.47%	0.64%	6.43%	6.80%	12.86%	8.82%	1.38%	100%
Women in Behrampada	55	68	851	8	0	5	16	26	2	2	1	9	13	10	1066
	5.16%	6.38%	79.83%	0.75%	0.00%	0.47%	1.50%	2.44%	0.19%	0.19%	0.09%	0.84%	1.22%	0.94%	100%
Men in Ehsaan Nagar	6	1	0	28	7	6	4	0	1	15	4	3	7	0	82
	7.32%	1.22%	0.00%	34.15%	8.54%	7.32%	4.88%	0.00%	1.22%	18.29%	4.88%	3.66%	8.54%	0.00%	100%
Women in Ehsaan Nagar	0	2	14	30	1	2	7	1	1	16	0	3	4	0	81
	0.00%	2.47%	17.28%	37.04%	1.23%	2.47%	8.64%	1.23%	1.23%	19.75%	0.00%	3.70%	4.94%	0.00%	100%
Men in Gautam Nagar	3	3	0	20	23	5	1	0	8	1	4	0	4	0	72
	4.17%	4.17%	0.00%	27.78%	31.94%	6.94%	1.39%	0.00%	11.11%	1.39%	5.56%	0.00%	5.56%	0.00%	100%
Women in Gautam Nagar	0	9	20	28	9	0	1	2	2	0	0	1	2	1	74
	0.00%	12.16%	27.03%	36.49%	12.16%	0.00%	1.35%	2.70%	2.70%	0.00%	0.00%	1.35%	2.70%	1.35%	100%

Table 8.1: Distribution of livelihoods of respondents of age 18 years and above

With conditions of poverty being severely acute, many students reported to complementing their education with various forms of part-time work to bring back some money into the household. Among the remaining adult population, the figures indicate that large proportions of the population are employed in daily wage labour, where they earn an income for a day’s work without the certainty of employment the next day. The communities in Mumbai, Ambujwadi and Behrampada, showed a higher male representation in daily wage work with 39.84 per cent of the former and 28.19 per cent of the latter employed in this form of work. The female representation did not correspond in the same proportion, as most claimed to be home-makers.

In Madhya Pradesh, the image was skewed in the opposite direction. 37.04 per cent of women in Ehsaan Nagar, as opposed to 34.15 per cent of the men, and 36.49 per cent of the women in Gautam Nagar, as

opposed to 27.78 per cent of the men, earned daily wages. Most of the people in these communities are waste pickers, who sift through the city’s waste and supply raw materials to recyclers in return for negligible payment, with the number of women employed in the trade exceeding the men. The daily earning from this employment could range between INR 150 and 200 on a good day shared Pramod, a community worker.

In Bhopal, the process of waste collection was recently taken over by the state, in 2013, under the larger mission of cleaning up the city, and they employed some of these waste pickers on a contractual basis. Hence, in Gautam Nagar, the Municipal Corporation contractually employs 31.94 per cent of the male and 12.16 per cent of the female waste pickers. While this increases the income security mildly, they continue to work without any safety gear or social services. Moreover, others

who were previously active waste pickers have reported a loss of income generation because of the formalisation of door-to-door collection, forcing some of them to resort to begging as a source of income.

8.5 By 2030, achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value

The national unemployment rate as captured in the Periodic Labour Force Survey (PLFS) 2018-19 was 5.8 per cent, however in February 2020 the Centre for Monitoring Indian Economy (CMIE) reported the figure to have climbed to 7.78 per cent (n.a., 2020). The lockdown led to an economic upheaval, and the rate of unemployment climbed sharply. But since the quantitative data was gathered prior to February 2020, it is necessary to look at the unemployment rate in this period.

In Mumbai, the number of persons claiming unemployment was approximately 8.01 per cent in Ambujwadi, and 5.7 per cent in Behrampada. In Bhopal, Ehsaan Nagar saw 3.68 per cent of the

people experiencing unemployment, while Gautam Nagar witnessed a smaller proportion at 2.05 per cent. Interestingly, while larger number of women in the informal settlements in Mumbai reported to not having access to employment, in Bhopal no women claimed such a condition. This is because, living in the depths of poverty, from a very young age young girls get absorbed into the trade of waste picking and segregation alongside their mothers. Hence, unemployment is almost non-existent among women, even though the quality of employment is dismal.

While the data of income levels is not available for Madhya Pradesh, in Maharashtra the average monthly income reported by the men in Ambujwadi was INR 9,680 and INR 11,008 in Behrampada. While men and women are rarely employed in the same kinds of work in these communities, the disparity between the wages earned was evident. In Ambujwadi, the average monthly income for the working women was INR 6,937, and INR 6,036 in Behrampada, after adjusting outliers. While this is not immediately comparable, due to the different kinds of jobs and levels of employment; it is interesting to note the glaring gap nonetheless.

