

# Enabling Human Development through Poshan Abhiyaan: A Situation Analysis

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## **Abstract** (100 words)

*Ensuring healthy lives and promoting the well-being at all ages is essential to achieve sustainable development as entailed in SDG 3. With this as the roadmap, the government of India has launched the Poshan Abhiyaan (National Nutrition Mission) to improve nutritional outcomes for children, pregnant women, lactating mothers and adolescent girls. Conceptualized as a Jan Andolan or 'people's actions' for promoting inclusive participation, it aims at reaching every household with the message of nutrition. The author examines the implementation of the program as an agency and the enhancement of human development thus envisioned through Sen's Capability Approach.*

**Keywords:** *Nutrition, Capability Approach, Malnutrition, Human development*

## **Introduction**

Improving the quality of health has been a daunting challenge for the government of India. Ensuring healthy lives and promoting the well-being at all ages is essential to sustainable development and the same has been emphasized in SDG 3. With this as the roadmap, the government has launched a flagship program in 2018, which is called the Poshan Abhiyaan, also known as the National Nutrition Mission to improve nutritional outcomes for children, pregnant women, lactating mothers and adolescent girls. The program aims at reaching out to each individual in every household with the message of nutrition with the tag line "har ghar Poshan tyohaar". It has been conceptualized as a Jan Andolan or 'people's actions' thus promoting inclusive participation. The aim of the program is to raise awareness on malnutrition, mobilizing multiple sectors and it aims to build knowledge and attitudes and initiate behavioral intent to practice optimal breast feeding, complimentary feeding, maternal and adolescent nutrition practices to prevent malnutrition. The author attempts to look at the implementation of the program as an agency and understand the enhancement of human development thus beseeched through the program through Sen's Capability Approach.

## **Health and Wellbeing**

Demographically, in India, there are about 940 females per 1000 males, in the population as a whole, while with 1.21 billion people, the child population represents 39% of the total population (Census, 2011). With distraught conditions, including poverty, the direct impact is evident on their health. The women in the country struggle to get

even the basic supplements such as iron and folic acid which can potentially negatively impact the health of the mother, help her during pregnancy and also in fetal development.

According National Family Health Survey (III), more than half the female population in India (55%) have anemia, including 39% with mild anemia, 15% with moderate anemia and 2 percent with severe anemia. Findings of the Global Nutrition Report (2017) ranked India at the bottom of the table with maximum number of women impacted with anemia in the world, followed by China, Pakistan, Nigeria and Indonesia. This could be due to various socio-cultural reasons that are ingrained in our behavior such as putting the family before self when it comes to care factor, apart from low literacy, poverty, and lack of awareness about nutrition and hygiene. Anemia among women in the reproductive age often leads to health issues in the conceiving mother and her child. The child also faces the danger post birth.

To strengthen the Iron and Folic Acid (IFA) intervention, a concerted effort of community-level health workers such as accredited social health activists (ASHA), auxiliary nurse midwives (ANM) and aanganwadi workers (AWW) is put in place. Moreover, food-based strategies that involve dietary diversification and food fortification, food supplementation and improvement of health services are made mandatory to reduce the condition of anemia among women.

It is hereby essential to understand some of the basic concepts related to nutrition and health. As per the Annual Health Survey Report, *Stunting* is the effect of an insufficient intake of vital nutrients over a long period of time and frequent infections, leading to a failure to reach a linear growth potential. It is also termed as low height-for-age, is associated with poor socio-economic conditions, inappropriate feeding habits and an amplified risk of exposure to adverse conditions such as illness. On the other hand, severe weight loss due to acute starvation or disease is called *Wasting*. Furthermore, *Anemia* is a condition wherein deficiency of red blood cells results in weariness and the oxygen carrying capacity of the red blood cells is insufficient for physiological needs, which vary by age, sex, altitude, smoking and pregnancy status. It may be caused by deficiency of iron, although other conditions like deficiencies in folate, vitamin B12 and vitamin A, chronic inflammation, etc. and inherited disorders can all cause anemia. Another related concept is that of Body Mass Index (BMI), which is an index of weight-for-height and helps in determining whether one is underweight, overweight or obese. It is determined by the weight in kilograms divided by the square of the height in meters (kg/m<sup>2</sup>).

