COUNTRY ASSESSMENT REPORT
COVID-19 RECOVERY LOANS
IN INDIA
Country Assessment Report
COVID-19 recovery loans in India

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Executive Summary

This report was being edited and finalised as India was entering the eye of the storm, a storm it didn’t see coming - Wave 2. The report itself would be incomplete if there is no mention of the debacle that played out - a country caught unaware as its custodians were too busy playing Election games in 5 states, the fractured and frayed center-state relationships, no lessons from Wave 1 as health infra crumbles and people were left to fend for themselves. The last two days have seen 3 lakh plus cases per day and as the country struggled, an informal network of volunteers dig deep to step in and support. Home to approximately 1.3 Bn and one of the high growth emerging economies in the world, Indian government’s response to the pandemic came in the form of curfews, lockdowns, and relief / stimulus packages. The government’s move to put 1.3 billion people in a lockdown for 21 days (that subsequent-ly was extended by another 21) to contain the outbreak, was in line with government responses across the globe, but in India it affected the informal sector and the poor disproportionately. On March 25, 2021, a nationwide lockdown was imposed till April 14th. The lockdown was announced as a suppression measure, meant to slow the spread of virus and to give the State time to prepare. This lockdown was extended twice and finally lasted from March 25th – May 21st.

About 90% of India’s workforce, approximately 400 million workers are employed in the informal sector. It had far-reaching consequences including political, cultural, and social ramifications. Loss of jobs and income, food shortages and an uncertain future started bleakly at the poor and the vulnerable sections, already disadvantaged, further pushed into a state of desperation.

What also followed was a severe crippling of the economy - a steep fall in the GDP that was already in slow-down before the pandemic, reflected the suspension of economic activity due to a series of lockdowns that attempted to contain the spread of the virus. India’s economy contracted by 23.9% for the first quarter of the 2021 financial year. This figure reported for the April to June period was the lowest growth rate since the country started reporting data in 1996. In January - March, the preceding quarter, the economy had grown by 3.1%, the lowest in 17 years.

In the post Covid time the MDB’s have already invested close to 8.5 billion USD in India as support for dealing with the crisis. This unusual fiscal burden has skewed India’s public debt ratio from 72% from pre pandemic levels to 89% post. Government Debt to GDP in India averaged 68.26 percent from 1980 until 2019, reaching an all time high of 83.23 percent in 2003 and a record low of 47.94 percent in 1980. During the pandemic this rose to a staggering 90%.

The first and major announcement by the Government post lockdown was the 1.7 lakh crore (24.5 BN USD Approx.) relief/stimulus package (under PMGKY) to address the short to medium term fallout of the Covid crisis. The relief package was meant to address the needs of the poorest of the poor by providing food and money in hand and thereby enabling them to buy essential supplies. Subsequently two more stimulus packages were announced. To fund this immediate relief and to provide impetus to the economic recovery, the government sought the assistance of external lending agencies like MDBs and IFIs. In the post Covid time the MDB’s have already invested close to 8.5 billion USD* in India as support for dealing with the crisis.

COVID-19 Active Response and Expenditure Support (CARES) Programme funded by the ADB was intended to support the government’s implementation of the emergency response program launched in March 2020. On June 19, 2020, the government made an announcement of signing a 750 Million USD loan to further enhance and support the CARES program.
Two days after the announcement of the 1st lockdown, the Finance Minister announced a Rs. 1.70 lakh crore relief package under the Pradhan Mantri Garib Kalyan Yojana for the poor to help them fight the battle against the virus. The package included:

- Insurance schemes for health workers amounting to Rs 50 Lakh per frontline worker fighting COVID-19 80 crore poor people will to get 5 kg wheat or rice and 1 kg of preferred pulses for free every month for the next three months
- 20 crore women Jan Dhan account holders to get Rs 500 per month for next three months
- Increase in MNREGA wage to Rs 202 a day from Rs 182 to benefit 13.62 crore families
- An ex-gratia of Rs 1,000 to 3 crore poor senior citizen, poor widows and poor disabled
- Government to front-load Rs 2,000 paid to farmers in first week of April under existing PM Kisan Yojana to benefit 8.7 crore farmers
- Central Government has given orders to State Governments to use Building and Construction Workers Welfare Fund to provide relief to Construction Workers

The PMGKY comprises of 11 schemes implemented by different central ministries. The paper reviews 4 of the more critical schemes which had a wide-ranging impact on the people. These are:

1. INSURANCE SCHEME FOR HEALTH WORKERS

This scheme was to cover health insurance for 22 lakh workers in government hospitals and health care centres. Data regarding the amount allotted and spent for this scheme is not available. The scheme covered loss of life during the pandemic and in case of accidental death on account of COVID 19. The validity of the insurance police was 90 days from March 30th but later extended twice.

According to the Indian Medical Association (IMA), mortality rate among doctors treating COVID was 15% among private doctors and 8% among government doctors. However, the government had no data on the number of COVID fatalities among the doctors and other hospital staff. While the IMA released a list of 515 doctors who had succumbed to the virus as on October 2, 2020, the Centre continued to maintain that there was no central database to provide this information. The only information that was available was based on the number of claims made under this scheme. According to the data available 155 healthcare staff including 64 doctors had died due to COVID. This is extremely low given the number of deaths reported by IMA, which could be considered a conservative estimate.

There are other issues in this scheme. Though there is no age limit mentioned on the government website, some doctors have claimed that health workers only above the age of 55 were covered under the scheme. In another case a list of 77 health workers were rejected since they did not meet the criteria of being primary care givers.

ASHA workers who have been a cornerstone of COVID response and vaccination are the least taken care of by the government and the scheme. According to a study, only 62% had gloves and 25% had masks. Only 38% ASHA workers even knew about the scheme, so how would they be able to access it?

Below are some of the limitations of the scheme:

- For those in the healthcare segment, the insurance scheme should ideally have been a health insurance with life cover. Many narratives of healthcare workers who passed, are those of desperate times struggling for hospital beds, treatment costs and scampering for life support systems.
- Ensure coverage/support leaves out those in the fringes of the medical profession (hospital guards, waste collectors, porters, lab assistants, hospital plumbers while not in direct contact for treatment were in the high exposure segment).
- While the scheme is said to cover 22.15 lakh health workers, this seems to be grossly understated, especially if it includes private hospital staff and volunteers drafted for COVID-19 related work.
- Even if the insurance coverage itself did not exist, they have an arrangement with the States to back up and take care of those that the centre did not support or cover.
- Have a system to track and collate associated fatalities that ensue. This data would be critical not just to acknowledge the contribution of the healthcare community but also to understand the patterns in data that would support future decision making for the government.
- The claims that come in need to go through a process of certification. The list of documents demanded by the system from the claimant needs to go through a four level administrative system - the healthcare institution, the state system, the central system, the insurance company. The claim process is barely something an average citizen can navigate through and even if they did, the administrative levels is so fraught with corruption on even regular days that in the midst of a pandemic, the need to cash in becomes even higher.

2. PM GARIB KALYAN ANN YOJANA (FREE FOOD GRAINS TO AFFECTED POPULATIONS)

The government had targeted 80 crore citizens through this scheme and a total of Rs. 1,05,000 crore was spent. The highlights of the scheme were:

- The Government of India would not allow anybody, especially any poor family, to suffer the impact of non-availability of food grains due to disruption of the PDS system
- 80 crore individuals, i.e., roughly two-thirds of India’s population would be covered under this scheme
- Each one of them would be provided double of their current entitlement over the next three months
- This additionality would be free of cost

As per government’s notification, a total of 27.7 MT (million metric tonnes) had been transported as on June 29, 2021. This does not translate to distribution. Post transport from the FCI Warehouse, the concerned State must then manage intra-state logistics and till the stock reaches the fair price shops. According to several news reports the distribution of food grains have been much lower than government estimates and claims. According to another article, the actual amount spent on the scheme is lower by 50K crores than what is claimed by the government.

Migrants who were hit possibly the most by the lockdown did not receive any real benefit from this scheme. For e.g. of the 8 lakh tonnes food grains (rice and wheat) allocated for migrants, 6.38 lakh tonnes (80 %) was taken by the states and Union Territories but only 2.64 lakh tonnes (33%) could be distributed to beneficiaries during the four months from May-August 2020.

One of the reasons for this was that the beneficiary data was inadequate. According to a survey scheme inclusion errors ranged from a mere 2% in Chattisgarh to 36% in Uttar Pradesh. Another issue was that of grain wastage due to it not being readily usable. For e.g. as of May 1, 60.5 lakh tonnes of wheat and 11.3 lakh tonnes of rice held by government was “readilyissuable”. This included grain that was sub-standard, partially spoilt (what the Food Corporation considers as partially salvageable) or completely damaged (non-issuable).

The government has failed to prevent a hun-
ger crisis that is reaching monumental proportions. Between April and July, there were around 250 documented deaths due to starvation, distress and exhaustion. The Railway Protection Force reported that at least 80 people died of dehydration or hunger on the harrowing train journeys on the Shramik trains.

India’s public distribution system, which currently holds nearly 100 million tonnes of food grain stocks, could have been used to feed the newly hungry. But only small amounts have been released for free distribution even as evidence of starvation grows, and this parsimony has been compounded by the obscenity of selling some food stocks to convert into ethanol for making hand sanitisers.

3. PM UJJWALA YOJANA (CLEAN COOKING FUEL TO AFFECTED POPULATION)

This scheme is meant to provide cooking gas free for cost for 3 months to the poor. It was expected that 8 crore people would be covered and the government has spent a total of Rs. 9670.41 crores on the scheme. There have been issues with this scheme since it was launched in 2016. One of the most important reasons is that families are unable to purchase the refill and revert to firewood and other traditional means of household fuel. The current government has given refills at subsidised rates and subsidy is transferred to the bank account after.

In the context of COVID 19, the government had agreed to allow women below the BPL to avail of free cylinders for 3 months from April – June. According to the procedure, women who make a claim under the scheme would receive the cylinder refill amount in advance, once they purchased the refill, the next month’s amount would be transferred. However, since women did not necessarily have access to their bank accounts, they would have purchased the refill with cash in hand and therefore the month for the 2nd and 3rd month amounts were not transferred to their bank. Women who had accessed the first claim were allowed an extention till September 2020. However, no transfer were made after June 2020.

4. PM JAN DHAN YOJANA

According to this scheme, each Jan Dhan account would receive Rs. 500 for the period of the lockdown. However, a study conducted by the Rapil Community Response to COVID 19, a national level coalition of 20-plus civil society organisations found that 90% of the respondents had an active Jan Dhan account, but only 66% had received the cash in their accounts. One of the rules of the scheme is that only women account holders would receive the money. Given that in the country, there are few women who are allowed to have any kind of financial independence, this rule would certainly have kept out a large part of the poor families from accessing this scheme. Another survey reported that 59% of 2,233 women spoken with reported having received the Rs. 500 in their account.