*a loss for money and food. Because of this I snuck out on occasion (ten times in all), to be able to feed my family. But even the kabaad (Scrap) shops had started paying us less for our collections. They were equally hit, so how could they think of us." Hence, the sudden clamp on the economy and thereby on consumption affected every layer of the economy, but it meant that the least powerful in the economy faced the greatest threats.*

Without options, some were forced to take loans from money-lenders at inflated interest rates. Abdul, a contractual worker from Bhopal, reported, *"People from the community would take loans from local moneylenders. For every INR 100 we borrow, the interest rate was 10 per cent. In the neighbouring colony they doubled the interest rate, and a social worker had to intervene on our behalf."* Months after the lockdown was lifted, people still find it difficult to repay the loan as their work has failed to pick up; but in the words of Anagh, *"Daily we hear the abuses from the moneylenders, but those are easier to digest when our stomachs are full. We will repay when we work again."*

## KEY FINDINGS:

1. With most of the households in this survey sharing their work in the informal economy, the threats which were experienced on a regular basis were accentuated with the lockdown. The loss of wages affected several essential aspects of their life including their nutritional security, security of habitat, educational support, etc.
2. The most common form of employment was seen to be daily wage earner. Gender wise analysis showed a higher percentage of men in the Mumbai settlements employed in daily wage work, whereas in Madhya Pradesh more women than men were employed in the same.

## A POST COVID-19 ANALYSIS

The outbreak of the pandemic in India, followed by the sudden call for a nation-wide lockdown brought the economy to a poorly-planned halt. The effect was felt most severely among the impoverished residents of cities who were caught between the devil and the deep blue sea. An absolute halt on their source of income, forced some to find any means to return to their villages, while many others found themselves stranded in the city with no means of escaping, or worse still nowhere to go.

The vast availability of labour influences the competitiveness to gain employment and has direct consequences on the regularity of employment as also adverse impacts on the wage earned. In the informal market, the security of employment is minimal; many labourers are engaged on a daily basis. With a large number of respondents employed

as daily-wage earners the amount of savings was minimal. Akhila, a waste-picker from Gautam Nagar, shared, *"We were already in a troubled state before the lockdown, and couldn't imagine that the situation could worsen. There was no chance of work, we were not allowed to go out to gather the waste. If we tried, the policemen sent us back. We lost whatever meagre source of income we had, and saw difficult times with regard to food."*

With a lack of earning, the access to basic needs, like food, and essential services, like hospitals, was made more difficult. And people often found themselves in such dire straits that they had to break the rules and venture out to find some way to fill their stomachs. Bindu, an informal worker from Ehsaan Nagar, voiced her condition, *"We are daily wage labourers, if we were denied even one day of work, we were left at*

## ix SDG 11: MAKE CITIES AND HUMAN SETTLEMENTS INCLUSIVE, SAFE, RESILIENT AND SUSTAINABLE

From the dawn of industrialisation, the world has been increasingly urbanised. Often prompted by economic deprivation, or changes in the social or environmental context, people are increasingly being compelled to move to cities.

The UNDESA estimates that 65 per cent of the world's population will live in cities by 2050, and the largest increase in the urban population will be in three countries: India, China and Nigeria (UNDESA, 2018). In India, the urban population was 420 million in 2015, and global predictions expect this to almost double to 800 million by 2050, with one in every two Indians living in cities (Tewari et. al). In the country, this has resulted in what is conceived as a "messy and hidden process", where human beings are forced to live in informal settlements without access to basic services, as also where they are invisibilised in the imagination of the city, but also urban statistics (Ellis & Roberts, 2016).

In the two cities surveyed, Mumbai has a population of 16 million, while Bhopal has a population of approximately 1.8 million (Census 2011). While both these cities are growing, albeit at a decreased rate, the social inequalities that its residents experience have an indelible impact on their access the city. Hence, even though many migrants enter the cities to escape inequalities that they experience in the rural environment, the inequalities sometimes prevail and at other times are reconfigured in the cities.

The Eleventh SDG has reimagined cities as a departure from the current reality; by stressing on 'inclusion, safety, resilience and sustainability' it aims

to redirect the development paradigms to embrace the path of social and environmental justice.

**11.1 By 2030, ensure access for all to adequate, safe and affordable housing and basic services and upgrade slums**

Housing and Habitation are the cornerstones of urban development. The right to shelter is guaranteed to every citizen and is enshrined in the Constitution of India under Article 21 (Right to Life and Personal Liberty). To facilitate this right into people's daily lives, the government has enacted several schemes to ensure that people have access to safe and affordable housing. The Pradhan Mantri Awas Yojana (PMAY) was launched in June 2015 as a pro-poor housing scheme, with the aim of providing 'housing for all' by 2022. The urban scheme proposes to construct 20 million houses in 500 cities, and has four components: (1) in-situ slum redevelopment (central assistance of Rs 100,000 per unit); (2) credit-linked interest subsidy (central assistance of Rs 100,000–230,000 per beneficiary); (3) affordable housing in partnership (central assistance of Rs 150,000 per unit); and, (4) beneficiary-led individual house construction or enhancement (central assistance of Rs 150,000 per unit).