### **Importance of Nutrition**

In India, the iron deficiency aka anemia has created a havoc. It has deleterious impact on the physical and mental growth of one's body. Tiredness and weakness are its major characteristics. To combat this challenge, the government has supplied IFA tablets and promoted iron-rich foods too. Though the country is taking big strides on the road to development, India is still struggling with worst level of malnutrition. One of the major programs to tackle this situation is Integrated Child Development Services (ICDS) and is in implementation since 1975.

Some of the targets of this National Nutrition Mission include reducing low birth weight by 2%, stunting by 2%, under nutrition by 2% and anemia by 3%, per annum, among the children and young women. Although the target to reduce stunting is at least 2% p.a. the mission strives to achieve reduction in stunting from 38.4% (NFHS-4) to 25% by 2022 (Mission 25 by 2022).

According to National Family Health Survey-4, IMR has gone down to 41 in 2015-16 from 57 in 2005-06. It was seen that mothers who consumed IFA for 100 days or more when they were pregnant doubled in 2015-16 to 30.3% from 15.2% in 2005-06. Also, children age 6-59 months who were anemic (<11.0g/dl) (%) was 58.6% in 2015-16 and 69.4% in 2005-06. Non-pregnant women age 15-49 years who were anemic (<12.0 g/dl) (%) 53.2% in 2015-16 and 55.2% in 2005-06. All women age 15-49 years who are anemic is 53.1% in 2015-16 from 55.3% in 2005-06. As per UNICEF, 38% of the children younger than five years of age are stunted, and 21% are wasted, manifestation of chronic malnutrition. It is associated with an under-developed brain, which results in diminished mental ability and reduced learning capacities (Global Nutrition Report, 2018). Due to this, children are not able to perform well in schools and labeled as 'slow learners'. UNICEF also reports that 70% of the adolescent girls in India are anemic and half of the cohort are below the normal body mass index, which further brings in risk in pregnancies. Further, it adds, that stunted growth is caused because of poor nutrition in the first thousand days after birth. This has further implication in impaired cognitive ability. Though the 2019 edition of the joint malnutrition estimates show that there is a decline in stunting since 2000, it is seen that nearly one in four-149 million children under 5- were stunted in 2018 and 49 million approximately suffered from wasting.

A pro-nutrition social transformation agenda needs to be put in place to guarantee a healthy and competent population. There has been a high rise in diseases, lowered brain development in children and consequently lowered potential as individuals. The effects of poor nutrition and its repercussions have become evident through various studies and have already started affecting nation's holistic socio-economic growth and productivity silently but adversely.

As Moser and Norton (2001) put forth, human capital includes investments in education, health and nutrition of the individuals. It is one's health and nutrition that indicate his/her well-being. Talking about development, especially human development requires that one's well-being is taken note of.

### **Poshan Abhiyaan**

Celebrating the festival of nutrition is the trademark slogan of Poshan Abhiyaan. The Poshan Abhiyaan, also known as the National Nutrition Mission (NNM) was set up with a three year budget of Rs. 9046.17 crore commencing from 2017 - 18. The scheme would be under the aegis of Women and Child Development Ministry. The Poshan Abhiyan was aimed at reaching every household with the message of nutrition with the tag line "*har ghar Poshan tyohar*". There is an integrated dashboard for monitoring progress. The program is based on Jan Andolan guidelines

and is based on eight themes: *Antenatal care, Optimal breastfeeding (early and exclusive), Complementary feeding, Anemia, Growth monitoring, Girls-education, diet, right age of marriage, Hygiene and sanitation and Eat healthy food fortification.*

The suggested activities are divided into two categories. The Scheduled activities include Convergence Action Plan Meeting- State, District, Block; VHSND day; CBE; ECCE day; DAY-NRLM weekly meeting; Home visits by ANM/ASHA/AWW-HBNC and Gram Sabha meeting. On the other hand, the suggested activities include Prabhat Pheri, Poshan Melas, Poshan rallies and walks, Nukkad nataks, Yuva Shakti Rallies, School based events, Recipe demonstration, and Public events. The program aims to achieve convergence with various programs such as Aagnawadi services, Pradhan Mantri Matru Vandana Yojana, Scheme for Adolescent Girls, Janani Suraksha Yojana, National Health Mission, SBM, PDS and MGNREGS.

