



Poverty and the Drivers of Wellbeing: Initial findings from Chhattisgarh, 2011

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Gross Global Happiness?

- Today at UN New York High Level Meeting on Happiness sponsored by Government of Bhutan – challenge to current development model with emphasis on environmental conservation, psychological wellbeing, culture and spirituality
- Evidence of attractiveness of the ‘beyond GDP’ agenda
- Questions for what this means for development policy and practice:
 - Displace emphasis on poverty?
 - Post-poverty agenda?
 - Multi-dimensional poverty max?



This paper

- Preliminary findings from ongoing research on wellbeing and poverty in Chhattisgarh
- Introduce our multidimensional model of wellbeing
- Describe some of our findings on livelihoods, health, education, access to services
- Present initial analysis of what seem to be drivers of wellbeing in these communities



The Wellbeing Pathways project

Ambition:

- to develop a model of wellbeing that is grounded in the South - (more like) how people there think and talk and feel and act
- to explore the relationships between poverty and wellbeing – both quantitatively (survey) and qualitatively (interviews)

Research:

- in marginalised rural communities, Zambia and India
- two rounds of fieldwork of 3-4 months in each country
- In each location and each round 350 respondents: 150 couples (husbands and wives separately) and 50 women heading households



Defining Wellbeing

- Contested terms: wellbeing, happiness, quality of life
- No universally agreed definitions, but consensus:
- Happiness subjective – two perspectives:
 - (more abiding) fulfilment or contentment
 - (more fleeting) positive feelings and emotions ('affect')
- Quality of life may use objective or subjective indicators – objective often predominate
- Wellbeing straddles 'feeling good' subjectively with 'doing well' objectively
- NB psychology 'subjective wellbeing' measured through combination of life satisfaction and positive affect



What constitutes Wellbeing?

- Seven domains (closely interacting)
- Model refined through a mixed method approach

Survey items (*what* we should ask about and *how* to ask it) derived through:

- consultation with NGOs and other local people
- intensive qualitative field testing
- ongoing reflection within local teams
- statistically tested and revised (Zambia to India, round one)

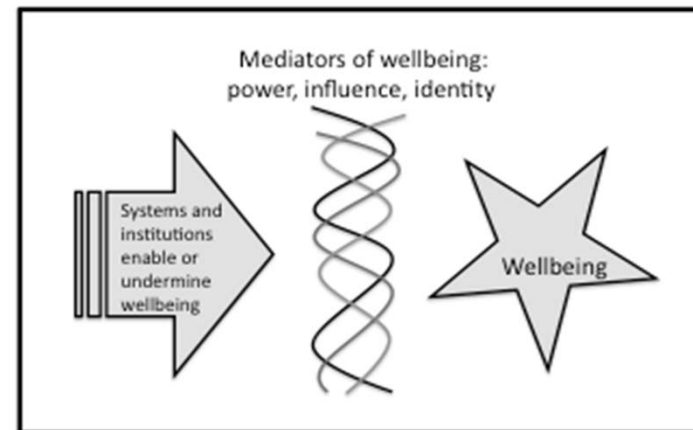


Our Approach

Starting point:

- ‘Wellbeing is experienced when people have what they need for life to be good’
- Both objective and subjective data
- Not just bottom up:
grounded in theory and
research experience
- What *constitutes*
what *enables*
what *mediates*
wellbeing

Diagram 1: The PADHI Approach to Wellbeing





Research Location

- 4 villages in Northern Chhattisgarh
- **Villages by economic factor**

	Number of respondents	Economic Factor Mean
Dry land	51	-.52
Forest	42	-.25
Hill	107	.16
Central	98	.20

- **Total Population and Sample Population by Community**

	SC	ST1	OBC	PTG	ST2	Total
Total Population (hhs)	7	112	82	86	153	440
Percent of Total Population	2%	25%	19%	20%	35%	100%
Sample Population	7	112	68	52	101	340
Percent of Sample Population	2%	33%	20%	15%	30%	100%