Despite the law of the land and schemes constantly demanding a more dignified living space for all, many continue to inhabit inadequate living spaces. A recent report by Housing and Land Rights Network (HLRN) found about 4 million people living in homelessness and about 75 million people living in informal settlements in cities (HLRN, 2020). According

to the Census of 2011, 28.35 per cent of Madhya Pradesh's urban population live in slums, while in Maharashtra the corresponding figure was 23.32 per cent. The census definition of a slum terms it as 'unfit for human habitation'<sup>4</sup>, while UN Habitat has identified 7 key conditions which determine adequate housing: (i) Security of Tenure; (ii) Availability of Services, Materials, Facilities and Infrastructure; (iii)

Affordability; (iv) Habitability; (v) Accessibility; (vi) Locations; and (vii) Cultural Adequacy. (UNOHCHR, 2009)

This study has included several parameters to investigate the level of adequacy, safety and affordability of urban housing among the severely excluded communities.

## SECURITY OF TENURE

House owned by residents (number of households)				
Location	Yes	No	Other	Total
Ambujwadi	735	155	0	890
	82.58%	17.42%	0.00%	100.00%
Behrampada	336	542	2	880
	38.18%	61.59%	0.23%	100.00%
Ehsaan Nagar	54	3	1	58
	93.10%	5.17%	1.72%	100%
Gautam Nagar	52	5	5	62
	83.87%	8.06%	8.06%	100%

Table 9.1: Status of ownership of the house of the respondents

While most of the residents in Ambujwadi, Ehsaan Nagar and Gautam Nagar reported to own their house, therefore not being bound to pay a monthly rent, approximately three-fifths of Behrampada's residents reside in rental accommodation, which might be one of the factors determining the security they experience related to housing.

There are several other features that might threaten their experienced security and pose the threat of eviction. Ambujwadi, faced a severe demolition in late 2004, with many people left without shelter, and at a

loss of several belongings and documents. In Gautam Nagar, for instance, the last eviction was in 2019, and with the associated risks remaining the slum dwellers live in perpetual fear as they face abuse at the hands of government workers who sometimes hint at its possibility. Abdul, a resident of the slum, shared, "We get repeated threats from Municipal workers that our area will be cleared, and we will be displaced. They say that we don't keep the place clean, and so we should be moved; they scare us with these threats. But there hasn't been any formal effort to actually move us."

<sup>4</sup> The parameters of unfitness are defined for the purpose of Census due to dilapidation, overcrowding, faulty arrangements and design of such buildings, narrowness or faulty arrangement of street, lack of ventilation, light, or sanitation facilities or any combination of these factors which are detrimental to the safety and health.

## HABITABILITY

For housing to be considered habitable, there must be robust infrastructure and adequate space to provide the residents physical safety in all weather conditions.

While all the residents of the surveyed communities lived in non-notified slums, the kind of house construction varied across the surveyed population.

Type of house (number of households)				
Location	Kutcha	Semi-Pucca	Pucca	Total
Ambujwadi	283	209	398	890
	31.80%	23.48%	44.72%	100%
Behrampada	11	458	411	880
	1.25%	52.05%	46.70%	100%
Ehsaan Nagar	Data Not Available			
Gautam Nagar	Data Not Available			
<b>All India (Urban)*</b>	-	-	<b>96%</b>	-

Table 9.2: Distribution of the type of house

\*Source: NSS 76th round, 2018

The primary data from the informal settlements categorised a housing structure as kutcha if it lacked permanent walls and a roof; a semi-pucca house had permanent walls but a thatched/wooden/mud/grass roof and pucca houses were constructed with all walls and roof made of permanent materials such as brick, cement, iron rods and steel. The government reports that 96% of urban households are pucca, yet among the surveyed communities Behrampada has the most households living in pucca houses at 46.7 per cent, with the number of people living in semi-pucca houses being higher, 52.05 per cent. In Ambujwadi 44.72 per cent of the houses were pucca, while the number of people living in semi-pucca or kutcha houses was cumulatively higher.

While household data was not collected in Bhopal, a community worker shared about the type of accommodation. *"In Gautam Nagar, all the residents live in kutcha houses, made using plastic and corrugated iron sheets. They layer the ground with plastic carpets, and drape a plastic sheet as a roof, upheld by a bamboo structure. Contrastingly, in Ehsaan Nagar, the brick houses are built in four rows that run through the settlement; however, none of the houses are plastered and resemble box-like semi-pucca structures."*

Another determinant of the habitability of a housing structure is durability. Considering the tropical location of both communities, the monsoon rains are one seasonal variable that might affect the living conditions.

House owned by residents (number of households)							
Location	No Problem	Flooding/ seepage/ leakage in the house	Streets Flooded	Drainage Clogged	Access to Road Blocked	Other	Total
Ambujwadi	59	650	654	660	506	12	890
	6.63%	73.03%	73.48%	74.16%	56.85%	1.35%	100%
Behrampada	27	599	806	792	779	7	880
	3.07%	68.07%	91.59%	90.00%	88.52%	0.80%	100%
Ehsaan Nagar	0	58	57	36	51	0	58
	0.00%	100.00%	98.28%	62.07%	87.93%	0.00%	100%
Gautam Nagar	2	60	59	58	53	4	62
	3.23%	96.77%	95.16%	93.55%	85.48%	6.45%	100%

Table 9.3: Problems faced during heavy rains/monsoons

At the peak of the rainy season, less than 10 per cent of the residents in all the surveyed communities reported no problems. Instead, the lack of permanent structures and poor quality of housing infrastructure was a cause for seepage in more than two-thirds of all the houses, across the four settlements, and in Ehsaan Nagar all the households reported this issue. Accessibility is also hampered with flooding of internal streets, and sometimes even blockage of access roads; with Ambujwadi residents reporting the lowest

encumbrances due to road flooding, where 73.5 per cent of the houses claimed that street flooding proved problematic while 56.85 per cent of the households said access to the main road was limited due to flooding.