### **Coverage of the Program**

The government has envisaged a holistic approach, wherein all 36 states/UTs and districts are covered in a phased manner. There were 315 districts in 2017-18, 235 districts in 2018-19 and the remaining districts would be covered in 2019-20. The program aims has a humungous task to reach out to 10 crore (1.37 billion) people.

The Poshan Abhiyan has been conceptualised as a “*Jan Andolan*” or ‘People’s movement’ and calls for their ‘*bhagidaari*’. It incorporates inclusive participation of public representatives of local bodies, government departments of the state, social organisations and the public and private sector at large. The stakeholders include:

1. MoW&CD: Nutrition,(Poshan Abhiyaan, ICDS, BBBP, PMMVY)
2. MoHRD (Mid-day Meal Scheme, UDISE)
3. MoH&FW (MAA, RKSK, AMB, IDCF, Indradhanush, HBNC, HBYC, RBSK, NHM)
4. MoDW&S (SBM, SDW & WASH)
5. MoRD (DAY-NRLM, MGNREGS)

The above mentioned are partners and also provide technical assistance. They focus on coverage, continuity, intensity and quality. The various partnerships and platforms have been identified for successfully implementing the program.

1. Influencers/celebrities, think-tanks for Jan Andolan
2. Private sector
3. Academic institutions, civil society
4. Volunteers

The above have been identified to mobilise and support the program and make it successful. The core group for Jan Andolan (MoW&CD) is there for promoting and support. They provide *Technical assistance, coordination, convergence and monitoring.* The underlying principle of the Jan Andolan includes the aspirations of the people. By mobilising people and taking cognisance of their needs and aspirations, the government wants to bridge the wide

gap between people and the scheme. A perception of shared status and identity is being kindled through this program. Moreover, applying the basics of Nudge Theory, wherein appreciation is garnered on progress is a good way of motivating. Adding rewards to the above enhances the people's enthusiasm.

The main objective of the Jan Andolan, as proposed by the government, is to create awareness that cuts across sectors nationwide, on impact of malnutrition and 'call for action' for each sector's contribution to curb malnutrition. Secondly, it seeks to mobilize multiple sectors and communities to create intent to consume nutrient rich food. Lastly, it aims to build knowledge, attitudes and behavioral intent to practice optimal breast feeding, complimentary feeding, maternal nutrition and adolescent nutrition practices to prevent malnutrition, including Severe Acute malnutrition (SAM) and anemia. The above objectives are envisaged through two approaches, namely, *convergence* wherein all ministries/departments as well as schemes and programs converge and bring together platforms. Secondly, the *community engagement* is the approach to keep the ball rolling. Moreover, *advocacy* is the key approach as it is vital that mass-mobilization for multi-sectoral participation is focused upon. Since various stakeholders are involved, the approach also requires being multi-dimensional in nature. Lastly, *story-telling* through Trans-media is looked forward to. It is crucial that all stakeholders find connect with the nutrition program and so a common narrative to weave through the platform needs to be constructed with the tagline of 'Sahi Poshan, Desh Roshan' as the underpinning.

### **Themes**

The Poshan Abhiyan has identified ten themes to cover the spectrum of multi-sectors engaged with the implementation process. The ten themes are as follows:

1. Ante-natal check-up, diet of pregnant women, calcium supplementation, institutional delivery and early initiation of breastfeeding.
2. Optimal breastfeeding
3. Complementary food and feeding
4. Full immunisation and Vitamin A supplementation
5. Growth monitoring and promotion
6. Anaemia prevention in children, adolescent girls and women-diet, IFA, deworming
7. Food fortification
8. Diarrhoea management
9. Girls education, diet and right age at marriage
10. Hygiene, sanitation and safe drinking water

### **Roles and Responsibilities**

For smooth functioning and implementation of the program, it is required that the roles and responsibilities are distributed. The same is done in Poshan Abhiyan and the delegation is done at National level, State level and District level. The Poshan Abhiyan-Jan Abhiyan coordinates the three messages for behavioral change:

- To reduce malnutrition, anaemia and low birth rate
- To address under and over nutrition

- To ensure a bright future for India.