CONCLUSION

Lending agency monitoring: 2.25 BN USD were approved and disbursed to India. There are no monitoring reports on AIIB or ADB’s website when we placed the RTI with the DEA on XX/xx/XXXX. When we checked again many times during the writing of this report, it was not made available in any public domain. Where is the accountability and transparency?

Access to Information: No documents on public domain have been accessible by this team during the writing of this report. AIIB, ADB or DEA did not publish the monitoring reports on their website. We were finally able to secure the monthly and quarterly monitoring reports from the DEA on the XX/XX/XXXX through an RTI placed to them requesting these reports.

External debt, extended lockdown: In the 69-70 days lockdown period, India had loans flowing into the country to the tune of 3.26 BN USD. 2.5 BN of that came in during the 1st and 2nd lockdown itself.

The question to ponder on here is, why was there a scramble of MDBs and IFIs who came forward to fuel multiple phases of lockdown? Did India really need to borrow this money?

Did it allow India the luxury of a continued lockdown? It is evident from the current wave 2 that India has not got its Pandemic Preparedness Plan in place. No adequate medical infrastructure has been created while it had ample time between the two waves.

Lack of Transparency and Data Availability: There is a serious lack of transparency of data. From number of people infected by the virus, to the number of people who succumbed and the number of people who have been recipients of welfare schemes of the government and amount spent. Lack of transparency has meant that accountability has suffered. During the peak of the second wave for example, the Central government had a meeting of senior officials in the centre and state to ensure that a positive attitude is communicated to the people rather than the truth.
1. INTRODUCTION

The year 2020 will certainly go down in history as the year the COVID 19 pandemic hit the world. Comparisons have already been made to the year 1918 when the Spanish flu spread across the world, it lasted 2 years, taking the lives of 2.5 million people. A century later a novel coronavirus is barrelling through the world impacting millions and ravaging the world economy. In early October the World Bank estimated that by 2021 an additional 110 to 150 million people would have fallen into extreme poverty, living on less than US$1.90 per day. Oxfam has estimated that half a billion people could be pushed into poverty, leading to increased social, economic and gender inequalities. Over half the global population could be living in poverty in the aftermath of the pandemic.

Home to approximately 1.3 Bn and one of the high growth emerging economies in the world, Indian government’s response to the pandemic came in the form of curfews, lockdown and relief/stimulus packages. The Government’s move to put 1.3 Bn people in a lockdown for 21 days (that subsequently was extended by another 21) to contain the outbreak, was in line with government responses across the globe, but

in India it affected the informal sector and the poor disproportionately. About 90% of India’s workforce, approximately 400 Million workers are employed in the informal sector. It had far reaching consequences including political, cultural and social ramifications. Loss of jobs and income, food shortages and an uncertain future started bleakly at the poor and the vulnerable sections, already disadvantaged, further pushed into a state of desperation. The migrant crisis received worldwide coverage as a humanitarian crisis. “It’s the poor who keep this country running,” she said. “But no one thinks we are worth anything” says a domestic worker in this news report by Al Jazeera.

Several migrant workers in Bengaluru in response to surveys conducted have mentioned that they are the ones who building cities, but are forgotten by the bureaucracy and the political class when it comes to crises like the pandemic.

What also followed was a severe crippling of the economy - a steep fall in the GDP that was already in slow-down before the pandemic, reflected the suspension of economic activity due to a series of lockdowns that attempted to contain the spread of the virus. India’s economi...
who have extended their support to India are:

**World Bank:** $1 billion for the Indian COVID-19 Emergency Response and Health Systems Preparedness Project from the WB to support screening, contract tracing and diagnostics, procurement of PPE, setting up isolation facilities, etc.

**Asian Development Bank:** $5 billion loan to India under the CARES program (COVID-19 Active Response and Expenditure Support Program) which is funded through the COVID-19 pandemic response option (CPRO).

**New Development Bank:** Emergency Assistance Program in Combating COVID-19 under which a loan of 1 billion USD is to be lent to Indian government for disease prevention and detection, funding of critical healthcare expenditures to enhance capacity and preparedness and to provide immediate economic assistance to enable economic and social recovery.

**Asian Infrastructure Investment Bank:** 750 Million USD loan to India under the CARES program (COVID-19 Active Response and Expenditure Support Program) which is funded through the COVID-19 pandemic response option (CPRO).

In the post Covid time the MDB’s have already invested close to 8.5 billion USD in India as support for dealing with the crisis.

This unusual fiscal burden has skewed India’s public debt ratio from 72% from pre-pandemic levels to 89% post⁷. Government Debt to GDP in India averaged 68.26 percent from 1980 until 2019, reaching an all time high of 83.23 percent in 2003 and a record low of 47.94 percent in 1980⁸. During the pandemic this rose to a staggering 90%⁹. “Massive stimulus—financed by massive borrowing—is the best, indeed the only possible response to the Covid-19 recession,” said Jamie Rush, chief European economist for Bloomberg Economics. “Extremely low interest rates mean the immediate cost is basically zero. That doesn’t mean stimulus is free. Government and corporate balance sheets are now significantly more exposed to the risk of rising rates.”

This report further evaluates COVID-19 and India’s response to it in the context of public debt and prioritizing people:

**Section 1** of the paper gives an overview of the steps that India took in response to the COVID-19 pandemic and its socio-economic fallout.

**Section 2** analyses aspects of the PMGKY by breaking down the funding response and extracting the real essence of the relief measure through coverage and implementation. This section also looks at India’s debt burden and explores the various aspects of the COVID-19 recovery loans provided to India by IFIs like ADB and AIIB with a specific focus on $2.25 BN CARES package. This includes undressing of the allocations, utilization, reporting, impact.

**Section 5:** Conclusion of the report

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**2. COVID 19 AND INDIA**

As on March 24th, 2020 as cases crossed 500 and death toll hit 10, India imposed a 21 day lockdown starting 12 midnight up to April 10th. It was 8.30 PM and as the PM spoke through this televised broadcast, the country went into shock as this was not anticipated but the full impact of what the announcement of this lockdown meant, would really hit home in the days to come.

**2.1 COVID IN TIMELINE**

On 30th Jan 2020, India reported its first Covid 19 case, the same day that WHO declared the outbreak a public health emergency of international concern. The patient was a student of Wuhan University but back at Kerala’s Thrissur district.

As the world reeled under the impact of the virus, India first airlifted its citizens from China on March 24th, 2020 and cancelled existing visas for Chinese and those who had visited China in the last two weeks by 4th February 2020.

A little over a month after the first case was reported, on 3rd March 2020, PM Modi tweeted for the first time saying that “there is no need to panic” as “ministries and states are working together” to screen people. The very next day 22 new cases of COVID were confirmed by the Health Ministry.

A week later, on 10th March there were 50 COVID-19 cases in India; doubled in mere 4 days and by 15th March there were 100 confirmed cases; doubled in 5 days.

India’s first casualty was reported on 12th March 2020, from Kalburgi in Karnataka. On the same day, the country banned entry of foreigners for a month suspending all visas.

On 22nd of March, 50 days after the first case was reported, a 14 hour voluntary lockdown called “Janata Curfew” was observed in India.

By 25th of March, a nationwide lockdown (restriction on movement) was imposed till April 14th. The lockdown was announced as a suppression measure, meant to slow the spread of virus and to give the Center and State time to prepare. In his tweet PM Modi again said that “There is absolutely no need to panic”. There was no communication from him or the government on the availability of essentials or the way forward for migrants and unorganized segments.

On 26th of March, a day after the lockdown, what India witnessed was just the beginning of the misery of the migrants as what is estimated to be a mass exodus of 1 Crore migrants who started their journey back home.

On the same day, FM Nirmala Sitharaman announced a 1.7 lakh crore relief package under PMGKY for the poor. Insurance for health workers, free food, income support to farmers and unorganized sector workers were highlights of the scheme.

10,000 cases were confirmed and on April 14th Lockdown 2.0 came into place as the lockdown was extended till May 3rd.
By April 29th, 1000 confirmed deaths were recorded. Subsequently, lockdown 3.0 and 4.0 were announced on 04th May and 18th May respectively.

Between 12th May and 13th May, PM and FM announced the Atmanirbhar (ABA) package.

2.2 COVID IN NUMBERS

One of the early measures adopted was screening passengers flying into India, China and Hong Kong being the first two countries being screened as on 18th January, 2020. But when India reported its first COVID-19 case, airports were not screening passengers from countries other than China and Hong Kong, even though 20 countries had reported cases by then¹⁰. Even by 3rd March, there was no screening requirement for other countries even though both US and UAE had confirmed cases⁹. Universal screening of all international flights began on 4 March, by which time India had reported 27 cases of the novel coronavirus.

Unlike many countries, COVID-19 cases rose exponentially during the lockdown, and the impact of the pandemic was felt the most in big cities, particularly Mumbai and Delhi. Coronavirus cases crossed 1 lak in 19 May, two days after India overtook China in terms of the number of COVID-19 cases reported.

Through June and July, coronavirus cases continued to increase rapidly. On 12 June, India overtook the United Kingdom to become the fourth worst-hit country by the novel coronavirus in terms of absolute numbers, with over 3 lakh cases.

India became the third worst-affected country on 6 July, and became the second worst-affected country on 7 September. On 12 September, India recorded its near highest spike of 97,570 people found positive in 24 hours.

India reached the COVID peak on September 17 when 97,894 infections were detected in a single day; 3 months after the upward spiral started and unlock 1.0 was announced by the government. On this day, there were more than 10.17 lakh active cases in the country.

Till 1st week of Jan 2021, close to 1.5 lakh people had died due to the disease in India. This was the third highest death toll in the world, after the United States, and Brazil. But per million population, several other countries had recorded far more deaths. India has seen about 110 deaths per million population, which is less than half of the world average of about 233. However, there are no clear indications as to why India’s fatalities were on the lower side, even though multiple theories have been floated.

2.3 IMPACT OF COVID

Perhaps the most far reaching and deep impact of the COVID has been the “Lockdown” - restricted internal movement that was announced on 25th March 2020 and giving 1.2 BN people less than 4-hour notice. It lasted until the 1st “unlock” was announced on 8th June 2020. India’s response was one of the harshest in the world. The country went under lockdown (restricted movement) that extended to multiple phases:

<table>
<thead>
<tr>
<th>Date Range</th>
<th>Days</th>
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</thead>
<tbody>
<tr>
<td>Lockdown 1.0</td>
<td>21</td>
</tr>
<tr>
<td>Lockdown 2.0</td>
<td>21</td>
</tr>
<tr>
<td>Lockdown 3.0</td>
<td>14</td>
</tr>
<tr>
<td>Lockdown 4.0</td>
<td>14</td>
</tr>
</tbody>
</table>

As Lockdown 3.0 was announced, WHO called the measure “tough and timely”¹⁰. The Economic Survey 20-21 states that India imposed the most stringent lockdown (equal to 100 according to the index) for around a period of 40 days from late March to early May. This was when it had around only 500-600 cases. In comparison, stringency in the US was only 72 during that period when it already had a lakh cases.