With the monsoon limited to three months in the middle of the year, the informal settlements have to deal with the brutal heat of the sun for much longer.

Problems faced during extreme heat (number of households)							
Location	Too hot to stay indoors	No Shelter / Shade present nearby	Unable to do household chores during the day	Other	No problem	Missing Value	Total
Ambujwadi	728	625	541	16	90	9	890
	81.80%	70.22%	60.79%	1.80%	10.11%	1.01%	100%
Behrampada	853	754	782	5	16	9	880
	96.93%	85.68%	88.86%	0.57%	1.82%	1.02%	100%
Ehsaan Nagar	58	29	57	0	0	0	58
	100.00%	50.00%	98.28%	0.00%	0.00%	0.00%	100%
Gautam Nagar	62	46	60	4	0	0	62
	100.00%	74.19%	96.77%	6.45%	0.00%	0.00%	100%

Table 9.4: Problems faced during extreme heat/summers

A significant number of the households in all communities reported it too hot to stay indoors in the summer months; in both settlements in Bhopal, all the residents claimed the summer months make it unbearable to stay indoors which curtailed their household chores to the evenings. In Ehsaan Nagar, 98.28 per cent of the households narrated this predicament, while in Gautam Nagar the number was only slightly less, at 96.77 per cent. In Mumbai, the residents of Ambujwadi (81.80 per cent) and Behrampada (96.93 per cent) reported

about excessive heat indoors during the summer month, and the effect on the household chores was also notable at 60.79 per cent and 88.86 per cent respectively. With a limited amount of shade in the surrounding regions of almost all the settlements, these communities are forced to endure the torrid summers without alternatives.

Another feature of habitability is the size of the house and the corresponding relation to the average number of people inhabiting the space.

Area of house in square feet (number of households)							
Location	Less than 100 sq. feet	100 Sq. feet	More than 100 to 150 Sq. feet	More than 150 Sq. feet till 200 sq. feet	More than 200 sq. feet	Total	Occupancy (Avg. household size)
	11.01%	32.47%	41.46%	11.69%	3.37%	100.00%	
Behrampada	14	428	254	151	33	880	4
	1.59%	48.64%	28.86%	17.16%	3.75%	100.00%	
Ehsaan Nagar	12	0	0	2	44	58	4.71
	20.69%	0.00%	0.00%	3.45%	75.86%	100%	
Gautam Nagar	46	6	9	1	0	62	4.27
	74.19%	9.68%	14.52%	1.61%	0.00%	100%	
<b>All India (Urban)* (Aggregate)**</b>	<b>Avg.: 496.2 sq. ft.</b>						<b>4.8**</b>

Table 9.5: Area of house in square feet

\*Source: NSS 76th Round, 2018, \*\*Source: Census 2011

According to the 76th Round of the NSSO, the average urban household size was 496.2 sq. ft. This being the aggregate figure, it is not surprising that the informal settlements have much smaller residential spaces. In Mumbai, where land is a much more expensive commodity, most of the households in both settlements live within an area of 100 to 150 sq. ft. (73.93 per cent of Ambujwadi, and 77.5 per cent of Behrampada). The residents of Gautam Nagar, all of whom live in kutcha structures, have the least space with 74.19 per cent of the households living in houses occupying less than 100 sq. ft. Considering that on

an average every family has more than 4 people, the space per inhabitant is inadequate. In Ehsaan Nagar, where most of the houses are built of the same size, each household lives in a space spanning more than 200 sq. ft. with the average size of the family being slightly higher. Satya, a resident of the slum who lived in smaller quarters, highlighted the difficulty when he said, *"We have a small shelter where six of us live: two of us husband and wife, my mother-in-law and our children. Here we store our water, clothes, and light our stove too. We have to adjust."*

## ACCESSIBILITY

Housing is not adequate if it threatens or compromises the occupants' enjoyment of other human rights. For people with disabilities, the built

environment is less accessible if their specific needs are not kept in mind while planning and construction.

Area of house in square feet (number of households)								
Households that have -	Ambujwadi				Behrampada			
	PWD friendly house				PWD friendly house			
	Yes	No	Cannot Tell	Total	Yes	No	Cannot Tell	Total
A person with disability	4	31	10	45	8	21	6	35
	8.89%	68.89%	22.22%	100.00%	22.86%	60.00%	17.14%	100.00%
No Person with disability	31	730	84	845	24	782	39	845
		86.39%	9.94%	100.00%	2.84%	92.54%	4.62%	100.00%

Table 9.6: Accessibility of housing infrastructure for PWDs

The survey only managed to capture the accessibility of households in Mumbai. In both communities, approximately two-thirds of the persons with disabilities reported that their houses were not disability-friendly. As data was gathered from the entire community, the response from those households where there were no persons with disability followed a similar pattern although more

amplified, with 86.39 per cent of the households in Ambujwadi and 92.54 per cent of those in Behrampada reporting not being disability-friendly. This calls for a general reconsideration of the approach in construction, and may indicate particular needs to be taken into account while planning for affordable housing.

