



		Pover	rty	Multi Dimensional Poverty Index		
3 dimensions		obal MDPI indicators		National MDPI 12 indicators		
(1/3) Health	<ul> <li>(1/6) Nutrition</li> <li>(1/6) Child mortality</li> </ul>		<ul> <li>(1/6) Nutrition</li> <li>(1/12) Child &amp; adolescent mortality</li> <li>(1/12) Antenatal care</li> </ul>			
(1/3) Education	<ul> <li>(1/6) Years of schooling</li> <li>(1/6) School attendance</li> </ul>		<ul> <li>(1/6) Years of schooling</li> <li>(1/6) School attendance</li> </ul>			
(1/3) Living standard	<ul> <li>(1/18) Sanitat</li> <li>(1/18) Drinkin</li> <li>(1/18) Electric</li> </ul>	(1/18) Cooking fuel (1/18) Sanitation (1/18) Drinking water (1/18) Electricity (1/18) Housing		<ul> <li>(1/21) Cooking fuel</li> <li>(1/21) Sanitation</li> <li>(1/21) Drinking water</li> <li>(1/21) Electricity</li> <li>(1/21) Housing</li> <li>(1/21) Assets</li> <li>(1/21) Bank account</li> </ul>		
<ul> <li><u>Global MDPI:</u> by <u>UNDP</u> and <u>OPHI</u> (Oxford Poverty and Human Development Initiative)</li> <li><u>National MDPI:</u> by NITI + UNDP + OPHI (It is based on NFHS-4)</li> <li>Measures <u>incidence</u> (number of people) as well as <u>intensity</u> of poverty</li> </ul>						
<ul> <li>Measures incidence (number of people) as well as intensity of poverty</li> <li>Attempts to define Poverty         <ul> <li>1901: Dadabhai Naoroji book 'Poverty and the Un-British Rule in India'</li> <li>Planning Comm Working Group in 1962</li> <li>Dandekar and Rath in 1971</li> <li>Alagh Committee in 1979</li> <li>Lakdawala Committee in 1993</li> <li>Tendulkar Committee in 2009</li> <li>Rangarajan Committee in 2014.</li> </ul> </li> <li>Prelims 1996         <ul> <li>Assertion (A): Though India's national income has gone up several fold since 1947, there has been no marked improvement in the per capita income level.</li> <li>Reason (R): Sizeable proportion of the population of India is still living below the poverty line. In the context of the above two statements which one of the following is correct?</li> <li>(a) Both A and R are true and R is the correct explanation of A</li> <li>(b) A is false but R is false</li> <li>(c) A is false but R is false</li> <li>(d) A is false but R is true</li> </ul> </li> </ul>						
Poverty gap (poverty line) - (average income of poor)						
Prelims 1994         To know whether the rich are getting richer and the poor getting poorer, it is necessary to compare         (a) wholesale price index over different periods of time for different regions         (b) distribution of income of an identical set of income recipients in different periods of time         (c) distribution of income of different sets of income recipients at a point of time         (d) availability of foodgrains among two sets of people, one rich and other poor, over different periods of time						
•	read I forget, I see I remember See explanation of this					
Prelims 2022 Cur	rrent Affairs	Society		Page-03 © All Inclusive IAS		

State of World Population report by UN Population Fund		Popul	ation	India	l <mark>ian age</mark> 28, China & USA 37 Europe 45, Japan 4	
Registration of Births & Death ActRegistration of births, deaths, sCitizen must inform to registratRegistrarsare appointed for ea	tillbirths i r within <mark>21</mark>	L days of the	e event	ayat, etc) <u>by State g</u>	ovt	
<ul> <li><u>Registration System</u></li> <li>continuous, permanent, compulsory recording of births, deaths, stillbirths.</li> <li>Implemented by States; RGI coordinates &amp; unifies</li> </ul>			Some initiatives for Population Control 1952: National Family Planning Program 2000: National Population Policy 2017: Mission Parivar Vikas: launched in 2017; • for 146 districts having TFR > 3			
<ul> <li>Registrar General of India</li> <li>1961, MHA</li> <li>conduct and analyse result of demographic surveys including Census and Linguistic Survey</li> </ul>			<ul> <li>Promotional activities like <u>Saas bahu</u> <u>sammelans</u>, <u>Nayi Pehel Kits</u>, etc.</li> <li>Population changes due to Increase: Birth, Immigration Decrease: Death, Emigration</li> </ul>			