Community by Economic Factor

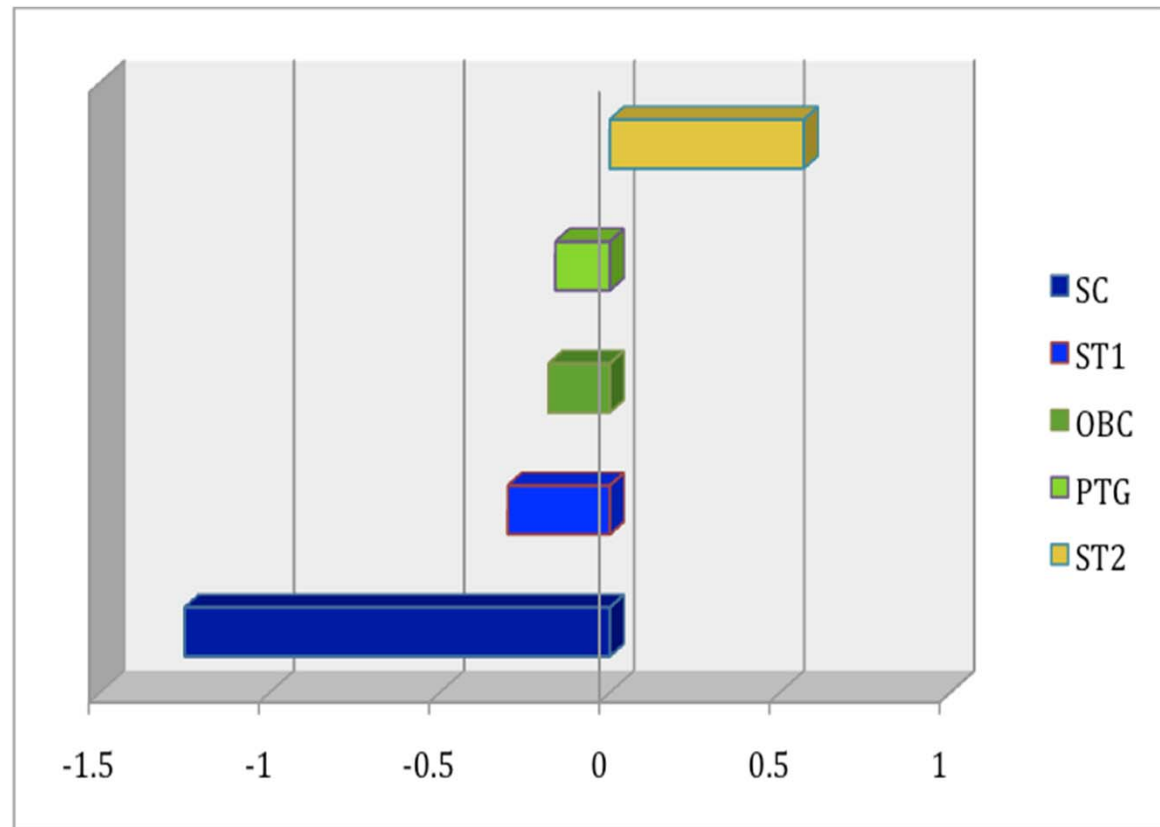
SC: Ghasiya

ST1: Agariya, Jaghi,
Majhwar, Pandu

OBC: Painikar,
Rajware, Yadev

PTG: Pahari Korwa

ST2: Gond, Kanwar,
Kerwar, Oraon





Our respondents in brief

- Religion:
 - Sarna Dharm 57%; Hindu 35%; Christian 8%
- Education:
 - 51% none (72% women); 21% write own name only
 - But none/own name only 9% of 10-14 year olds, 65% 15-19 year olds at least some secondary education
- Household size:
 - Married average 5.5 members; single woman headed 2.15 members
 - Mostly nuclear households
- Child mortality:
 - 20% of children born to our respondents no longer living
- Disability:
 - 6.6% household members; 30% households; 25% members single households
 - 64% = respondent or spouse (married households); 71% single households
- Health care:
 - Visits for health care in past 6 months, 50% to quack doctors, 17% spiritual/traditional healer; 1% primary health centre; 12% block community health centre

An equalising state?

Position held	Married men	Married women	Single women	TOTAL
Social/Community:				
Traditional healer (dewar, ojha, guniya)	11			11
Religious leader (procharik, baigah)	12			12
Village elder (seyan)	20	1		21
Village headman (patel)	2	1		3
Social/Community Total:	45	2		47
Formal Employment:				
CBO leader	6		1	7
Mitanin, Anganwadi assistant etc.		10		10
Anganwadi worker, ANM	1	5		6
Teacher	1			1
Formal Employment Total:	8	15	1	24
Formal Political:				
Panchayat/gram committee/ ward member	9	10	1	20
Sarpanch	2	1		3
Formal Political Total:	11	11	1	23
Other	9	4		13
TOTAL	73	32	2	107