The lockdown plunged the entire economy into a crisis and left people desperate for whatever means of survival they could find.
Unemployment increased to unprecedented levels and, because of widespread loss of incomes, a vast proportion of the population was subjected to food insecurity, hunger and starvation.

- By mid April, low income households had lost 53% of their pre-crisis income.
- Around half had lost over 3/4th of their income, a quarter had fully exhausted their savings and 40% had taken additional debt.
- Nearly 3/4th of primary income earners had lost their jobs or wages and many did not expect to return to work in the near future 11.

Devastating impact on millions of migrant workers made world news, as they were stranded in various cities with no work and no place to stay started walking towards home - in some cases thousands of kilometers away. Some never made it home and became merely statistics of what is now known as "lockdown deaths" 12. Some were stories of tenacity, inspiration and innovation covered by the media but those were far and few and not representative of the "huge humanitarian catastrophe" that had been created.

The 2011 census estimated that India had 1.7 million homeless people. This count is of course terribly outdated. But those who work in the social sector estimate that this number for urban homeless is perhaps much larger at 4.7 million (1% of the population), and adding half that for homeless street children. Where is the social/physical distancing for those who have no homes and home is the street or the pavement or patches under the flyovers and banks of water bodies 13.

Use of masks, sanitizers and frequent washing of hands makes little sense to those that live in shanties and chawls with irregular or little water supply. Ninety-five million Indians were at higher risk of Covid-19 infection because they did not have access to clean water (Paliath and Raman, 2020). NSS 2018 showed that half of Indian households did not have an exclusive water source. Thirty-four percent of households required a family member (mostly women) to walk a distance to fetch water, carrying this in containers on their heads or backs. Thus, the lockdown assured little protection to the poor through its central strategies of radical physical distancing and intensive personal hygiene 14.

Such unprecedented hardships for the people of the country in the name of social distancing and "flattening the curve" in order to buy time for the country’s preparedness for testing and to ramp up the medical systems. 1,73,763 positive cases and 4,971 deaths later, on May 31, the ministry of home affairs issued an order announcing a phased reopening or ‘Unlock 1’. In the preceding 24 hours, there had been 10,956 new cases, there had been 10,956 new cases and 285 fatalities. So we finally unlocked while the caseloads were peaking.

<table>
<thead>
<tr>
<th>Date Range</th>
<th>Days</th>
<th>Loans approved in this period (in USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lockdown 1.0</td>
<td>21</td>
<td>WB - 1000 MN</td>
</tr>
<tr>
<td>Lockdown 2.0</td>
<td>21</td>
<td>ADB - 1502 MN</td>
</tr>
<tr>
<td>Lockdown 3.0</td>
<td>14</td>
<td>ADB - 1.4 MN, 500 MN, WB - 749.95 MN</td>
</tr>
<tr>
<td>Lockdown 4.0</td>
<td>14</td>
<td>ADB - 423.42 MN, AIIB - 855 MN, WB - 1400 MN, NDB - 1000 MN, JICA - 769 MN</td>
</tr>
<tr>
<td>Post Unlock</td>
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</tbody>
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In the 69 - 70 days lockdown period, India had loans flowing into the country to the tune of 3.26 BN USD. 2.5 BN of that came in during the 1st and 2nd lockdown itself.

What is even more shocking is that:

- According to multiple members of the team of scientists, the Indian government announced the lockdown without seeking scientific inputs from a national task force constituted to advise the central government on its pandemic response 15.
- There was a consensus among many experts that the lockdown had eventually failed to achieve its purpose due to the government’s failure to take crucial parallel measures of strengthening the medical infrastructure 16.

*Biggest issue with lockdown is that many national responses think of it as a main or
only measure of control—it is not,” Dr Salil Panakadan, a regional adviser with UN-AIDS—a United Nations programme to combat HIV—said, referring to the response by different countries. Panakadan is looking after the organisation’s COVID-19 response in the Asia Pacific region. “It is a component of an overall comprehensive strategy, which must use the time to prepare health systems, populations, and supply chains.”

“Mr Modi does not believe in consultations. His government is run by a few yes-men. In times of crisis, you need a discussion, first within the cabinet, then with bureaucrats, and you need contrary opinions. The labour ministry has a dedicated department for handling migrant labourers ever since the Inter-State Migrant Workmen Act came into being in 1979. Where are they? Has anybody seen the labour minister of late? I know Mr Modi’s modus operandi. He loves to be seen as pulling a rabbit out of the hat. But that’s perhaps not a good way to take decisions, particularly when it affects 1.3 billion people,” said former culture secretary of the government of India Jawhar Sircar.

“It was clear from the very beginning that a warm third world country like India was following a different trajectory than, say, Italy or Spain, when it comes to the spread of the disease. Here it was spreading slower, and because of the relatively younger age profile of our population and innate immunity, fatalities were much less than in European countries. But we borrowed the lockdown model from those countries and based it on doomsday predictions from mathematical models without considering the ground reality. Had there been some realistic planning, the government would have realised that it had some time to prepare before going into the lockdown. And then the decision to unlock was equally bizarre, if not more. All scientific models advise unlocking only when you see a sustained decrease in the daily number of fresh cases,” eminent neurosurgeon Dr Sujoy Sanayal said, adding that the lack of planning was evident from the fact that India had allowed export of medical equipment, including PPE, well into March despite instructions to the contrary from the WHO.

Sociologist Dr Dalia Chakrabarti thinks there should be adequate social security for migrant labourers at their workplace itself. Explaining her stand, she told The Wire, “The impossible journey that the labourers have undertaken shows their desperation, the absolute lack of economic and social security at their places of work and the inadequacy of protection provided by the government. We have to remember that they are actually going back to places where they didn’t have enough means to survive. That is why they had left in the first place. And as they go back as potential carrier of the infection, they face the threat of social ostracization. Hundreds of them have died on their way. A better planned lockdown that ensured minimum provisions would have saved the day for many of them.”

“Last but not the least, if the lockdown had been planned, the nature and extent of requirement for a stimulus package to restart the economy could have been different since large employment-oriented programmes in rural and urban sectors would have proved sufficient. As of now, it looks like an impossible task,” said Saikat Sinha Roy.

Because outbreaks are not only public health emergencies, but also political and socio-economic emergencies, one size does not fit all. The reality of the lockdown optics is that it was barely existent in India:

- How do you ensure social distancing in crowded housing like chawls and slums?

Implementing public health measures is difficult in places with overcrowded living conditions and inadequate hygiene and sanitation.

- How do you ensure social distancing when thousands of migrant labourers aren’t allowed to return home and they throng spaces of public transport?

The shutdown of public transport forced millions of them into makeshift shelters, leading to their relying on food handouts and the use of public toilets resulting in social distancing becoming impossible. Then once it’s opened up they scramble to get on trains and buses to return to their villages?

- How do you ensure social distancing when farmers need to continue producing and harvesting and traveling to get the produce to the people?

- According to a Hunger Watch report, in just 2 months of lockdown, informal sector workers suffered a wage loss of nearly Rs 653.53 billion which is almost the annual budget for the MGNREGA for 2020-21. The report also found that among the economically and socially vulnerable groups it surveyed, there was a sharp fall compared to the pre-lockdown period in the consumption of foodgrains, pulses, vegetables, and eggs and meat.

There was also a direct rise in unemployment, which led to a decline in incomes, and therefore access to food. More than half of those interviewed for the survey did not have ration cards, keeping them out of the ambit of food and cash transfers that governments made during and after the lockdown. How do you ensure social distancing for the poorest and most marginalised members of society who have struggled to feed themselves during the ruthless lockdown?

The kind of strict lockdown that most of the middle classes and the rich experienced, was not experienced by everyone. When implementing public health interventions, it is important for authorities to respect the human rights and dignity of people. Attention to gender-based violence, safeguarding, and exploitation of low-paid workers is especially crucial. For individuals who are homeless, living in overcrowded settlements and migrant camps, physical distancing might be impossible. Implementation of lockdowns without transparency and heavy-handed policing can undermine popular trust.

It has been stated that India, not unlike some other countries, has viewed the pandemic with a singularly biomedical lens in the name of protecting the population at the expense of social and political factors putting the most disadvantaged individuals of society at risk.

Essential supplies, including food, rely on informal supply chains that are easily disrupted in lockdowns. Immediate action is needed to maintain food and other essential supplies to prevent families dying from hunger. Cash transfers and social protection will be needed to support vulnerable families during quarantine periods, requiring governments to redistribute resources from other sectors. But what India did was not a calculated sectoral shift of funds but borrowed from external lending agencies adding to an already mounting debt burden.

2.4 COVID 19 AND HASTY ENVIRONMENTAL CLEARANCES

Just as India was easing up on the restrictions slowly after Lockdown 2.0, the environment ministry’s expert panels were considering large scale projects in mining, infrastructure and industrial projects for green clearances through video conference meetings. Over 190 such projects were on the agenda of the expert panels including the new building for India’s parliament, diamond mines, and hydro projects in pristine forests. In some of the meetings, the expert panels have already given a go-ahead to several important projects. Environmentalists and experts are irked with the haste displayed by the ministry. They point out that it is not possible for those affected by these projects to reach out to the expert panels during this lockdown period.

On April 23, the Forest Advisory Committee or FAC met over video conferencing to consider 10 projects that aim to come up over 10,000 hectares of forests, including exploration for uranium mining in the Amrabad Tiger Reserve in Telangana, and dams in the Dibang Valley in Assam. Dibang, an ecologically and culturally rich valley, is also the site
of a proposed 3,097 MW Etalim dam, one of the country’s largest proposed hydropower projects. The project was brought up for green clearance during a virtual conference held on April 23 by the Forest Advisory Committee (FAC), confoundingly, in the middle of the COVID-19 lockdown.

Such projects require detailed deliberations and often face-to-face interactions with affected people and scientists, said Nandini Velho, an independent researcher who has written to the ministry about the rich biodiversity at the Obang Valley project sites. “Maybe we cannot decide what the government wants to do politically, but at least it can continue to have rigour in the scrutiny of projects.”

There is perhaps a motive to clearing projects during a health emergency. Biswajit Mohanty of the Wildlife Society of Odisha told Mongabay-India. “People are busy, and not in a position to file objections.” This concern is shared by activities and environmentalists across the country26.