## AFFORDABILITY

Affordability is a pre-condition for inclusive housing schemes as the for many people cost of living is compounded if they have to include rent, particularly in the case of economically and socially vulnerable communities. Among the communities surveyed, a majority claimed to own their house, and hence not experience great expenses in the form of monthly outgoings towards housing rent. However, in Behrampada, little less than two-thirds of the households lived in a rental accommodation where a majority of the residents spent more than INR 5000 on a monthly basis.

In the remaining communities, where rent doesn't amount to a bulk of their expenses, this is a factor that pushed them into squalid and densely populated areas. This reflects the global phenomenon, where across the world, problems in ensuring the affordability of housing, land and property are responsible for the increasing number of people who are pushed away from well-urbanized and well-located neighbourhoods into inadequate, insecure housing conditions on the periphery (UN-Habitat, 2015).

Monthly Rent (number of households)							
Location	None	Up to INR 2000/-	More than 2000/- to INR 5000/-	More than INR 5000 to INR 8000/-	More than INR 8000/- to INR 10000/-	More than Rs 10000/-	Total
Ambujwadi	773	84	30	1	2	0	890
	86.85%	9.44%	3.37%	0.11%	0.22%	0.00%	100.00%
Behrampada	357	11	83	194	192	43	880
	40.57%	1.25%	9.43%	22.05%	21.82%	4.89%	100.00%
Ehsaan Nagar	Data Not Available						
Gautam Nagar	Data Not Available						

Table 9.7: Monthly expenditure on rent

**11.2 By 2030, provide access to safe, affordable, accessible and sustainable transport systems for all, improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, women, children, persons with disabilities and older persons**

Mobility around the city is a key determinant of the freedom and dignity that one experiences. With many vulnerable communities being pushed towards the periphery of the cities, they access to public transport is crucial to the accessibility of employment opportunities, health-care services, schools, childcare centres.

Location	Distance from Work						Mode of Transport							
	0-5 km	6-10 km	11-20 km	21-30 km	More than 30 km	Missing	Walking	Cycle	Shared Auto	Private Auto	Govt. Bus	Private Vehicle	Other	Missing
Ambujwadi	Data not Available													
Behrampada	Data not Available													
Ehsaan Nagar	18	5	11	3	18	3	21	0	10	2	12	5	5	3
	31.03%	8.62%	18.97%	5.17%	31.03%	5.17%	36.21%	0.00%	17.24%	3.45%	20.69%	8.62%	8.62%	5.17%
Gautam Nagar	17	16	23	2	3	1	31	2	9	2	13	3	2	0
	27.42%	25.81%	37.10%	3.23%	4.84%	1.61%	50.00%	3.23%	14.52%	3.23%	20.97%	4.84%	3.23%	0.00%

Table 9.8: Distance of from work and mode of transport used for commuting

The primary data on access to public transport only pertains to the communities in Bhopal, and focuses on how it enables their livelihood. Considering the location of Ehsaan Nagar, on the outskirts of the city, more than half of the population travels for more than 10 km to reach the site of their employment. While Gautam Nagar is located in the heart of the city, most of the residents travel long distances through the city for work. Considering the economic scarcity in both these communities, very few households own their own vehicles (8.62 per cent in Ehsaan Nagar and 4.84 per cent in Gautam Nagar) and are hence quite dependent on public transport facilities. However, there too the residents of these two communities face discrimination because of their appearance and type of work. Pramod, a community worker, elaborated, "In buses and other modes of public transport people avoid sitting next to them. And even if they call out to a passing bus on the road, it doesn't stop for them as they often are carrying a gunny bag with waste materials."

In many households where the expenses on commute are seen to be eating into the household earnings, the family members choose to gather and segregate waste closer home, with 36.21 per cent of Ehsaan Nagar's and half of Gautam Nagar's working population claiming to walk to work.

**11.3 By 2030, enhance inclusive and sustainable urbanisation and capacity for participatory, integrated and sustainable human settlement planning and management in all countries**

Equitable civic participation in governance is a precursor to leaving no one behind while paving the road towards sustainable development. People's representation and active participation in decision-making processes has the inherent capacity to ensure their inclusion, it also validates their rightful position in the city.

Participation in civil society and government activities		
Location	Yes	No
Ambujwadi	51	839
	5.70%	94.30%
Behrampada	13	867
	1.50%	98.50%
Ehsaan Nagar	Data not available	
Gautam Nagar	Data not available	

Table 9.9: Participation of a family member in CSO or government activities

The number of people who participated in any form of civil society or government effort to discuss or determine the course of development in Mumbai was poor. Ambujwadi reported a higher number of 5.7 per cent of households being represented at a campaign; event or conference hosted by local NGOs or government departments, while Behrampada showed for a lower participation at 1.5 per cent attendance.

**11.6 By 2030, reduce the adverse per capita environmental impact of cities, including by paying special attention to air quality and municipal and other waste management**

With the increasing rate of urbanisation and subsequent consumption, the generation of waste is a natural consequence. Effective management of waste has a direct impact on social and environmental indicators of development, and inadequate facilities affect the poor most harshly.