Assets and Livelihoods

- 90% population in farming and daily labour
- 75% involved in sale of forest products – poorer people stated worse effect on them if forest resources decline
- 95% no months hungry over past year: ‘Now we are getting rice from the government and so we are able to live our lives.’
- 64% no savings or assets set by
- 80% married hhs have plough bullocks, 42% single women’s
- PTG 69% latrines, 25% other communities
- 83% have given land on mortgage – including ST2s
- 48% loans from moneylender, 35% family/friends, 4% banks
- 61% no loans in past year: 79% not needed/couldn’t repay. 30% ST1 and OBC tried but couldn’t get loan, 9% of PTG/ST2s



Access to services

- 83% of those eligible for PDS have ration cards
 - 81% of population have card for rice at Rs2 or less
- PDS access best amongst PTG (98%) and OBC (91%); then ST1 (79%) and ST2 (76%); then SCs (57%)
- MDM virtually all eligible had access
- ICDS 91% uptake.
 - Complaints on timing: OBC 65% and PTG 59% on time, STs 88/9%
- NREGS 97% eligible, 92% of these had job card. No differences by community, but fewer single women (64%) than married people (94%)
 - Take up varied by gender/marital status: 82% married men; 63% married women; 38% single women
 - Some variance by community on correct pay (97%-85%)
 - **Only 4% said NREGS pay available on time**



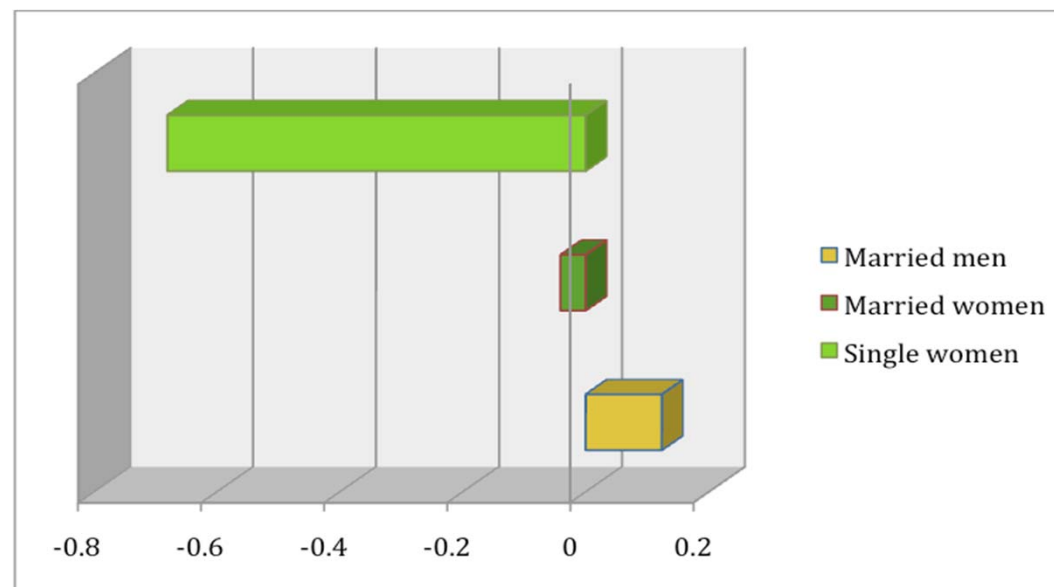
Drivers of Wellbeing

- So far we have considered two of our questions:
 - what *constitutes* wellbeing?
seven domain wellbeing star
 - what *enables* wellbeing?
social, economic, policy and political context
- Now to consider third:
 - what *mediates* wellbeing?
- Findings re major research question, relationships of poverty to wellbeing, will have to wait till round 2
- But already some indication of what mediates wellbeing, using 4 variables :
 - Economic status (economic factor)
 - Gender/marital status
 - Community
 - Location (village)

Correlation between factors

- Already seen that the economic factor is correlated with both community and village
- What about gender/marital status?

Standardised scores of economic status by gender/marital status:





Subjective reflections on wellbeing (1)

- Do gender/marital status, community, and/or economic status predict 3 subjective questions?

	Gender/marital status	Community	Economic status
How well doing economically this past year?	X	√ (p.=<0.01) (ST2>ST1)	√ (p.=<0.01) Higher economic = higher subjective
Standard of living now compared to 5 years ago	√ (p.=0.05) (married men > single women)	√ (p.=<0.01) (ST2>ST1)	√ (p.=<0.01)
Global happiness	√ (p.=<0.05 (married men > single women)	X	√ (p.=<0.01)