The project that really took the cake was the Central Vista Redevelopment project that is expected to cost the Indian Government 20,000 Crore (2.8 Bn USD). The Central Vista is a grand redevelopment project which involves constructing a new triangular Parliament building, a common central secretariat, new buildings for the Prime Minister and Vice-President, a residential and revamping of three-km-long Rajpath, from the Rashtrapati Bhavan to the India Gate. Such a staggering amount of money being spent by the government in the midst of a raging pandemic that has reversed decades of progress in poverty, education and healthcare is unthinkable. The project is taking precedence over many other pressing issues a city like Delhi itself faces - poor air quality, overburdened healthcare system, underpaid frontline healthcare workers etc. which will have far higher cost to the country through its economic impact compared to whatever the ROI the government is projecting towards this project.

2.5 GOVERNMENT INTERVENTION

Two days after the announcement of a 21 day lockdown by the PM, on the 26th of March, the Finance Minister announced Rs. 1.70 lakh crore relief package under the Pradhan Mantri Garib Kalyan Yojana for the poor to help them fight the battle against Coronavirus25. “Today’s measures are intended at reaching out to the poorest of the poor, with food and money in hands, so that they do not face difficulties in buying essential supplies and meeting essential needs.” she said. This package was just around 1% of GDP, highly insufficient in view of the crisis.

PMGKY is built upon a foundation of twelve different schemes already institutionalized by the government.

The relief package offered the following benefits to the people:

- Insurance cover of Rs 50 Lakh per health worker fighting COVID-19 to be provided under Insurance Scheme
- 80 crore poor people will to get 5 kg wheat or rice and 1 kg of preferred pulses for free every month for the next three months
- 20 crore women Jan Dhan account holders to get Rs 500 per month for next three months
- Increase in MNREGA wage to Rs 202 a day from Rs 182 to benefit 13.62 crore families
- An ex-gratia of Rs 1,000 to 3 crore poor senior citizen, poor widows and poor disabled
- Government to front-load Rs 2,000 paid to farmers in first week of April under existing PM Kisan Yojana to benefit 8.7 crore farmers
- Central Government has given orders to State Governments to use Building and Construction Workers Welfare Fund to provide relief to Construction Workers

A week into the lockdown, lawyers Prashant Bhushan and Cheryl D’souza filed a Public Interest Petition (PIL) in the Supreme Court, seeking the upholding of the right to life with dignity under Article 21 of the Constitution for the migrants who were badly hit by the sudden and severe lockdown26. The petitioners were Anjali Bhardwaj and Harsh Mander (Singh, 2020).

The petition pointed to the intense humanitarian crisis created by the lockdown. Its central demand was that the Centre and states must ‘jointly and severally’ ensure payment of minimum wages to all migrant workers within a week, for the entire period of the lockdown (Saxena, 2020). This should be agnostic to whether they were employed in an establishment, engaged by contractors or self-employed. The petition also demanded that this must be done by self-attestation and self-identification, because the state has no comprehensive record of employed workers, let alone casual and self-employed workers.

The petition also stated that many elements of the scheme merely front-load instalments of existing schemes, or provide for disbursement of cess funds already earmarked for welfare of particular sectors, or programmes.

In addition over a course of time and subsequent hearings, the petition also highlighted the following issues:

- entire starving families
- police brutality towards workers who attempted to leave their homes to access food in the feeding centres
- employers’ associations writing to the Court about their inability to pay wages
- landlords evicting their worker tenants because of their inability to pay rent.
- abysmal conditions of shelters for migrants in Delhi

Further details of the relief measures are reviewed in detail in the subsequent sections.

2.6 COVID RELIEF AND DEBT BURDEN

The IMF in its September 11 Fiscal Monitor report highlighted that fiscal expenditures prompted by the pandemic amounted globally to $11.7 trillion. This figure has been forecasted to push the total public worldwide debt to a record level of about 100% of the GDP, up from about 83.0% in 2019. This ratio, the IMF added, will stay with us until at least 2025.

IMF’s January 2021 Fiscal Monitor Update revealed that global public debt has risen to 98 per cent of GDP (higher by 14 percentage points from the same report, October 2019), primarily due to additional spending, forgone revenue and liquidity support.

With the additional burden of the pandemic and no end in sight, governments are filling this deficit with external borrowings. India’s public debt ratio, which remarkably remained stable at around 70 per cent of the GDP since 1991, is projected to jump by 17 percentage points to nearly 90 per cent because of increase in public spending due to COVID-19, the IMF said on 14th October 2020. The increase in public spending, in response to COVID-19, and the fall in tax revenues and economic activity, will make public debt jump up by 17 percentage points to almost 90 percent of GDP, they said.

About 6 months prior to this statement by IMF, on 28th April 2020, the Govt. of India announced that they had signed a 1.5 BN USD loan to support India’s response to COVID pandemic focusing mainly on immediate priorities such as disease containment and prevention, social protection of the poor and economically vulnerable sections of the society - especially women and disadvantaged groups.

COVID-19 Active Response and Expeditious Support (CARES) Programme was intended to support the government’s implementation of the emergency response program launched in March 2020. On 19th June 2020, the Govt. made an announcement of signing a 750 MN USD loan with Asian Infrastructure Investment Bank to further enhance and support the CARES pro-
The total amount of 2.25 BN against this program was being supported by:
- Asian Infrastructure Investment Bank (AIIB) - 1.5 BN USD (INR 114,511,500 THOUSAND)
- Asian Development Bank (ADB) - 750 MN USD (INR 56,249,000 THOUSAND)

The project was to be executed by the Department of Economic Affairs, Ministry of Finance, through various line ministries.

3. COVID RELIEF MEASURES AND IMPACT - AN ASSESSMENT

The Government of India (GoI) in March 2020, announced a series of wide-ranging fiscal and monetary measures, aimed at spurring growth and creating a self-reliant India. It rolled out three stimulus packages, amounting to INR 29.87 TN that is approximately 15% of the country’s GDP.

3.1 PRADHAN MANTRI GARIB KALYAN YOJANA (PMGKY)

Brief history of PMGKY

Pradhan Mantri Garib Kalyan Yojana was launched in April 2015, aiming to improve the living standard of the poor people especially those who are BPL through concrete government initiatives. The Programme’s intention was to alleviate poverty by engaging with the poor people through workshops as a skill improvement program.

The Pradhan Mantri Garib Kalyan Yojana, 2016 was a tailored Income Declaration Scheme with a black money declaration option from December 17, 2016 to March 31st 2017. Two weeks after demonetisation, in an effort to come down heavily on those finding ways around demonetisation, on November 28, a bill proposing the Pradhan Mantri Garib Kalyan Yojana (PMGKY) was introduced in the Lok Sabha and was subsequently passed in December 2016. It provided a window of opportunity for tax evaders to come clean with unaccounted wealth and black money in a confidential manner and avoid prosecution.

The funds mobilised from the PMGKY Income Declaration Scheme would be utilised to finance the welfare programmes for the poor which goes by the same name - Pradhan Mantri Garib Kalyan Yojana (PMGKY). Objective of the amendment was two pronged - First, that the Government should get additional revenue for undertaking activities for the welfare of the poor. Second, that the remaining part of the declared income legitimately comes into the formal economy. The deposited amounts were proposed to be utilised for the schemes of irrigation, housing, toilets, infrastructure, primary education, primary health, livelihood, etc. For this, the existing Pradhan Mantri Garib Kalyan Yojana would be modified as an antipoverty and development programme.

The scheme was not a success by the government’s own admission. “The response has not been so good. It is about Rs 5,000 crore of income declared in PMGKY,” Revenue Secretary Hasmukh Adhia said.

In October 2018, many portals that deal with taxes and finances published a government notification which barred any government official from publishing/sharing the details, including data of the PMGKY. Hence, no data was placed in the public domain by the government on the funds available under this scheme that had so generously committed to pro-poor causes.

PMGKY Structure

In this section, we look at different components of the Pradhan Mantri Garib Kalyan Package in detail to understand various facets of the measure and scheme. The existing structural lacunae and fragmented nature of the schemes make the Central Government sponsored PMGKY’s social protection programs work with existing government schemes (See image below). These schemes can be classified into Direct Benefit Transfers, In-Kind Transfers, Livelihood support, protection for low wage non agricultural workers, support for frontline healthcare workers. The schemes align to various ministries and follow a multi-channel system for execution.

The schemes in brief are captured below for reference:

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>MINISTRY</th>
<th>SCHEME NAME</th>
<th>SCHEME DESCRIPTION</th>
<th>BENEFIT MODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Ministry of Petroleum and Natural Gas</td>
<td>PM Ujjwala Yojana</td>
<td>PMUY is a central sector scheme that was launched in 2016 to safeguard the health of women and children by providing them with clean cooking fuel through deposit-free LPG connections. Under the scheme, the government provides one-time financial support of Rs. 1,600 towards the security deposit for an LPG cylinder, pressure regulator and installation charges to beneficiaries not having existing connections.</td>
<td>In Kind</td>
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<td></td>
<td>Ministry of Consumer Affairs, Food and Public Distribution</td>
<td>PDS is an in-kind food subsidy programme which provides food grains through Fair Price Shops (FPS) to poor and vulnerable people living below the poverty line. It is a centrally sponsored programme which is jointly implemented by the Central and state governments.</td>
<td>In Kind</td>
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<tr>
<td>3</td>
<td>Ministry of Agriculture and Farmers Welfare</td>
<td>Mahatma Gandhi National Rural Employment Guarantee Scheme</td>
<td>Livelihood Support</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Ministry of Agriculture and Farmers Welfare</td>
<td>The Pradhan Mantri Kisan Samman Nidhi Yojana is a central sector scheme with a budget allocation of Rs. 75,000 crore for FY 2020-21. The idea is to enable small landholders to buy various inputs for crop harvesting. It provides an unconditional cash transfer of Rs. 6,000 per family to all farmers who own land which is not more than two hectares according to land records. The money will be transferred in three tranches every four months just before the harvesting of each crop season.</td>
<td>Livelihood Support</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Ministry of Rural Development</td>
<td>The SHGs under the Deendayal Antyodaya Yojana — National Rural Livelihoods Mission have the objective of alleviating poverty by promoting diversified self-employment and skilled wage employment opportunities for the rural poor. It is a centrally sponsored scheme with the Centre and states contributing in a 60:40 ratio. In North Eastern and Himalayan states, the Centre contributes 90% of the funding. Central funding is allocated between states based on the states’ poverty ratios.</td>
<td>Livelihood Support</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Ministry of Finance</td>
<td>Pradhan Mantri Jan Dhan Yojana is a scheme for financial inclusion of the poor through opening bank accounts. The idea is to enable access to welfare payments directly through the cash transfer system. The scheme allows for the opening of a bank account with minimum account balance and provides other special benefits such as a life cover insurance of Rs. 30,000 and an overdraft facility of up to Rs. 10,000.</td>
<td>Cash Transfer</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Ministry of Rural Development</td>
<td>National Social Assistance Program</td>
<td>NSAP programme has three sub-components — Indira Gandhi National Old Age Pension Scheme (IGNOAPS), Indira Gandhi National Widow Pension Scheme (IGNWPS) and Indira Gandhi National Disability Pension Scheme (IGNDPS). There is no governing legislation for these schemes and they are funded entirely by the Centre. At present, senior citizens between the ages of 60 to 80 years receive a monthly pension of Rs. 200 and those above 80 years of age receive a monthly pension of Rs. 500. Widows and those with disabilities receive a monthly pension of Rs. 300</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Ministry of Labour and Employment</td>
<td>EPFO</td>
<td>The Employees’ Provident Fund has been in existence since the passing of the Employees’ Provident Funds &amp; Miscellaneous Provisions Act, 1952. This is a contributory scheme where the employer and employee contribute 12% of basic wages each towards the Fund.</td>
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<tr>
<td>9</td>
<td>Ministry of Labour and Employment</td>
<td>Building and Other Construction Workers’ Welfare Fund</td>
<td>This Fund was created under the Building and other Construction Workers (Regulation of Employment and Conditions of Service) Act, 1996 to provide support and assistance to construction workers. The Act applies to every establishment employing ten or more building workers in any building or other construction work for a period of 12 months. All construction workers between the ages of 18 to 60 years who have worked for a period greater than 90 days in a year are eligible to pay as beneficiaries. Registered workers have to pay a monthly contribution towards the fund as per rates decided by the state governments. In addition, state governments levy a 1% cess on construction cost and the proceeds are collected in the Fund.</td>
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<tr>
<td>10</td>
<td>Ministry of Health and Family Welfare</td>
<td>Insurance</td>
<td>The insurance scheme provides a personal accident cover of Rs. 50 lakh per insured person to healthcare workers, who are exposed to a high risk of contracting COVID-19 due to the nature of their work. The scheme covers loss of life due to COVID-19 and accidental death due to COVID-19 related duty. The scheme is valid for a period of 90 days starting from and including 30 March 2020 and is in addition to any other insurance cover that a beneficiary may be availing.</td>
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Support for frontline workers for combating COVID-19
3.1.1 INSURANCE SCHEME FOR HEALTH WORKERS