The primary data reveals a stark difference in the waste management systems of Bhopal and Mumbai. In Bhopal, the Municipal Corporation has concentrated their efforts on cleaning up the city, and one of the approaches is through guaranteed waste collection at

Waste disposal practice for the purpose of collection							
Location	Garbage gets collected from home	Open public space	Public waste bin	Dumping Ground	Drainages	No Idea	Total
Ambujwadi	728	625	541	16	90	9	890
	81.80%	70.22%	60.79%	1.80%	10.11%	1.01%	100%
Behrampada	853	754	782	5	16	9	880
	96.93%	85.68%	88.86%	0.57%	1.82%	1.02%	100%
Ehsaan Nagar	58	29	57	0	0	0	58
	100.00%	50.00%	98.28%	0.00%	0.00%	0.00%	100%
Gautam Nagar	62	46	60	4	0	0	62
	100.00%	74.19%	96.77%	6.45%	0.00%	0.00%	100%

Table 9.10: Waste disposal practice for the purpose of collection

the doorstep. In both communities a majority of the households, 89.66 per cent in Ehsaan Nagar and 77.42 per cent in Gautam Nagar, have their waste collected at home, thereby reducing the disposal of waste at undesigned public spaces. In Mumbai, a lack of sound waste collection processes leaves people to dispose of the garbage in their own manner, with 54.16 per cent of Ambujwadi's and 76.48 per cent of Behrampada's households disposing their waste in public spaces.

An integrated waste management system requires that after waste collection from the household, it is handled safely, segregated and then recycled. Thus, waste can be recovered, and the burden on dumping grounds or the amount of air pollution generated by incineration can be reduced.

In three of the communities, waste segregation is minimal, but in Ehsaan Nagar 72.41 per cent of the households claim that waste is segregated.

Segregation of waste (number of households)			
Location	Yes	No	Total
Ambujwadi	96	794	890
	10.79%	89.21%	100.00%
Behrampada	98	782	880
	11.10%	88.90%	100.00%
Ehsaan Nagar	42	16	58
	72.41%	27.59%	100.00%
Gautam Nagar	9	53	62
	12.50%	73.61%	100.00%

Table 9.11: Whether segregation of waste practiced

This maybe because a majority of the population is employed in the informal waste sector, they are aware of the channels of recycling and see earning potential in what others might look at as waste.

Considering UN estimates, the informal recycling sector may save the city as much as 15 to 20 per

cent of its waste management budget by reducing the waste that would otherwise have to be collected and disposed of by the city councils (Cibrario, 2018), it is important that urban local bodies recognise their contribution by including pre-existing recycling networks and workers into a dignified mode of employment.

## A POST COVID-19 ANALYSIS

While people reported little change to housing facilities and mobility came to a screeching halt during the lockdown, there were several comments on the collection and management of waste during this period. A restriction on movement and contact meant that the services of waste collection also halted. Akhila, a woman from Gautam Nagar, explained, "The Municipal Corporation would collect waste earlier, but now we have to dispose of our own waste. With

no option, we throw it in the open spaces and it gathers around the drainage. It is a cause for health problems, particularly among children who play in the surrounding areas." Some commented that even months after the lockdown being slowly lifted, waste collection in their community hadn't resumed and the situation was deteriorating further which was affecting general hygiene but particularly the health of children who played in its vicinity.

### KEY FINDINGS:

1. Informal settlements often afford people with minimal security of tenure; most of the slum-dwellers reported to have experienced evictions or threats of the same in the last twenty years. In Behrampada, the severity was felt more intensely where people living in rental accommodation felt doubly insecure.
2. In informal settlements more people reside in kutchha or semi-pucca structures (54.29 per cent in Mumbai and 100 per cent in Bhopal) the liveability of the structures through the peak of the summer and monsoon months disrupts their lives. Moreover, with high occupancy in cramped establishments the quality of life ensured at their residence is fairly poor. Most of the houses in informal settlements did not cater to the needs of persons with disability.
3. Convenient access to regular public transport is a key determinant of inclusion in the city, particularly for the poorest sections who often don't own their private vehicles.
4. Keeping the public and the living spaces of the city clean provides a better experience for all residents. Waste management was better in some communities in Bhopal as many of the residents were formally or informally associated with the waste management sector. In Mumbai, waste collection systems were inadequate and hence the settlements were often littered with garbage.
5. The lockdown caused a loss of employment for many, and those who lived in rented accommodations felt higher pressure during those months. With mobility halted, the most visible effect was seen on waste systems, with the government often managing to fulfil its responsibility of collection leaving the settlements littered.

## X SUMMARY OF THE FINDINGS

This report has attempted to adjust the lens of urban development, by redefining the narrative to represent the experiences of the most excluded populations, and therefore complete the picture. In keeping with the spirit of Leave No One Behind (LNOB), the data of four marginalised urban communities was gathered to represent the areas in which the progress towards meeting the Sustainable Development Goals (SDGs) was below par.

Below is a summary of the findings:

**1. SDG 2:** Less than two-thirds of the vulnerable population groups had ration cards that enables them their Right to Food, while the national figures show that 99.5% coverage. In the wake of the lockdown, along with falling nutritional levels people were left without food for several meals, and some were forced to forfeit their dignity and beg for meals.