Inner Wellbeing

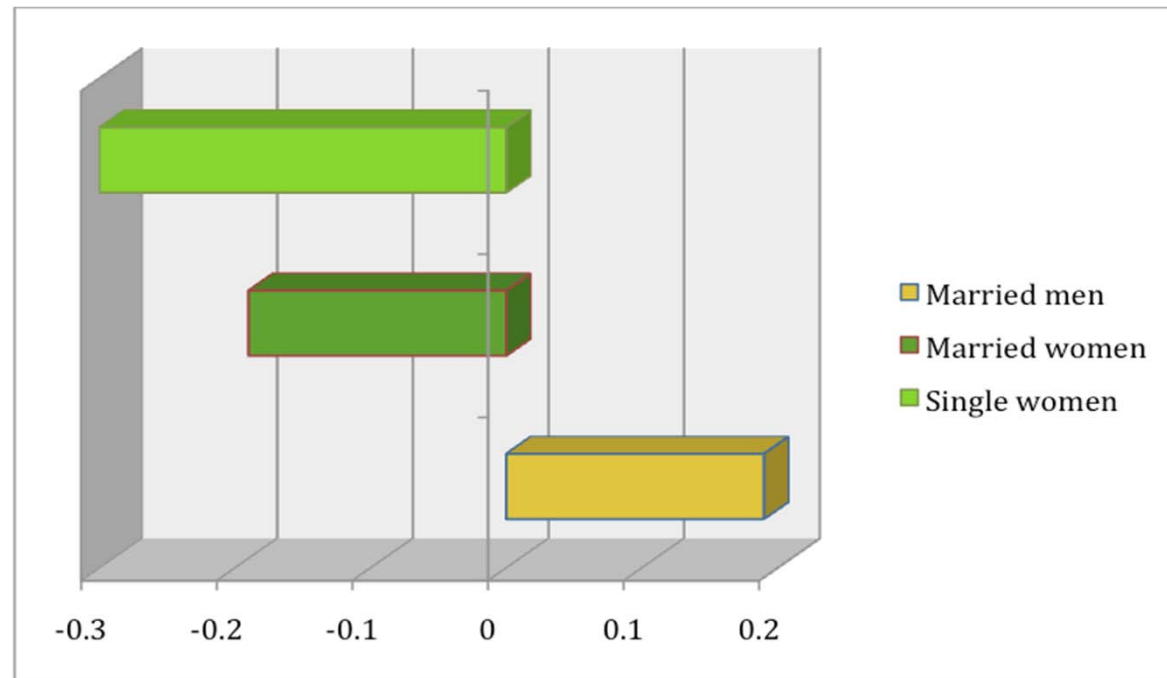
- Three measures of inner wellbeing, using 7 domains star model:
 - Item by item (four questions per domain)
 - Domain-wise (median of four item scores)
 - Single index (factor derived from items that measured each domain for men and women)
- How mediated by gender/marital status, community, village, and economic factor?



Does gender/marital status predict inner wellbeing?

- Single index: Yes!

Inner Wellbeing Index by Gender/marital status:



($p. = 0.01$) (married men > married women)



Does gender/marital status predict inner wellbeing domains?

Gender/marital status as predictor of inner wellbeing domain scores

Mediator	Domain	Sig.
Gender/ marital status	Economic resources	.843
	Agency and Participation	.000
	Social Connections	.000
	Close Relationships	.508
	Physical and mental health	.004
	Competence and Self-worth	.822
	Values and Meaning	.001

- Gender/marital status predicts 4 of 7 domains
- Effect remains even if economic factor included in analysis
- Confound that gender/marital status does not predict close relationships domain
- Very hard to devise good items in this domain:
 - not typically discussed directly
 - high means (positivity bias)
- Still working on it!



Does location (village) predict inner wellbeing domains?

Village as predictor of inner wellbeing domain scores

Mediator	Domains	Sig. of village when economic factor included	Sig. (village alone)
Village	Economic resources	.394	.042
	Agency and Participation	.005	.008
	Social Connections	.004	.030
	Close Relationships	.533	.524
	Physical and mental health	.086	.013
	Competence and Self-worth	.117	.932
	Values and Meaning	.065	.005

- When economic factor is included, village predicts only agency/participation and social connections domains – not in same order as economic factor (Central > Hill = largest difference)



Does community predict inner wellbeing domains?

- No!
- Community does not predict inner wellbeing, either as 7 domains or as a single index
- Only exception is the economic resources domain where the best off community, the ST2 feel themselves to be doing significantly better than do the next to poorest group, the ST1
- But... This is a location where community differentiation is not as strong as in many places in India – this finding might not hold in other locations



Is power of economic factor in predicting subjective reflections on wellbeing reproduced in relation to inner wellbeing domains?

- Yes!