Reason for population explosion ✓ Lack of social progress	on			Peak		
X Caste X Religion X Region		World	2020 780 crore		2100 e 879 crore	
1961-1971 2001-201	1	India	138 crore			
Kerala 26.3% 4.86%		TFR	World: 2.3		World: 1.66	
Bihar 20.9% 25%			India : 2.	1	India : 1.29	
demonstration and a second state of		aphic trap				
dependent population. India: 2005-2050	🛛 (High	birth rate) +	? High popul	rate) = high populat ation → Poverty →	-	
	<ul> <li>□ (High</li> <li>□ Why c</li> <li>■ Why c</li> <li>■ G</li>     &lt;</ul>	birth rate) + called 'trap'	? High popul		Person	
<ul> <li>India: 2005-2050</li> <li>PwD</li> <li>Persons with Disabilities Act, 201</li> <li>PwD means 40% of more disat</li> <li>Increased reservation:         <ul> <li>Higher education 3%</li> <li>Govt jobs 3% → 4%</li> <li>Right to free education for 6-18</li> <li>Increased list of disabilities fro</li> <li>Funds at National and State level</li> <li>Special courts to be designated</li> </ul> </li> <li>Sugamya Bharat Abhiyan (2015)         <ul> <li>aka Accessible India Campaign</li> <li>Ministry of Social Justice &amp; Emel</li> <li>Disabled friendly infra, transport</li> </ul> </li> </ul>	<ul> <li>□ (High</li> <li>□ Why c</li> <li>○ Why c</li> <li>6</li> <li>ility</li> <li>→ 5%</li> <li>8 age m 7 to 21 /el</li> <li>4 in each d</li> <li>powermenene</li> </ul>	birth rate) + called 'trap' listrict nt ses, etc.	P High popul	ation → Poverty → vsical Disability a. Locomotor Disability i. Leprosy Cured ii. Cerebral Palsy iii. Dwarfism iv. Muscular Dyste v. Acid Attack Vic b. Visual Impairment i. Blindness ii. Low Vission c. Hearing Impairment	High population Person rophy tims g e Disability sabilities	
<ul> <li>India: 2005-2050</li> <li>PwD</li> <li>Persons with Disabilities Act, 201</li> <li>PwD means 40% of more disat</li> <li>Increased reservation:         <ul> <li>Higher education 3% →</li> <li>Govt jobs 3% → 4%</li> <li>Right to free education for 6-18</li> <li>Increased list of disabilities fro</li> <li>Funds at National and State lete</li> <li>Special courts to be designated</li> </ul> </li> <li>Sugamya Bharat Abhiyan (2015)         <ul> <li>aka Accessible India Campaign</li> <li>Ministry of Social Justice &amp; Em</li> <li>Disabled friendly infra, transport</li> </ul> </li> </ul>	<ul> <li>□ (High</li> <li>□ Why c</li> <li>○ Why c</li> <li>6</li> <li>ility</li> <li>→ 5%</li> <li>8 age m 7 to 21 vel</li> <li>4 in each d</li> <li>powermenort, websit</li> <li>with Disab</li> </ul>	listrict nt ees, etc. pilities	<ul> <li>? High popul</li> <li>1. Phy</li> <li>2. Inte</li> <li>3. Me</li> </ul>	ation → Poverty → vsical Disability a. Locomotor Disability i. Leprosy Cured ii. Cerebral Palsy iii. Dwarfism iv. Muscular Dystr v. Acid Attack Vic b. Visual Impairment i. Blindness ii. Low Vission c. Hearing Impairment i. Deaf ii. Hard of Hearin d. Speech and Languag llectual Disability a. Specific Learning Dis b. Autism Spectrum Dis ntal Behaviour (Mental II ability caused due to-	High population Person ophy tims g e Disability sabilities order iness)	
<ul> <li>India: 2005-2050</li> <li>PwD</li> <li>Persons with Disabilities Act, 201</li> <li>PwD means 40% of more disat</li> <li>Increased reservation:         <ul> <li>Higher education 3%</li> <li>Govt jobs 3% → 4%</li> <li>Right to free education for 6-14</li> <li>Increased list of disabilities fro</li> <li>Funds at National and State level</li> <li>Special courts to be designated</li> </ul> </li> <li>Sugamya Bharat Abhiyan (2015)         <ul> <li>aka Accessible India Campaign</li> <li>Ministry of Social Justice &amp; Em</li> <li>Disabled friendly infra, transport</li> </ul> </li> <li>Convention on Rights of Persons India ratified it? Yes, in 2007</li> <li>Biwako Millennium Framework in the second second</li></ul>	<ul> <li>□ (High</li> <li>□ Why c</li> <li>○ Why c</li> <li>6</li> <li>ility</li> <li>→ 5%</li> <li>8 age m 7 to 21 /el</li> <li>4 in each d</li> <li>powermenort, websit</li> <li>with