Relief Measure 1: PMGKY Insurance Scheme for Health Workers Fighting COVID-19 - covering 22 lakh health workers in Government Hospitals and Health Care Centers

Coverage: 2.2 MILLION HEALTH WORKERS

Money Spent: NA

As per the MOHFW, the accident scheme covers loss of life during COVID 19 and accidental death on account of COVID 19 duty.

As per the government notification, the following are the people who would be covered as part of the scheme:

- Public healthcare providers including community health workers, who may have to be in direct contact and care of COVID-19 patients and who may be at risk of being impacted by this.
- Private hospital staff and retired /volunteers /local urban bodies /contracted /daily wage /ad-hoc/outourced staff requisitioned by States/ Central hospitals/ autonomous hospitals of Central/ States/UTs, AIIMS and INIs/hospital of Central Ministries can also be drafted for COVID 19 related responsibilities.

The validity of the insurance policy is 90 days from March 30th, 2020 and was later expended upto 25th Sept 2020. As the COVID situation continued, the scheme was extended by another 6 months (180 days). INR 50 LAKHS will be paid to the claimant of the insured person. In addition to other documents and details, the claimant would also have to provide a Laboratory report certifying positive for COVID 19 if loss of life is on account of COVID-19. However, it is not required in case of Accidental loss of life on account of COVID-19 related duty. In its order dated 28 March 2020, the MoHFW earmarked the National Disaster Response Fund for meeting the funding requirements of this scheme.

On 3rd April, the MOHFW circulated the details of the scheme along with the claim forms and FAQs asking the details to be widely circulated.

Relief Assessment

It was clear that in this battle against the virus, the battle was being led by a large army of warriors - Doctors, nurses, health workers like ASHA, paramedics and technicians. It was one of the biggest challenges that the medical community globally has faced in the recent times. As they pulled in extra hours and put their professional duty ahead of the risks and hazard of being in contact with COVID patients, they were lauded, appreciated and their morale boosted by the whole country. But in the course of duty, many lost their lives.

No clarity in Numbers

On July 13, 2020, NIA claimed to have received 147 intimations and 87 claim documents. They had paid out 15, while 4 were approved for payment. 13 were under examination. 55 claims were found to be ineligible.

On 8th August 2020, the Indian Medical Association wrote to the PM, highlighting that 196 doctors had lost their life to Covid 19. 40% of them were general practitioners (GPs) as they were the first point of contact for fever, cold and cough and its treatment. In the letter the IMA requested him to ensure adequate care for doctors and their families who are a special risk group and extend the state-sponsored medical and life insurance facilities to doctors in all the sectors.

Dr R V Asokan, Secretary General, IMA, said the mortality rate among doctors due to COVID-19 has reached an “alarming proposition”.

On 26th August 2020, Dr. R V Asokan, in an interview with The Print stated that the number of doctors fatalities was now 273. “The mortality rate among private doctors is now 15 per cent while among government doctors it is 8 percent”. According to IMA’s findings, the mortality rate has been highest among general practitioners and neighbourhood doctors. Asokan said, “We had annexed the number of doctors killed with our letter to the Prime Minister. But when we saw that the letter had not evoked any response, we shared the names of the doctors with state governments, so that they could verify and help the families,” ....States like Tamil Nadu, Maharashtra, Karnataka and even Andhra Pradesh have been proactive and announced compensation, but the IMA doesn’t have any knowledge of families actually receiving compensation,” he added.

As on Sept 15th, of 282 claims received by NIA, 61 claims are processed and paid for. 156 claims were under examination by New India Assurance (NIA), in 67 cases claim forms were yet to be submitted, while 65 claims had been rejected. This data however does not tally with the central ministry data of death of 155 healthcare staff due to COVID.

As on Sept 17th, claims pending were 220. 212 claims did not have complete documentation and 8 claims were awaiting nominee details.

As on September 22nd, 2020, the status of claim processing 242 claims had been received by NIA, 62 claims had been settled and 130 were being processed, 50 were yet to come in from the states. This data in no way matched the above two numbers reported by the Ministry.

Doctor Who? - No central database on doctor fatalities

On September 16th, the IMA had slammed the center for having no central Government data. The body slammed the Centre for saying it does not maintain data about the number healthcare staff who were affected by and died from COVID-19, saying the admission amounts to “abdication of duty and abandonment of the national heroes who have stood up for our people”.

“The IMA finds it strange that after having formulated an unfriendly partial insurance scheme for the bereaved families to struggle with the ignominy of the government disowning them altogether stares at them,” it said.

On 19th Sept, 2020 The Wire reported on the lack of a central Government data being maintained by the health ministry on the health workers who had died or tested positive during COVID duty. This was based on Government’s response in the Lok Sabha (question posed by Rajya Sabha MP Birin Viswam). They did however have data on the number of persons seeking relief under the Pradhan Mantri Garib Kalyan Insuranc Package for Health Workers Fighting COVID-19. As on Sept 11, 2020, a total of
155 healthcare staff, including 64 doctors had died due to COVID as per the details of the scheme.

On Oct 2nd 2020, the IMA released a list of 515 doctors who had succumbed to the virus while treating patients. These were just allopathic doctors whose data had been collated through IMA’s 1746 branches. They felt the numbers could be much higher. The government, continued to maintain that there is no central database to provide exact number of doctors who lost their lives on line of duty. A statement in the parliament supported the gap with the reasoning that public health and hospitals come under states, so the Centre wasn’t maintaining any such database41.

They are irate over the figures presented in the Rajya Sabha by the union minister for health, family and welfare. As per him, only 162 doctors have lost their lives to COVID in India since the onset of the disease. As per IMA reports on Feb 4th, 2021 the correct figure is 734 of which 431 are GP who were the first point of contact for the people. That is an inexusable variance32.

No relief for the really affected

As per Question 7 in the FAQ published by the MOHFW, there is no age limit for the scheme. However, as per this case in court of a Navi Mumbai Doctor, the Union Government stated that only those health workers under the age of 65 & COVID duty were covered under the insurance scheme43.

Mumbai which was one of the most affected cities during the pandemic and had a very high caseload right from the start, has a sad story as far as their claims are concerned. As per Oct 26th, 2020, of the 125 claims forwarded to the insurer for processing, 77 have been rejected. Most of these are on the grounds of not meeting eligibility criteria as the insurer was not directly taking care of a Covid patient. 11 have been sanctioned and 37 were pending44. This is a sad situa-
tion, since the government’s Covid response extends well beyond hospitals — from the police personnel enforcing distancing regu-
lations to the workers handling the tonnes of biomedical waste from medical facilities — the army of Covid warriors is not comprised solely of healthcare staff.

If some are struggling to get hospitals to is-
sue the required documents, the claims of others are held up because of confusion over their eligibility, courtesy a set of riders buried in the fine print of the scheme. In some cases, even after all the documents have been submitted and vetted by health departments, the claim has been rejected by the insurance company45.

In the case of such competing claims, is the word of the hospital final? Since claims get forwarded to the insurance company — the state-owned New India Assurance is the im-
plementing agency of the scheme — by the state or the central government depending on the jurisdiction, do they conduct their own investigations?

Queries sent to the Delhi and the Central government seeking clarity on the process remained unanswered.

Many states have launched their own med-
ical insurance schemes for Covid warriors, in addition to the central government’s. In Maharashtra, different departments are in-
dividually overseeing insurance payouts for employees who die or are on leave due to COVID. In the home department, for example, is paying compensation to the families of police personnel, while the BMC is doing so for the staff on its rolls.

The BMC payout is only available for person-
nel who don’t receive the insurance sum under the PMGKY.

Deputy municipal commissioner (general administration) Milin Sawant said the BMC plans to award Rs 50 lakh compensation to all municipal employees who have died of Covid-19 and are not covered by the cen-
tral government scheme. The BMC has also promised a civic job to one family member of the deceased.

An official from the BMC general administra-
tion department said, “We were fighting for cer-
tain gray areas with the Centre — cases which they had rejected but we felt they should not have. I had mentioned the case of a security guard and a sewage cleaner at a Covid hospital. How can you say they will not be covered?”

“Since the Centre did not budge, we will ac-
commodate them now from our exchequer,” the official added.

It almost seems like the States will have to take care of their own.

Who cares for the care workers

ASHA workers are hailed as Covid war-
riors but only 62% have gloves, 25% have no masks. The survey was conducted by Oxfam India and its partner organisation to understand the working conditions of ASHA workers in four states — Uttar Pradesh, Odisha, Bihar and Chhattisgarh. A total of 306 ASHA workers were contacted over the phone for the survey46.