### **Sen's Capability approach**

The Capability Approach as put forth by Sen (1999) has a moral framework and offers an evaluative approach. As Alkire (2002) suggests, the approach proposes that social arrangements should be primarily evaluated according to the extent of freedom people have to promote or achieve functionings they value. Sen, in his writings, has left some loose strings and has made an attempt to combine the two formulations of capability, i.e., freedom and valuable beings and doings. As Sen (1999) writes, 'human' development is any development that promotes the most human trait-agency. In the life course of Individuals, human development is the maturation of one's genetic traits. He says that applying the same logic to the trajectory of societies, all changes that bring a larger number of people in the situation to more fully realize their agentic traits, it is to be characterized as 'human development' (Welzel et.al. 2003).

As Drèze & Sen (2002) remark that the approach is essentially a 'people-centered' approach, which puts human agency (rather than organizations such as markets or governments) at the centre of the stage. They stress on the factor of freedom and concern themselves with social opportunities that are influenced by social circumstances. Therefore, in the Capability Approach, focus is on capabilities to function though it does not prioritize one capability over another. It focuses on human development because its basic premise is the capability approach and the whole discourse revolves around it. As Sen has stressed over and over again in his writings that the objective of development is to expand capabilities though in the elaboration further, he talks about choices available to people also. The paper here argues that more the capabilities, more the participation of the people in their socio-economic affairs. It will give people the strength to fight vulnerability, have the courage to cope with hunger, weakness and other such insecurities. Hence, we see that through the scheme of Poshan Abhiyaan, the attempt is to curb malnutrition and envisage healthier population. This will help people lead a prosperous life which they are otherwise devoid of. At this interstice, we see through the lens of the Capability Approach wherein "*development is about providing conditions which facilitate people's ability to lead flourishing lives*" (Deneulin and Stewart 2002).

### **Discussion**

For any program to be implemented successfully, an acceptance from the people for whom it is designed is a prime factor. The Poshan Abhiyaan is a form of Jan Andolan and requires people's participation, without fail. Herein, comes the role of *Swasth Bharat Preraks*. They are the game changers for fast track implementation of the program. By synergizing frontline functionaries and volunteers like, DAY-NRLM Self Help Groups, ANMs, Cooperatives, *Swasth Bharat Preraks* etc., the Ministry is planning to cover the masses thereby acting as catalyst for converting the mission into Jan Andolan. Under the Abhiyaan, *Swasth Bharat Preraks* will be deployed one in each district for coordinating with district officials and enabling fast and efficient execution of the Abhiyaan across the country. They would function as promoter for fast tracking the implementation of the Abhiyaan. By June 2018, 315 *Swasth Bharat Preraks* are likely to be deployed in 315 districts of Phase I of the Poshan Abhiyaan and the target of the mission is to bring down stunting among children in the age group 0-6 years from 38.4% to 25% by 2022.

Capability approach is a multi-diverse concept that helps us to understand inequality in society, prevalence of poverty and people's well-being. Here, it is to be understood that capabilities are the freedom that an individual enjoys in terms of functionings. This offers a broad framework that is normative in nature and helps in assessment of individual well-being and social arrangements. The concept revolves around people's capabilities as in what all they can do or perform effectively. It focuses on their quality of life as well. Human Development Index (HDI) is also a minimal listing of capabilities focusing on quality of life. People coming from diverse cultures harbor different values and social norms. These further reflect on one's capabilities too. When we talk about Capability Approach, we focus on person's 'basic capabilities'. In this paper's context, it would be meeting one's nutritional requirements apart from the basic needs of clothing and shelter.