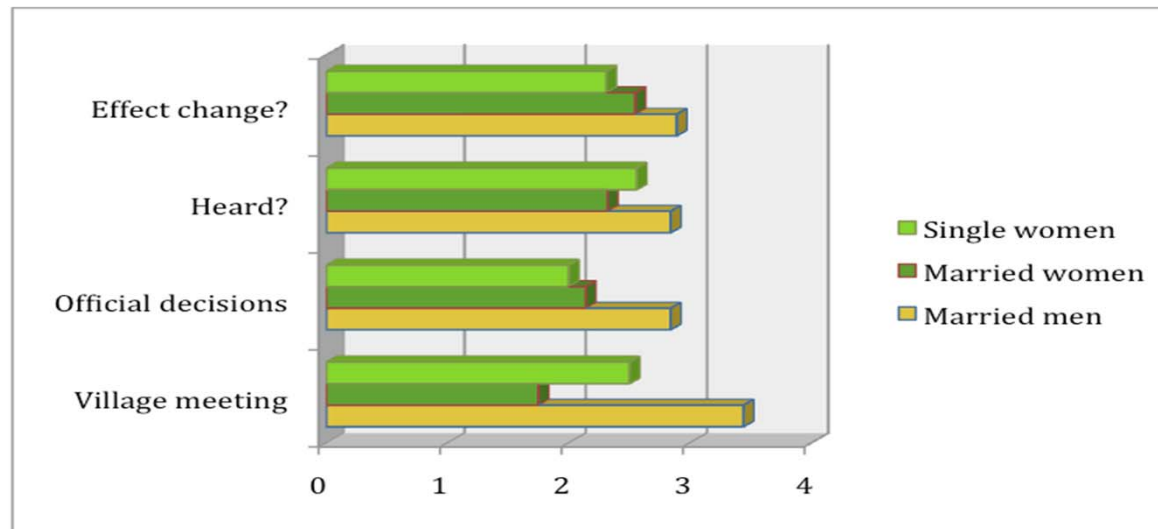
Economic factor as predictor of inner wellbeing domain scores

Mediator	Domain	Sig.
Economic Factor	Economic resources	.000
	Agency and Participation	.000
	Social Connections	.000
	Close Relationships	.009
	Physical and mental health	.000
	Competence and Self-worth	.000
	Values and Meanings	.000

- Economic factor predicts significantly and positively inner wellbeing as single index and total domain scores across all seven domains at $p. <0.01$.

Item-wise analysis

Mean item scores Agency and Participation domain by Gender/Marital Status



- When both the economic factor and gender/marital status were considered together, both showed as significant for the first 3 items (reading from bottom of graph)
- Gender/marriage stronger effect than economic overall: higher significance on item 2 (power to change official decisions) and marginal on 4 (bring change with others) where no significance by economic factor



Conclusions: What constitutes Wellbeing?

- Factor analysis (not presented here) supports both seven domain model and single factor inner wellbeing index
- But single index tells us very little - seven domains gives much more scope to explore variability between respondents and contexts which is key impetus behind wellbeing agenda



Conclusions: What enables Wellbeing?

1. Very poor communities in which positive change is happening – significantly due to action of state and political mobilisation from below to support people in monitoring implementation and claiming their entitlements:
 - *Politics and policies are critical enablers of wellbeing, it cannot be understood at individual level only*
2. History of ambivalent relations between these communities and state, going back to colonial times
3. PDS rice seen locally as key enabler of wellbeing



What mediates wellbeing?

1. People's objective economic status has by far the greatest effect as mediator of wellbeing
2. It has strong predictive power across subjective reflections on economic wellbeing and happiness, and on inner wellbeing as single index and across all domains.
3. It is strongly inter-related also with the other mediating factors of gender/marital status, community and village
4. In general, the effect of these other factors is reduced when the economic factor is included alongside them in analysis
5. This finding confirms other studies of economic status and subjective wellbeing, which find there is a strong association between these for people living in poverty



Mediators continued.....

1. Next to the economic, gender/marital status is the strongest mediator of inner wellbeing
2. Location also makes a difference, though only for 2 domains when economic factor alongside
3. Community shows no statistical significance, but need for more qualitative analysis
4. Although economic factor highly important, it does not explain all variance between respondents:
 - Need take into account many other issues
 - Need explore *how* economics figures in local constructions of inner wellbeing, through more qualitative analysis



Some limitations.....

- Draft report of initial analysis
- Attempt to be sensitive to local context
- But this methodological approach carries a strong 'disciplining' effect requiring people to fit their lives into our categories
- Such surveys must be complemented by qualitative research to explore depth and richness of local understandings of wellbeing, and the challenges these may bring to metropolitan constructions



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