However, the survey reveals that only 38 per cent ASHA workers knew about the scheme. In the absence of the requisite knowledge about the scheme, claiming the insurance amount becomes difficult. There have been several reports in the media highlighting the troubles of the claimants. The govern-
ment needs to ensure that the interests of the frontline healthworkers are upheld since they are the people who are facing the virus and most vulnerable to the infection.

Based on the intimations received from the states under the Pradhan Mantri Garib Kaly-
an Package: Insurance Scheme for Health Workers fighting COVID-19, 174 doctors, 116 nurses and 199 healthcare workers have died due to this pandemic as on Feb-
22, 2021 as per Union Minister of State for Health Ashwini Choubey. This however does not provide clear breakdown of how many ASHA workers lost their lives. Going by IMA’s counter to this Govt data, there is a very high likelihood that there are gaps in data of ASHA workers fatalities as well47.

*An RTI with additional details including the claim status and payout details to the claim-
ants to date has been requested.

Conclusion

One would expect that while announcing a relief measure such as paying 22 lakhs to frontline workers, the government would also take care of the following:

- For those in the healthcare segment, the insurance scheme should ideally have been a health insurance with life cover. Many narratives of healthcare workers who passed, are those of desperate times struggling for hospital beds, treat-
ment costs and scampering for life sup-
port systems.
- Ensure coverage/support leaves out those in the fringes of the medical pro-
dression (hospital guards, waste collec-
tors, porters, lab assistants, hospital plumbers while not in direct contact for treat-
ment were in the high exposure segment)
- While the scheme is said to cover 22.15 lakh health workers, this seems to be grossly under numbered, especially if it includes private hospital staff and volun-
teeers drafted for COVID-related work.
- Even if the insurance coverage itself did not cover, have an arrangement with the States to back up and take care of those that the centre did not support or cover.
- Have a system to track and collate as-

sociated fatalities that ensue. This data would be critical not just to acknowledge the contribution of the healthcare com-

munity but also to understand the pat-
terns in data that would support future decision making for the government.
- The claims that come in need to go through a process of certification. The list of documents demanded by the
system from the claimant needs to go through a four level administrative system - the healthcare institution, the state system, the central system, the insurance company. The claim process is barely something an average citizen can navigate through (think elderly mother of an ASHA worker or an uneducated wife of a PHC worker) and even if they did, the administrative levels is so fraught with corruption on even regular days that in the midst of a pandemic, the need to cash in becomes even higher.

3.1.2 FREE FOOD GRAINS TO AFFECTED POPULATION

Relief Measure 2: Pradhan Mantri Garib Kalyan Ann Yojana (PMGKAY) providing free food grains to the affected population

Coverage: 800 million

Money Spent: 1,05,000 Crore

Implementation

The government distributed 30 million tonne of grains for free under PMGKAY during April-November 2020.

As per the government notification, the following are the details of the scheme:
- The Government of India would not allow anybody, especially any poor family, to suffer on account of non-availability of food grains due to disruption in the next three months.
- 80 crore individuals, i.e, roughly two-thirds of India’s population would be covered under this scheme.
- Each one of them would be provided double of their current entitlement over the next three months.
- This additional amount would be free of cost.

This subsidy was rolled out under the Garib Kalyan Ann Yojana Scheme, where 80 crore poor (two-third of population) beneficiaries would be covered, those who are already under the National Food Security Act, 2013 (i.e Antodaya Anna Yojana (AAY) and Priority Category Households (PCH)). These households would be entitled to receive 5 kg foodgrain (rice or wheat) per person per month free of cost. The scheme was initially rolled out for three months (April - June) however as the economic consequences of the pandemic stretched beyond the lockdown, it was extended till November. This entitlement of food grains under PMGKAY was in addition to their entitlement under NFSA - 35 kgs of food grains per month per AAY household and 5 kg of foodgrains per person per month for Priority Households & PHH.

The National Food Security Act (2013) provides coverage for upto 75% of the rural population and 50% of the urban population for receiving subsidised food grains. It provides food grains to two types of households – AAY households, which means the poorest of the poor, and priority households (PHH).

There are differences in coverage across regions in India. A report by NITI Aayog (2016) indicated that 32% of the beneficiaries were from urban and 68% from rural areas. This is roughly the same as the national population distribution. The higher rural coverage is explained by the concentration of AAY/Anna-purna beneficiaries in rural areas. However, given the current situation, transient poverty will rise in many urban poor households, who are not covered by PDS. This presents a case for a universalisation in the distribution of food grains, especially due to the lack of coverage of urban poor under PMGKY.

Stocking up for a rainy day

The food stock required to meet the operational stock needs (defined quarterly) based on the above government schemes and the strategic reserve for emergencies/shortfalls are held by the Food Corporation of India in its warehouses. These stocks are to be held based on the buffer stocking norms defined by the government - Foodgrains Stocking Norms (wef 22.01.2015) for Central Pool includes Strategic Reserve of 30 lakh tons of wheat and 20 lakh tons of rice. However, in the last few years, the government seems to have been hoarding stock in far excess of what is defined as the norm.

Figure 7: Surplus stocks above the stocking norms held by the Food Corporation of India, December 1, 2014 to May 1, 2020


The surplus stock held by FCI in the last 3 years has steadily increased. As on 1st May 2020, the stock of grains in the FCI warehouses was 87.8 Million Tonnes (including unmilled paddy and coarse gains)

All figures in Lakh Tonnes

<table>
<thead>
<tr>
<th>Year</th>
<th>Commodity</th>
<th>March</th>
<th>April</th>
<th>May</th>
<th>June</th>
<th>July</th>
<th>Aug</th>
<th>Sep</th>
<th>Oct</th>
<th>Nov</th>
<th>Dec</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Rice</td>
<td>309.76</td>
<td>322.39</td>
<td>285.03</td>
<td>274.44</td>
<td>271.71</td>
<td>253.40</td>
<td>211.95</td>
<td>192.61</td>
<td>167.92</td>
<td>146.40</td>
</tr>
<tr>
<td></td>
<td>Wheat</td>
<td>275.21</td>
<td>247.00</td>
<td>357.70</td>
<td>558.25</td>
<td>549.91</td>
<td>513.26</td>
<td>478.32</td>
<td>437.38</td>
<td>402.99</td>
<td>367.54</td>
</tr>
<tr>
<td>2020</td>
<td>Total</td>
<td>584.97</td>
<td>569.39</td>
<td>642.73</td>
<td>841.29</td>
<td>821.62</td>
<td>766.68</td>
<td>700.27</td>
<td>629.99</td>
<td>570.91</td>
<td>512.94</td>
</tr>
<tr>
<td></td>
<td>Unmilled Paddy</td>
<td>287.08</td>
<td>252.39</td>
<td>234.29</td>
<td>208.95</td>
<td>182.99</td>
<td>145.63</td>
<td>109.47</td>
<td>81.92</td>
<td>257.08</td>
<td>339.21</td>
</tr>
<tr>
<td></td>
<td>Coarse Grain</td>
<td>0.24</td>
<td>1.27</td>
<td>1.27</td>
<td>2.11</td>
<td>2.11</td>
<td>1.87</td>
<td>1.37</td>
<td>1.34</td>
<td>4.99</td>
<td>10.01</td>
</tr>
</tbody>
</table>

Source: https://fcigov.gov.in/stocks.php?view=46

About 5.5 Million MT food grains is required for a month under NFSA and other welfare schemes. When the government lifts grains from the Food Corporation, it reimburses them at the economic cost of this grain which includes the cost of procurement, storage and handling. Therefore when the government lifts a lower amount of grain from FCI, it pays lesser amounts to them, hence keeping their fiscal deficit low.

The number game

As per government’s notification, a total of 27.7 MT (million metric tonnes) had been transported as on 29th June. This does not translate to distribution. Post transport from the FCI Warehouse, the concerned State must then manage intra-state logistics and till the stock reaches the fair price shops.

According to a PIB release, 5 kg of cereals given free to 80 crore people from April to June worked out to 11.95 MT (million tonnes). Financial implications according to the report were: Rice - 10.43 MT (Procurement and Dist Cost Rs 37.27 + Interest and Storage Charges - Rs. 5.40) Wheat - 1.52 MT (Procurement and Dist Cost Rs 26.84
+ Interest and Storage Charges - Rs. 5.40
Pulses - .56 MT amounting to a total Financial Cost for the above is announced as 46 K Crores.

For the period July – November 2020, a PIB release stated 5 kg of cereals given free to 80 crore people from July - November would work out to 20 MT (million tonnes). Financially, the implication is Rice - 10 MT (Procurement and Dist Cost Rs 37.27 + Interest and Storage Charges - Rs. 5.40) and Wheat - 10 MT (Procurement and Dist Cost Rs 28.84 + Interest and Storage Charges - Rs. 5.40). Financial Cost for the above is announced as 76 K crore. The total requirement of cereals for April to November period works out to 32 MT (Million Tonnes) of cereals.

However, at 5 kgs per person for 80 crore people, the total requirement is 40 LMT. According to a fact checker website https://www.factchecker.in/ the official dashboard of the NFSA mentions as on August 2021, there are a total of 79.28 crore beneficiaries under the Act. The allocation would then be about 39.641 LMT each month. However, on not a single month since April 2020 has the amount of food grains distributed touched this number.

The website goes on to make the following observation about the numbers, “By this calculation, during Phase-I (April-June 2020) of PMGKAY, 118.92 LMT should have been allocated and distributed to the people. But, PMGKAY’s Annavitran platform showed that the Centre allocated 116 LMT, distributed 101 LMT. This means 87% of the food grains reached the people.

In the next phase, which was five months long (July-November 2020), 198.2 LMT should have been given, but Annavitran showed the Centre allocated 189 LMT of food grains and distributed 91% or 172 LMT. Again, in Phase-III, which was during May-June 2021 during the peak of the second-wave of COVID-19, 79.28 LMT should have been provided to the beneficiaries. But, the platform reflected that 74.14 LMT was allocated and 68.08 LMT or 91% was distributed. Lastly, during the ongoing Phase-IV (July-November 2021), 204 LMT have been allocated.”

This article goes on to describe the discrepancies in official data and issues with the calculation of beneficiaries

In another article in the Indian Express, it is reported that there was a misrepresentation of the expenditure on food grains to the poor by 50K crore. It estimates that the total burden on the exchequer from PMGKAY may be only in the region of Rs lakh crore to Rs 1.05 lakh crore, and not Rs 1.5 lakh crore as stated by the government.

Based on the FM’s announcement on March 26th, 2020 there would be 80 Crore people who would be given their existing entitlements under NFSA and they would also be given their entitlements under PMGKAY over and above that. Hence the grains distributed should have ideally doubled. However, based on the below chart, that does not seem to have happened.