**2. SDG 3:** The population groups were divergent in the kind of facilities they access for medical treatment, with some accessing public hospitals more regularly, while other chose to avoid such healthcare institutions altogether. However, no matter which institution they visited it was clear that in the absence of adequate health insurance, a bulk of the expenses towards physical wellbeing were borne by the individual. The COVID-19 pandemic increased the overloaded healthcare facilities, hence several ongoing programmes and services were affected, and those who were already at the fringes of receiving benefits were gradually abandoned.

**3. SDG 4:** Education for All has been a campaign that had picked up steam in India over the past few decades. Yet inclusive education which is gainful and reinstates respect with opportunity was seen to be missing; many children who enrolled in schools dropped out due to monetary constraints or social discrimination. In the wake of the pandemic, where schools entered the virtual medium, the children from marginalised communities found that their resource poverty, again, determined their Right to Education.

**4. SDG 6:** Access to drinking water is met largely through common facilities. While India declared its Open Defecation Free (ODF) status, the access to sanitary toilets is still a dream for many. Only one community had benefitted from toilets built during Swachh Bharat Mission (SBM), however, a general disregard for cleanliness and hygiene was felt in all institutions. The situation degenerated further when people's mobility was restricted during the lockdown, and many were forced to return to defecating in the open, a loss for dignity, hygiene and safety.

**5. SDG 7:** While signs of increased electrification were seen, the arena of cleaner energy stands untouched. While this requires certain policy interventions on the part of the government for electricity, in the sphere of cleaner cooking fuels the vulnerable communities were excluded. While many are eligible for the schemes that the government has introduced to access cooking fuel, like LPG, they remain disenfranchised due to lack of proper documentation. The lockdown, didn't create any major setbacks in this goal.

**6. SDG 8:** Economic growth is often envisaged as the harbinger of progress and improvement in the quality of life. Yet the benefits, when monopolised, result in exploitative conditions for the poor. Large numbers of the vulnerable population are employed in the informal economy, their household economies lack any form of security, and force them to survive without the ability to accumulate or save, as also invest in the possibility of an improved future. The lockdown saw a large number of people losing their wages, with some losing their sources of livelihood completely.

**7. SDG 11:** People suffering from chronic poverty live in informal tenements, which are sprouting up to house the masses who arrive in cities to support an economy, that is struggling to return the favour. Many of these settlements showed to have poor housing standard, lacking several key facilities, like waste disposal systems and associated services, like accessible transport systems. While the lockdown didn't worsen the absolute condition, the overall crisis exposed the pre-existing insecurities which pushed the residents of the peripheries of this city into more precarity.

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## THE WAY FORWARD

The SDG framework holds in its design the promise of dignity for all. While the Government of India has created in various legislations and schemes, this promise will remain unattainable until the most vulnerable are kept in mind during policy interventions. Moreover, in keeping with the long-term vision it is also necessary to build resilience into the structure and the people to deal with shocks, as they had to independently when the tremors of COVID-19 led to widespread upheaval.

The pandemic, and the subsequent fallout of several institutions and systems, was the litmus test. The results exposed the cracks in a system, and offer the opportunity to reimagine the plans for the future while keeping justice at the centre. The study has highlighted the fact that several communities in urban India remain excluded and for them the crisis of survival is a daily battle. Their lives are plagued by a lack of access, opportunity, ownership and the right to participate in decision-making. For them to be included in the city, the structural inequalities need to be addressed.

Below are some recommendations based on the findings of the study which are presented through the SDG framework:

### 1. SDG 2:

- a. The government needs to provide ration cards which cover all citizens, and must ensure that documentation is not a reason for exclusion. The state governments, and urban local bodies, should undertake the responsibility to ensure

that each household has a ration card through community-based drives/camps.

The One Nation One Ration (ONOR) Card scheme needs to be fast tracked in all states that would enable migrant workers to access basic food supplies in the place of their work.

- b. In some communities, the mid-day meal was highlighted as the only nutritional meal a child received. The success of this programme should boost efforts for universalisation with an emphasis of improved quality of nutritional food.
- c. The specific nutritional needs of adolescent girls and lactating mothers should be addressed through specific dietary inputs.

### 2. SDG 3:

- a. The health crisis due to the COVID-19 pandemic has exposed the insufficient healthcare infrastructure and its limited access to vulnerable groups.
- b. Currently, medical expenses are largely borne by individuals at several private centres across the states. The Pradhan Mantri Jan Arogya Yojana (PMJAY) stands to offer medical insurance sans financial hardship all across the country, and must be diligently executed to first include the vulnerable populations. However, this accounts for only in-patient care; since most of the out-of-pocket expenditure is for medicines and out-patient consultation, it is necessary that monetary burdens at this stage also be removed.
- c. The effective system of healthcare and awareness through the Accredited Social Health Activist (ASHA) workers and anganwadis needs

strengthening so that community-based, localised healthcare prioritises preventive and curative and is generally improved.