Human development should be considered as a process of expanding and enlarging choices available to the people. This widening of spectrum leads to two facets: firstly, the formation of human capabilities which are due to increased health and knowledge and secondly, is the manner in which people use their acquired capabilities, either for work or for leisure. It not only covers basic needs, but also looks at dimensions of inclusiveness. So, the main focus of human development is humans or people, and secondly the opportunities provided to them for fulfillment of living in a satisfied manner. The human development can be conceptualized in the following dimensions as is mentioned below:

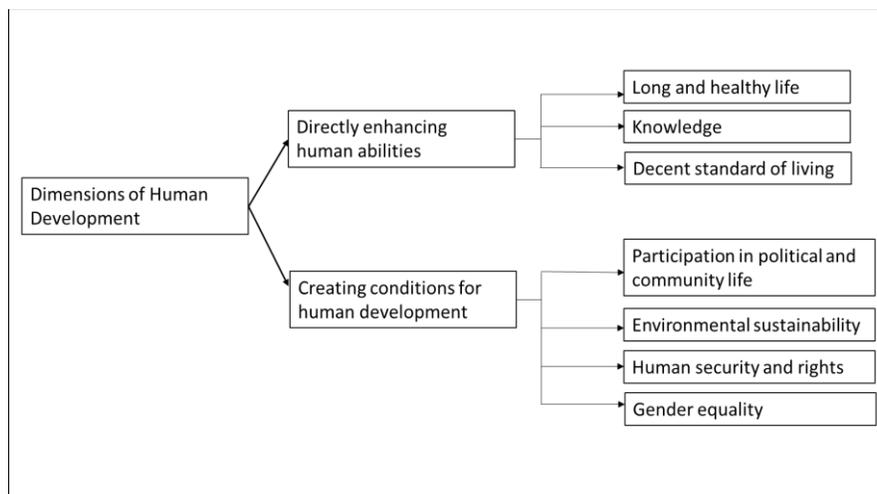


Figure 1: Dimensions of Human Development (Source: <http://hdr.undp.org/en/content/what-human-development>)

The success of the Poshan Abhiyan rests on the ability of the Aanganwadi Workers (AWWs) to deliver services effectively and communicate and support beneficiaries to adopt core nutrition practices.

The digitization includes a Rapid Reporting System to collect the online data on Integrated Child Development Services (ICDS) scheme from Aanganwadi Centres (AWCs) by introducing simplified aanganwadi monthly progress report (AWMPR). The secondary data in the Poshan Abhiyaan portal reveals that the participation of the

people in themes viz, Poshan (Overall Nutrition) is 988615, Breast feeding 166197, Complementary Feeding 282644, Immunization 15183, Growth Monitoring 221269, Food Fortification and micro nutrients 147844, Diarrhea 67441, Hygiene, Water and Sanitation 307011, Anemia 171510, Adolescent Education, Diet, Age of marriage 121890, Antenatal Check-up 208952 and ECCE 312990.

Out of 29 states and 6 Union Territories, Madhya Pradesh, Gujarat, Andhra Pradesh, Rajasthan, Bihar, Maharashtra, Tamil Nadu, Uttar Pradesh, Chhattisgarh, Jharkhand, Haryana, Telangana, Uttarakhand, Chandigarh, Himachal Pradesh, Assam, Karnataka, Kerala, Punjab, Mizoram, Odisha, Jammu & Kashmir and Delhi are participating in the Poshan Abhiyaan, in all the activities. However, in Meghalaya, Arunachal Pradesh, Sikkim, Daman and Diu, Manipur, Andaman & Nicobar, West Bengal, Puducherry, Tripura, Goa, Nagaland, Dadra and Nagar Haveli and Lakshadweep states, the program will be operationalized in coming phases.

Malnutrition is a multi-causal problem entangled in the sphere of poverty, illiteracy and physical incapacity. Not only does it influence an individual socially, but economically as well. It is seen that productive capacity is affected due to low energy, slower brain development & morbidity. The costs of malnutrition have been studied to vary from 2 per cent to 16 per cent of GDP depending upon location and sector. It can be conclusively stated that to fight malnutrition there is need of stronger determination, political commitment in the form of special policy intervention, budgetary capacity and monitoring. Ensuring good nutrition is the single most important, cost-effective means of advancing human well-being. Providing accessibility to nourishing food, educating about the importance of intake of all essential micro as well as macro nutrients and making it mandatory to monitor health status especially of women and children can help raise an efficient demographic dividend. This demographic profile can boost productivity and spur economic growth in the forthcoming years. However, this assumption is based on the premise that there will be a cohort of healthy population, who are educated and skilled and will maintain good health for the rest of their life as well. But it may be belied by health threats that can drain the demographic dividend.