Disab</li> <li>s related t</li> </ul>	listrict nt ees, etc. pilities	<ul> <li>? High popul</li> <li>1. Phy</li> <li>2. Inte</li> <li>3. Me</li> </ul>	ation → Poverty → vsical Disability a. Locomotor Disability i. Leprosy Cured ii. Cerebral Palsy iii. Dwarfism iv. Muscular Dyste v. Acid Attack Vice b. Visual Impairment i. Blindness ii. Low Vission c. Hearing Impairment i. Deaf ii. Hard of Hearin d. Speech and Languag llectual Disability a. Specific Learning Dis b. Autism Spectrum Dis htal Behaviour (Mental II ability caused due to- a. Chronic Neurological i. Multiple Sclero ii. Parkinson's Dis	High population Person ophy tims g e Disability sabilities order hess) Conditions such as-	
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<ul> <li>India: 2005-2050</li> <li>PwD</li> <li>Persons with Disabilities Act, 201</li> <li>PwD means 40% of more disate</li> <li>Increased reservation:         <ul> <li>Higher education 3%</li> <li>Govt jobs 3% → 4%</li> </ul> </li> <li>Right to free education for 6-13</li> <li>Increased list of disabilities fro</li> <li>Funds at National and State lete</li> <li>Special courts to be designated</li> <li>Sugamya Bharat Abhiyan (2015)</li> <li>aka Accessible India Campaign</li> <li>Ministry of Social Justice &amp; Em</li> <li>Disabled friendly infra, transport</li> <li>Convention on Rights of Persons</li> <li>India ratified it? Yes, in 2007</li> <li>Biwako Millennium Framework i</li> <li>Census 2011 2.68 crore; 55% ard</li> <li>Article 41: State shall make proceducation and public assistance</li> <li>7<sup>th</sup> Schedule: relief for disabled</li> </ul>	<ul> <li>□ (High</li> <li>□ Why c</li> <li>○ Why c</li> <li>6</li> <li>ility</li> <li>&gt; 5%</li> <li>8 age</li> <li>m 7 to 21</li> <li>yel</li> <li>in each d</li> <li>powermen</li> <li>ort, websit</li> <li>with Disab</li> <li>s related t</li> <li>e literates</li> <li>vision for</li> <li>e of disable</li> <li>and</li> </ul>	birth rate) + called 'trap' listrict nt ces, etc. pilities co? PwD work, ed	P High popul 1. Phy 2. Inte 3. Me 4. Dis 5. Mu	ation → Poverty → vsical Disability a. Locomotor Disability i. Leprosy Cured ii. Cerebral Palsy iii. Dwarfism iv. Muscular Dystr v. Acid Attack Vic b. Visual Impairment i. Blindness ii. Low Vission c. Hearing Impairment i. Deaf ii. Hard of Hearin d. Speech and Languag flectual Disability a. Specific Learning Dis b. Autism Spectrum Dis ntal Behaviour (Mental II ability caused due to- a. Chronic Neurological i. Multiple Scleroo ii. Parkinson's Dis b. Blood Disorder- i. Haemophilia ii. Thalassemia iii. Sickle Cell Diso	High population Person ophy tims g e Disability sabilities order iness) Conditions such as- sis sease	

Rashtriya Vayoshri Yojana (for elderly BPL) physical aids / assisted living devices	Silver econo Economic ac		Vaya Vandana Yojana See Economy page-35
Ministry of Social Justice & Empowerment	See Leonomy page 35		
SAGE (Seniorcare Ageing Growth Engine) Ministry of Social Justice & Empowerment	Geriatrics is related to health care of elderly		
"one-stop access" of elderly care products a It will promote <u>entrepreneurship</u> in the fiel	-		Gerontechnology technologies for elderly
Sch	eduled Tribe	es Al	pout <u>705</u> , <u>75</u> of them are PVTG articularly Vulnerable Tribal Group
<ul> <li>Scheduled Tribes</li> <li>Historically called as <u>aboriginals</u>, <u>natives</u>,</li> <li><u>Scheduled Districts Act 1874</u> notified certa (mentioned in "<u>schedule</u>" annexed to the</li> <li>Constitution (Scheduled Tribes) <u>Order, 19</u></li> </ul>	ain tribal areas as so Act)		MP has highest population
List of Scheduled Tribes Every state has a <u>different list</u> of STs. For eac <u>First time</u> list is made by <u>President's</u> notif <u>Modification</u> is done by Parliament <u>Note:</u> Constitution gives <u>procedure</u> , not crite	th state: Harya fication Chano Delhi,	<mark>otified ST i</mark> Ina, Punjal digarh , Puduchei	b, Nyishi, Khampti, Khamba are some of the tribes of