<table>
<thead>
<tr>
<th>Commodity</th>
<th>March</th>
<th>April</th>
<th>May</th>
<th>April+ May</th>
</tr>
</thead>
<tbody>
<tr>
<td>NFSA PM-GKAY</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wheat</td>
<td>20.4</td>
<td>0.0</td>
<td>18.7</td>
<td>3.8</td>
</tr>
<tr>
<td>Rice</td>
<td>22.9</td>
<td>0.4</td>
<td>24.8</td>
<td>22.3</td>
</tr>
<tr>
<td>Coarse grain</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td>Total</td>
<td>43.2</td>
<td>0.4</td>
<td>43.5</td>
<td>33.7</td>
</tr>
</tbody>
</table>

Note: Data for May are up to May 22.
Source: https://annavitrancic.in/

There are two aspects to consider as far as food grains are concerned:

- Coordination
- Coverage

The first is concerned with how the Center and the States handled the procurement, Inter-State and Intra-State distribution, storage and then the distribution to the beneficiaries. The second is concerned with how accurate the beneficiary database is.

Coverage
In the PMGKAY, one of the most important components of the relief package announced by the government, only 55.5 lakh tonnes of grain were distributed until May 22.

Taking distribution of grain under both the PMGKAY and the National Food Security Act, in April and May (until May 22), only 132.7 lakh tonnes of grain (40.9 lakh tonnes of wheat and 91.7 lakh tonnes of rice) were distributed by the government.

Not only was the grain provided through PMGKAY was far less than what was promised, a complete lack of planning and haphazard decision-making also resulted in delays and large-scale exclusion in distribution of the grain. In several states, particularly in the month of April, households only received the usual amount of grain and no additional free grain was provided by the ration shops.

There is some evidence that a significant amount of grain released through PMGKAY has not reached the beneficiaries. Several reports in the India’s Villages during the Covid-19 Pandemic series recorded that, although households had received their usual rations, they had not received the extra grain that was supposed to have been provided.

A survey conducted by the Dalberg Global Development Advisors in the second week of April found that 43% of households with Antyodaya or Below Poverty Line cards had not received free rations.

A survey of 1,737 rural households in three states conducted by Mobile Vaani, a community radio service, found that 89% of respondents in Bihar, 63% in Jharkhand and 69% in Madhya Pradesh had not received free rations (through PMGKAY or state-level schemes).

By Aug 7th, 2020, the Food Minister Ram Vilas Paswan told journalists that almost four out of ten people dependent on free food from the Centre did not receive their July allocation under a special scheme to help tide over the coronavirus (COVID-19) crisis. He blamed the States for their failure to reach the beneficiaries.
to distribute the free grains and pulses.

11 States and Union Territories did not carry out any distribution at all under the (PMGKAY) in India, the first month of the extended scheme. In the first phase, from April to June, about 95% of the 61 crore beneficiaries received their grain allocation. In July, that dropped to just 61%, according to an official statement. Only 6% of the free chana has been distributed

As of September 2020, only 33% of free food grains and 56% of free grains allocated under the package reached the beneficiaries, according to the data released by the Ministry of Consumer Affairs, Food and Public Distribution.

**Starving Migrants**

Of the 8 lakh tonnes food grains (rice and wheat) allocated for migrants, 6.38 lakh tonnes (80%) was taken by the states and Union Territories but only 2.64 lakh tonnes (33%) could be distributed to beneficiaries in four months (May-August).

Among the states, Gujarat took about 88% of the allotted food grains under this scheme, but distributed only 1%. At least 26 out of 36 states and Union Territories have taken 100% of the allotted food grains, but only Bihar, Chhattisgarh, Nagaland and Odisha reported 100% distribution of these grains.

The data from the Food Ministry showed that out of 29,132 tonnes of the gram allocation, states and Union Territories distributed about 16,323 tonnes (56%) till August 31. Only Delhi and Manipur have reported 100% distribution of gram.

Chinmay Tumbe, a faculty member at IIM Ahmedabad estimates that 30 million interstate migrants returned home between mid-March and early June, or around 15–20 per cent of the workforce, while Amitabh Kandu, Distinguished Fellow, Research and Information Systems for Developing countries, estimates is 22 million (Chishti, 2020).

The Economic Survey of 2017 placed the numbers of interstate migrants at 60 million. Estimates by scholars vary widely, some pegging the numbers between 40 to 150 million (Chishti, 2020). With such varying degree of numbers for this critical mass of labour that powers our cities and economy, how did the government estimate what the food grains required for them is?

**Coverage impacted by errors in beneficiary data**

India continues to rely on data from States and some Pan India studies (quite outdated) for information on coverage. Government's think tank NITI Aayog conducted an evaluation of the PDS and its role in food security in India in 2016. It used two rounds of the India Human Development Survey (IHDS) of 2004-05 and 2011-12. According to the study, 13.9% of the households did not have ration cards. Bureaucratic difficulties were recorded as the single most important reason for household not having a card. But economists Meghana Mungikar, Jean Drèze and Reetika Khera estimated that 108.4 million people in India are excluded from the PDS (Agarwal, 2020).

A study conducted by NCAER across six states in 2015 showed there is significant variation in the regional spread of coverage errors. Hilly (94%) and southern (93.2%) regions of India have better coverage than north central (78.7%) regions. Based on state-specific criteria and SECC, 2011, the study also calculated estimates of errors of inclusion and exclusion.

Table 2 provides the magnitude of errors across states. According to this survey, exclusion errors, which arguably are the more serious of the two, were the least for Chhattisgarh (2%) and highest for Uttar Pradesh (36%). Given that Uttar Pradesh has the largest population, a 36% exclusion error will affect a very large number of poor households. Thus, under PMGKY, particular focus on more populous states, with more food and grain to be sent there than otherwise indicated, would benefit the population and reduce exclusion errors. Identifying the beneficiaries will still be a challenge but free distribution of ration would be a solution to have less people being excluded. Additionally, the current estimates of state-wise PDS coverage are based on the 2011 Census population. Thus, the number of households eligible for ration cards could be more. Migrant labourers and the homeless who are not registered under the PDS scheme might be excluded.

Given that states handle PDS implementation, they could be asked to take care of such anomalies and assume loss of efficiency in areas where identification is difficult. This means transferring extra quintals of grain to areas where there is a high risk of identification errors and consequently exclusion is high targeting of the scheme could be poor due coverage as highlighted earlier.

**Wastage**

There has been an attempt made to understand the true picture behind wastage of food grains in the report <i>COVID19 Lockdown: Impact on Agriculture and Rural Economy</i>, published by the Society for Social and Economic Research, New Delhi. When this data and analysis was published by Scroll in their article <i>India lets 65 lakh tonnes of grain go to waste in four months</i>, even as the people went hungry, they got a response from Sudeep Singh, Executive Director (Quality Control), Food Corporation of India, stating that the report and hence the article made a “blatantly unfair interpretation of the actual stock position and doesn’t do justice to the performance of the Food Corporation of India.” His contention is with the interpretation of FCI data on “not readily issuable” stock of food grains. He clarified that a large quantity of stock at any point is either in the mandies and yet to be transported or in transit post procurement and before reaching the warehouses. Hence this number was not accuate to be classified as wastage.
As of May 1, 60.5 lakh tonnes of wheat and 11.3 lakh tonnes of rice held by government was not “readily issuable” (Table 5, above). This included grain that was sub-standard, partially spoilt (what the Food Corporation considers as partially salvageable) or completely damaged (non-issuable).

The grain that was not “readily issuable” constituted about 11% of total stock of rice and wheat held by public agencies.

The authors of the report countered FCI’s statement with the following point: It is not clear as to why FCI clubs damaged grains with grains in transit. Accessing data is difficult since the government does not present it in a single location and instead the authors had to cull out the data from multiple sources.

Ground Reality
Governments across the world have failed to prevent a hunger crisis that is reaching monumental proportions. Globally, as many as 132 million more people than previously projected by the United Nations could go hungry in 2020. The total increase for this year could be more than triple any this century, even at a time of ample food supplies.

Table 5: Grain in central pool that was not readily issuable, September 1, 2019 to May 1, 2020 (lakh tonnes)

<table>
<thead>
<tr>
<th>Date</th>
<th>Wheat</th>
<th>Rice</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>01.09.2019</td>
<td>3.61</td>
<td>3.51</td>
<td>7.12</td>
</tr>
<tr>
<td>01.11.2019</td>
<td>2.47</td>
<td>3.91</td>
<td>6.38</td>
</tr>
<tr>
<td>01.01.2020</td>
<td>2.83</td>
<td>4.34</td>
<td>7.17</td>
</tr>
<tr>
<td>01.05.2020</td>
<td>60.48</td>
<td>11.33</td>
<td>71.81</td>
</tr>
</tbody>
</table>

Note: The grain that is not readily issuable includes grain that is below rejection limit (poor quality), grain from which a part can be segregated nd salvaged for human consumption, and grain that is not fit for human consumption at all. Some grain may also be excluded from readily issuable stocks because of being in transit.

Source: Food Corporation of India, and Department of Food and Public Distribution

Between April and July, there were around 250 documented deaths due to starvation, distress and exhaustion. (https://www.nationalheraldindia.com/india/1571-tonnes-of-food-grains-wasted-between-april-and-september-due-to-covid-19-lockdown).

The Railway Protection Force reported that at least 80 people died of dehydration or hunger on these harrowing train journeys (Dutta, 2020).

In a country that boasts of one of the largest food safety programs in the world, this is a tragedy beyond comprehension. But the reality is that the program is not without major gaps. The on ground stories are plenty - some told, many untold. Economic Times highlights the story of Nafisa, who lost her 4 month old infant. Hardly having any food herself to eat, she was unable to breastfeed her young who eventually succumbed to cruel death. Nafisa who is from the Banda district of Uttar Pradesh comes from one of the largest states in the country with perhaps the largest exclusion error in the beneficiary database.

“Nobody is listening to us,” says 24-year-old Nafisa, recounting how she applied in vain time and again for the ration card that would help feed her family, she broke down in tears. “If we had the card, at least we could feed our child.”

There are thousands of pending applications in the rural Banda district, according to one of the officials. The majority of those applicants should technically be granted approval based on the food law, but because local quotas are already filled, they are usually rejected or left in limbo. Only when someone who’s already enrolled in the program dies or is otherwise deleted from the list does a spot open to issue a new card, the officials said.

The SWAN report also includes some startling findings of a survey based on the distress calls received that 80% (of 5,911 people) had not received any rations from the government. This despite the fact that it has been a month since the finance minister announced free rations (5 kg of grain and 1 kg of dal) per person for 8 crore migrants.

India’s public distribution system, which currently holds nearly 100 million tonnes of food grain stocks, could have been used to feed the newly hungry. But only small amounts have been released for free distribution even as evidence of starvation grows, and this parsimony has been compounded by the obscurity of selling some food stocks to convert into ethanol for making hand sanitisers.