## **Conclusion**

The author extends the Capability Approach from the domains of economic development, to the premises of social development (drawing from the works of Alkire 2002, Clark 2002 and Nussbaum 2000). It is envisaged that a healthy population is more participative in nature. It proffers a strong base to the decentralized planning structure of the government. A demographic dividend that is healthy has a low risk of dying due to preventable diseases (the current scenario). It is time that India turns its crises into strengths. The strong demographic dividend that India nurtures can only be realized well if the members of the community are healthy and nurtured well. Having invested in good health will definitely give huge returns. It is time that the government takes cognizance of the stringent high incidence of severe underweight and stunting of children across the country.

The women and children in India face a severe nutritional challenge. It is envisaged that this 'Jan Andolan' would definitely result in a mass awareness about challenges related to nutrition, breast-feeding and good diet. Timely

detection and preventive measures can help reduce the burden on the society. The program aims at *building synergies* across implementing agencies and frontline workers binding them with a common purpose and target. The ICT intervention such as ICDS-CAS has come in as an encompassing platform that digitalizes the data and ease out the process. Not only this, the Poshan Abhiyaan has also addressed SDG 2 and strengthened the programs for a healthy population for sustainable development. The better implementation would consequently lead to better health and nutrition in women and children, raising their BMI and helping them overcome malnutrition. Herein, focus is on creating an environment that is non-intrusive, and offers multiple choices for people to choose from and build their capacities and potential. So, the discourse lies between “being” and “doing”. The challenge of inequality has penetrated deep in the Indian society. Riddled with caste-system and its aftermaths, India struggles to come out of the penuries of under-development. Understanding the dimension of inequalities that pervade health, education, social security and access to finances is the need of the hour. It is therefore critical to enhance capabilities and reduce inequalities. So when capabilities are being referred to, they are not confined to the frames of equal opportunities.

In this paper, the point of departure is taken from Sen’s Capability Approach wherein he talks about agency and empowerment. Herein, the author highlights how nutrition builds on capabilities and enhances functionings. Seen under this theoretical framework, the author examines the Poshan Abhiyaan scheme that helps curb malnutrition. Health here is taken as a determinant of capability and deprivation in one results in a decrease in another. Moreover, not only social development, it is necessary to have both cognitive and physical development as well. Development can mainly be classified in three main domains such as physical, cognitive and psycho-social and all three stand equal. Having good health includes having a good functioning body and reproductive health, adequately nourished system and a proper shelter to cover oneself.

For focusing on reducing stunting, under-nutrition and anemia in women and adolescent, the government has proposed for direct cash transfers too. The government has planned in a strategic manner to provide direct money transfers to help people purchase healthy food items. Good and balanced diet is a pre-requisite for a healthy lifestyle. The diet should contain all major nutrients such as proteins, carbohydrates, fats, vitamins, minerals and water. It is evident that women who are anemic and under-nourished are more liable to have difficult pregnancies and tend to have malnourished and low-birth babies. Safe motherhood can actually lead to producing healthier babies who will not fall sick very often. For this, it is essential that young girls, pregnant women, and lactating mothers eat proper diet. Regular counselling needs to be given about the first milk, colostrum that is very essential for the new born. Due to certain stigmas and taboos ingrained in one’s culture, the newborn is devoid of this nutritious milk. Mothers should be counselled about sound breastfeeding practices to determine good health of their child. It is not so that the government is not taking heed of the situation. There happens to be a strong constitutional support in place to implement the legislative policies. There is the ICDS and MDM scheme to handle the grim situation. The government keeps abreast of all situation and through the Poshan Abhiyaan brings in a bottoms-up approach. The nation is looking forward to a healthier future with a healthier population.

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