<ul> <li>✓ Primitive Traits</li> <li>✓ Geographical isolation</li> <li>✓ Distinct culture</li> <li>✓ Shy of contact</li> <li>✓ Area</li> <li>✓ extrem</li> </ul>	characterized by: riculture level of teo nt or declining popu ely low literacy ence level of econo	ulation	<ul> <li><u>1973:</u> Dhebar Commission created Primitive Tribal Groups (PTGs) as a separate category.</li> <li><u>2006:</u> PTGs renamed as PVTGs.</li> </ul>
<b>Declaration on Rights of Indigenous Peoples</b> <ul> <li>Non-binding resolution passed by UNGA</li> <li>India supported it? Yes</li> </ul>			<u>I's indigenous peoples report:</u> nt of Economic & Social Affairs
De-notified, Nomadic and Semi-nomadic Trik <ul> <li>'notified' as 'Criminal Tribe' under Crimina</li> </ul>		ati <mark>Indige</mark> by FA	nous Peoples' <mark>food</mark> systems report: O
<ul> <li>In 1949, <u>1871 act repealed</u>, hence they be</li> <li>But new laws brought in 1950s: <u>Habitual</u></li> <li>Some are SC/ST/OBC, some <u>not under any</u></li> <li>Commission formed in 2006 under Balkris</li> <li><u>MoSJ&amp;E</u> is running some schemes for ther</li> </ul>	came <u>de-notified</u> <u>Offenders Act</u> ½ of these categorie hna Sidram Renke	s am	mendment 2003: Dended Article 338, inserted 338A Daced "NC for SCST" by two separate mmissions NCSC NCST
Forest Rights Act 2006 For people living in forests for generation rights could not be recorded. <u>Rights under FRA, 2006:</u>		Article 33	8 : NCSC 8A : NCST (89 <sup>th</sup> amendment 2003) 8B : NCBC (102 <sup>nd</sup> amendment 2018) er MoTA, other two MoSJ&E
<ul> <li><u>Ownership</u> rights by giving title to lands.</li> <li><u>Usage</u> rights to minor forest produce</li> <li><u>Relief</u> rights for rehabilitation in case of fe</li> <li>Rights on traditional <u>knowledge</u></li> </ul>	orced eviction	<ul><li>evalua</li><li>evalua</li></ul>	<u>Commission for</u> ate working of safeguards, etc ate planning, progress, etc re into specific complaints
<ul> <li>Rights to basic <u>amenities</u></li> <li>Right of access to <u>biodiversity</u> resources</li> </ul>		<ul> <li>give r</li> </ul>	ecommendations (non-binding) ther matter referred by President

2021: Internation of C	-	Child Labou	r State of Wo - by UNICEF	orld's Children report
	mendment Act, 20		Article 23:	
	an work in family 8		No forced labour and	l human trafficking
└ 14 – 18: car	n work anywhere, e	except <u>hazardous</u> activity	<ul> <li>Article 24:</li> <li>→ No children (&lt; 14 yea</li> </ul>	ors ago) in factorios
National Child	Labour Project Sch	<u>eme 1988</u>	Article 39(e):	ins age) in factories
Central Sec			prevent children doi	ng job unsuited to age
		ol or bridge education		
PENCIL port	tal: Platform for Eff	fective Enforcement for No	Child Labour	
ILO's Conventi	on no. 182 [Worst	Forms of Child Labour Con	vention, 1999]:	
-			d, to achieve <u>universal ratifica</u>	<u>ation</u>
It is one of	the 8 fundamental	conventions of ILO. (India	has signed 6 out of 8).	
C	hild Marriage			
Child Marriage	Restraint Act 1929		Adoption	
( <u>Sharda act</u> ) 14	for girls, 18 for bo	ys	Procedure governed	by
Due biblistere e C.C		2006	Juvenile Justice Act,	<u>2015</u>
<ul> <li><u>18</u> for girls;</li> </ul>	<u>Child Marriage Act 2</u>	2006:	Regulated by	
	s all child marriage	s? No	Central Adoption Res	
	lid if minors want i		Inter country adoption <u>Hague Convention 19</u>	
-		ears of becoming major	Hague Convention 1:	<u>195</u>
Juve	nile Justice Act 201	.5	POCSO Act 20	12
petty offend	es ( <3 years of im	prisonment)		_
	nces (3-7 years imp		Protection Of Children from	n Sexual Offences
	ences ( > 7 years im		How POCSO is better than	
<u>16-18</u> old ca	n be tried as <u>adult</u>	<u>in certain cases</u>	✓ Gender neutral	<u></u>
2021 amendm			✓ Accused deemed guilty	until proven innocent
	will be tried in <u>Chi</u>		✓ Defines <u>child porn</u> ; stor	
instead of c	ourt, <u>DM</u> will issue	adoption orders		
•		See explanation of this PDF o		
Prelims 2022	Current Affair	s Society	Page-06	© All Inclusive IAS