The swift and precipitous fall of millions into acute food insecurity and hunger within just days of the lockdown resulted from India’s badly broken food security nets, despite progressive Supreme Court rulings recognizing the fundamental right to food, the National Food Security Act, 2013, and a vibrant food rights people’s campaign. The Global Hunger Index (GHI) Report 2019 ranked India at 102 out of 117 countries, and recorded that over a third of India’s children are stunted and a fifth suffer from wasting.

3.1.3 CLEAN COOKING FUEL TO AFFECTED POPULATION

Relief Measure 3: PM Ujjwala Yojana - Providing cooking gas free of cost for three months to poor families covered under Ujjwala Yojana

Coverage: 80 million

Money Spent: 9670.41 crores

Implementation: 13,06,87,807 Refills against PMGKY advance given to beneficiaries

In order to provide clean cooking fuel to every poor household, especially in rural areas, the Government launched “Pradhan Mantri Ujjwala Yojana” on 01.05.2016 to provide deposit-free LPG connections to 5 crore women belonging to the Below Poverty Line (BPL) which was subsequently revised in Feb 2018 to target 8 crore households by 2020. The scheme covers cash assistance upto Rs. 1600/- for providing new LPG connection and this cash assistance is provided by the Central Government. The beneficiary bears the cost of hot plate and purchase of the first refill.

While the scheme seems to have had reasonably good adoption from inception, one of the findings that emerges with many reports is that a large number of connections over time became dormant. The reason cited for the non-usage is economic. Many of the households are unable to afford the cost of LPG refill and resort to traditional wood fire cooking due to easy availability of traditional fuel viz. Cow dung, firewood, biomass etc. The current government has stopped giving cylinders at subsidised rates. Under the direct benefit transfer, now people have to refill the cylinder first and then a subsidy amount comes into their bank account later.

A survey of 1,662 beneficiaries, conducted between April 2016 and December 2018, showed that 35.44% reverted to traditional fuels.
were marginal farmers. While the sample is not representative of Indian villages, the survey shows the problem of shifting to LPG. (April 12, 2021: Deccan Herald - LPG Subsidy: Why only for the rich?)

When the member of parliament from Kozhikode (Kerala) representing Indian National Congress, MK Raghavan raised the concerns about the falling utilization in Lok Sabha in September 2020, Dharmendra Pradhan, cabinet minister for Petroleum and Natural Gas replied that each beneficiary of the Ujjwala scheme has refilled an average 3.1 LPG cylinders. However, experts said this is the white elephant in the room that the government willingly overlooks.

In a study conducted by a Gurugram NGO - Sehgal Foundation, of 605 households in Samastipur district of Bihar, results clearly showed that inspite of having LPG connection, 40% end up using firewood. Even though there is a preference for it, many cannot afford to pay for it. Among the respondents, 81.8% were landless and 11.2% were marginal farmers. While the sample is not representative of Indian villages, the survey shows the problem of shifting to LPG. (April 12, 2021: Deccan Herald - LPG Subsidy: Why only for the rich?)

Of the 3.18 crore PMUY consumers who had an LPG connection for one year or more as of December 31, 2018, 17.4% never ordered a second refill and 33.15% ordered only 1-3 refills per year indicating that more than half the beneficiaries consumed less than the national average of 3.21 refills.

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since not all rural and poor households - the principal beneficiaries of the Ujjwala scheme - consume one cylinder every month, some could not avail their full quota of three cylinders. Therefore, the government had extended the period for availing the free cooking gas cylinders. Across India, less than 50 per cent have received cylinders un-

3.1.4 JAN DHAN YOJANA

Relief Measure 4: Jan Dhan Yojana - Providing to 20.6 crore women Jan Dhan account holders in three monthly instalment of Rs 500 each

Coverage: 20.6 Crore

Money Spent: Rs 30,925 crores

An assessment survey in 50 districts across eight states, Andhra Pradesh, Bihar, Guja-
rat, Karnataka, MP, Maharashtra, Odisha and Rajasthan, conducted by the Rapid Community Response to COVID-19, a na-
tional-level coalition of 20-plus civil society organisations, found that nearly 90 per cent of the respondents had an active Jan Dhan account. However, only 66 per cent of them said they had received the cash in their ac-
counts. There are other issues too. PMGKY mandates that only women account-holders get the money. The exclusion of men de-
nies the benefit to many families that need the assistance. Even the coverage among women is not uniform. A study published in April by the Yale Economic Growth Centre on the COVID-19 Pradhan Mantri Jan Dhan Yojana (PMJDY) cash transfers claims that more than 50 per cent women below the poverty line are yet to even get a Jan Dhan account

Another provision that saw partial success was the free distribution of LPG cylinders through the Pradhan Mantri Ujjwala Yojana (PMUY). While in Telangana, the sales of domestic gas cylinders increased by 10 per cent in March and 29 per cent in April y-o-y, in Kerala, less than 8 per cent of the 212,381 families listed under PMUY received free cooking gas cylinders. Across India, less than 50 per cent have received cylinders un-
der the scheme between March 26 and May 6th.

3.26 BN USD. 2.5 BN of that came in during

4.1 LENDING AGENCY MONITORING

Since the lockdown in March 2020, 2.25 BN USD were approved and disbursed to India. There are no monitoring reports on AIB or ADB’s website when we placed the RTI with the DEA on XX/xx/XXXX. When we checked again many times during the writing of this report, it was not made available in any pub-
lic domain. Where is the accountability and transparency?

Access to Information: No documents on pub-
lic domain have been accessible by this team during the writing of this report. AIB, ADB or DEA did not publish the monitoring reports on their website. We were finally able to secure the monthly and quarterly monitoring reports from the DEA on the XX/xx/XXXX through an RTI placed to them requesting these reports.

4.2 EXTERNAL DEBT, EXTENDED

LOCKDOWN

In the 69-70 days lockdown period, India had loans flowing into the country to the tune of 3.26 BN USD. 2.5 BN of that came in during the 1st and 2nd lockdown itself.

The question to ponder on here is, why was there a scramble of MDBs and IFIs who came withdraw each month. Beneficiaries cited account dormancy due to infrequent usage and limited access to banks in rural areas as amongst the most common gaps in last-mile connectivity, according to rapid phone inter-
views by Indus Action, a non-governmental organisation focused on policy implementa-
tion.

To assess the extent to which vulnerable cit-
zens received social protections under the Pradhan Mantri Garib Kalyan Yojana, Indus Action conducted a survey between April 6 and May 30 covering 5,242 families across 11 states. Although Indus Action surveyed fami-
lies in both urban and rural areas, the sample was skewed towards respondents in metros. These families were from socially and eco-

nomic disadvantages backgrounds. The survey assessed beneficiaries’ access to ration, healthcare, employment status and government schemes. Only about 59% of the 2,233 women eligible for Jan Dhan reported that they had received the benefit. While 34% said they did not receive the transfer, 7% said they did not know if they received the benefit.

4. CONCLUDING NOTES

India as a country presents unique challeng-
es across diverse states, health inequalities, widening economic and social disparities, and distinct cultural values. In a country where coverage and implementation of welfare pro-
grams and social protection schemes is a se-

cessful issue, can lending bodies afford to be slack about transparency and monitoring?

Some questions that this report gives rise to is:

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Did it allow India the luxury of a continued lockdown? It is evident from the current wave 2 that India has not got its Pandemic Preparedness Plan in place. No adequate medical infrastructure was created while it had ample time between the two waves.

India is currently ruled by a government which does not follow the course of democracy as enshrined in the Constitution, even during ‘normal’ times. Surely in the name of the extraordinary situation that the world was going through, no democratic processes were followed to seek these loans. MDBs on the other hand are not too concerned with conducting due diligence on this since these institutions themselves are not committed to principles of democracy. Groups working towards financial transparency in the country have time again highlighted how decisions on loans from MDBs have historically been kept out of parliamentary processes. The State has further entrenched this practice in the name of the pandemic.

On the other hand, the narrative in the previous section stands testimony that people had to struggle to receive relief measures from the government. Our experience in Bengaluru was not until civil society organisations did not put pressure on the state government, no relief measures were announced. One wonders then what were the plans of the government to raise these loans from MDBs.

4.3 LACK OF TRANSPARENCY AND DATA AVAILABILITY

On 24th March, the day PM Modi was to make an announcement to the nation of 1.3 BN people that they were going to be locked down for the next 21 days, he also invited 20 owners and editors from the Indian mainstream media to meet with him. In that meeting, he asked them to publish positive stories on COVID-19. In the latest annual report released by Freedom House (US Government funded NGO that studies political freedom across the world) called “Freedom in the World 2021 - Democracy under siege”, India has been downgraded to “partly free”. The report states:

“India, the world’s most populous democracy, dropped from Free to Partly Free status in Freedom in the World 2021. The government of Prime Minister Narendra Modi and its state-level allies continued to crack down on critics during the year, and their response to COVID-19 included a ham-fisted lockdown that resulted in the dangerous and unplanned displacement of millions of internal migrant workers. The ruling Hindu nationalist movement also encouraged the scapegoating of Muslims, who were disproportionately blamed for the spread of the virus and faced attacks by vigilante mobs. Rather than serving as a champion of democratic practice and a counterweight to authoritarian influence from countries such as China, Modi and his party are tragically driving India itself toward authoritarianism.”

It is of grave concern that the Government and the PM attempted to diplomatically muzzle the media through the meeting on the 24th. Even in a pandemic, is it not required that the media continue to provide public news & knowledge and provide fodder for debate on the many profound and widespread forms of exclusion, injustice and exploitation in Indian society? Are the 1.3 BN people of India to be served a sugar coated pill of diluted news, indifference and media deceit? Is it not the job of the media to tell the truth no matter what?

This lack of transparency is further established in our attempts to ask questions through RTIs of the Department of Economic Affairs and various ministries on the 2.25 BN USD and its budgetary allocations and utilizations, not a single department was able to answer our questions regarding the same.

The government has continued to be unaccountable to the people ever since the pandemic hit India. From suppressing numbers of those infected to the number of deaths, to the number of people who received benefits from welfare schemes and their nature. During the pandemic, the image in the mind is of a dictator who is carefully styled, making grand but empty statements and a population which had been held captive in their homes, while the pandemic itself was communalised. Any attempts to raise voices against this were silenced either through a communal narrative or invoking the National Disaster Management Act. While the primary focus on much of the country was on survival, the state went ahead and put the country to ransom by taking on the loans from MDBs and IFIs for government programmes, which were themselves not very effective, worsening and already fast emerging financial crises in the country after demonetisation and implementation of the GST regime, bringing the country to a point where the rulers are implementing the National Monetisation Pipeline, which would effectively hand over national assets to private players whose motivation is private profit rather than welfare and rights of the people.