### 3. SDG 4:

- a. With the high rate of dropouts, there should be counselling services and support for those individuals who find the environment within the school challenging, for social or financial reasons.
- b. This goal promises Education for All, and requires to move beyond the mandate of enrolment to address retention through relevant, quality education. Since many individuals look at education as a mode to gain employment, it must include skills relevant for further education or future employment.
- c. Teachers should be regularly trained through refresher courses that ensure that the mode and content of education is relevant to the contemporary needs.
- d. The disproportionate impact of the COVID-19 pandemic on children's education requires immediate interventions in the form of infrastructural investments and tackling resource poverty.

### 4. SDG 6:

- a. The study pointed out that the ownership and government recognition of the settlement greatly influences the kind of water and sanitation facilities, instead the government must ensure that all slums, notified or non-notified, have adequate water systems in proportion to the number of residents.
- b. The building of toilets, per household, should be universalised with the specific needs of the users, i.e., number, disability, age, etc. while construction. Furthermore, there is need to install superior sewage systems that can be cleaned and maintained.

### 5. SDG 7:

- a. The study revealed that some families who had access to ration supplies, still cooked it over firewood as they were not covered by Pradhan Mantri Ujjwala Yojana (PMUY). A linkage between the ration card and PMUY should be enabled to bridge this gap. Additionally PMUY should be extended beyond BPL families to include the larger vulnerable populations.
- b. The government should make efforts among small communities to implement models of renewable energy, by establishing alternative grids.

### 6. SDG 8: Employment needs to be reaffirming of the dignity at the job and as an effect of the job:

- a. Considering the large number of migrant and informal workers, who often lack occupational and social security at their work, there is a need for better labour laws. Under the provisions of the Unorganised Workers Social Security Act, 2008, the mandate to set up a Social Security Board for unorganised workers should be instituted.
- b. Similar to the Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) in rural areas, an urban employment guarantee scheme should be introduced to provide minimum, recognised work and wage to urban residents.

### 7. SDG 11: Urbanisation is an ever-expanding force, and instead of countering it, it must ensure inclusive growth and eliminate the inequalities that existed in the village:

- a. The 74th Amendment should be employed to enable the Urban Local Bodies (ULBs) to function as democratic units of self-government. While ULBs are in the process of creating Development Plans, these should include the voices of socially vulnerable sections by representing their specific needs, and can also be aligned to the SDGs. Finally, this must be coupled with the capacity-building of officials.
- b. The ecological impact of urbanisation should determine the planning to ensure sustainability.

For these suggestions to be incorporated, the broader ethic needs re-evaluation. Some primary questions are:

### WHOSE RESPONSIBILITY IS IT?

The government, at the central, state and local levels, has to be the primary agent on the path towards achieving SDGs. Acknowledging the needs of the people, it should institute a consultative process and a feedback mechanism at the local level to ensure that all the plans are not merely paper-weight.

Moreover, collaboration across the sectors is important. It is critical that the Civil Society

experiences the freedom to participate in the sphere and see their needs reflecting in the city's plans. Hence, the government should ally with Civil Society Organisations (CSOs) to ensure that the people's vision and requirements are not side-lined. At the same time, when private players are involved, they should be mandated to follow the agenda determined for the benefit of the people and the environment, ensuring that it is not a purely profit-oriented venture.

### WHAT DETERMINES THE PROCESS?

With numerous schemes and incentive programmes in place, it is first necessary that the basic needs and services reach all citizens. In line with the LNOB principle, the most excluded communities should be reached first and then only can more complex interventions be planned.

Disaggregated research, which allows the ability to reflect on the determinants of poverty and exclusion, and eliminate them from the structures where they stem, should be prioritised. Moreover, it will ensure

the accountability on the part of the government and force it to think beyond a one-fits-all approach. Instead, there will be the need to customise the approach at the local level to reach the people directly and effectively. Also, this will allow for an intersectional approach in which many of the priorities can be targeted together.

In all these efforts, gender and disability concerns need to be integrated at all stages.

### HOW IS THE PROCESS MONITORED?

Along with centralised monitoring, there should be an attempt to look at decentralised monitoring tools to point out the real picture, especially in disenfranchised pockets. Moreover, efforts to include to civil society to initiate community monitoring and feedback must be implemented.

To conclude, the study formulates an initial step in highlighting the critical need for disaggregating data through an intersectional lens while trying to map progress towards diverse yet interconnected SDGs. It brings to light the disparity that exists within and across sectors, geographical locations and population groups, reinforcing the need for localisation of issues and reimagining solutions using a decentralised approach. It emphasises the need for the inclusion

of voices of the most marginalised in the planning, implementing and monitoring processes of all development initiatives, thereby explicitly integrating humanitarian progress and human development as indivisible subsets of the larger welfare agenda. While we still grapple with the aftermath of the COVID-19 pandemic and its continued threat, the experience of the pandemic firmly reinstates this belief and has provided an opportunity to Build Back Better by achieving the fundamental and most integral agenda of the SDGs of leaving no one behind.

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The Human Rights Advocacy and Research Foundation (HRF) works to protect and promote the human rights of socially excluded communities and vulnerable sections of society, mindful of intersectionality.

The Foundation enables these communities to exercise their constitutional rights, amplifies their voice, and enhances their participation in decision-making through demystifying laws and state mechanisms, building their capacity, and supporting them to deepen democracy and build inclusive, sustainable, and resilient communities.

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