

DATA FOR DEVELOPMENT





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IHDS DATA COMMUNITY RESULTS

Beyond Income: Correlates of Conspicuous and Luxury Consumption in India

By Soumyajit Bhar, Sharachchandra Lele, and Narasimha D. Rao







Concern about the environmental impacts of consumption has drawn research attention to the drivers of conspicuous and luxury (C/L) consumption. Given the prevailing patterns of overconsumption, most studies to date have focused on countries in the global North. However, an emerging high-consuming middle and upper class in nations such as India and Brazil makes it imperative to extend the study of C/L consumption to these contexts. Research that does exist pertaining to India has predominantly focused only on the role of social identity in driving consumption growth among certain groups. This study proposes a broader conceptual framework, incorporating a variety of possible factors and applying multivariate statistical analysis to household-expenditure data from the India Human Development Survey (IHDS). The authors examine how C/L consumption expenditure is correlated not just with the economic ability to consume (income or wealth) but also with potential sociopsychological drivers and moderators. The results highlight the importance of socio-psychological factors in shaping consumption decisions beyond the

enabling role of income and wealth. Improving an understanding of this broader set of factors, as well as their interaction effects, is particularly salient for devising better policies for transitioning toward more sustainable consumption patterns in a large developing country such as India.

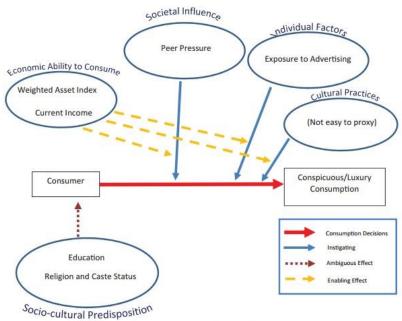


Figure 1. C/L consumption framework: proximate correlates of C/L consumption.

Full Article Here

Soumyajit Bhar straddles action and academic research with more than 14 years of experience (both volunteering and full-time) working with various environmental and sustainability issues. He is a Visiting Assistant Professor at Krea University, where he teaches courses at the intersection of Environmental Studies and Economics. He holds a PhD in Sustainability Studies from Ashoka Trust for Research in Ecology and the Environment (ATREE) as part of a unique interdisciplinary PhD programme. His dissertation attempts to understand socio-psychological drivers and local and regional scale environmental impacts of conspicuous/luxury consumption basket in

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Public Health Insurance and Maternal Health Care Utilization in India: Evidence from the 2005–2012 Mothers' Cohort Data

By Tesfaye Alemayehu Gebremedhin, Itismita Mohanty, and
Theo Niyonsenga







The introduction of the Janani Suraksha Yojana (JSY) in India, a conditional cash transfer programme which incentivised women to deliver at institutions, resulted in a significant increase in institutional births. Another major health policy reform, which could have affected maternal and child health care (MCH) utilisation, was the public health insurance scheme (RSBY) launched in 2008. However, there is a noticeable lack of studies that examine how RSBY had impacted MCH utilization in India. This paper uses data from a cohort of mothers whose delivery had been captured in both the 2005 and 2011-12 rounds of the India Human Development Survey (IHDS) to study the impact of health insurance (in particular, the public insurance scheme versus private insurance) on MCH access. The authors also investigate whether maternal empowerment was a significant correlate that affects MCH utilization.

Using multilevel mixed-effects regression models and indexes for women's empowerment, the results in the paper indicate that the odds of mothers' MCH utilisation levels vary by district, community, and mother over time. The author's findings suggest that maternal empowerment indicators – in particular, maternal ability to go out of the house and complete chores and economic empowerment—were associated with higher utilization of MCH service.

Nonetheless, change in women's and societal attitude towards maternal care may have played a significant role in increasing MCH utilization over the study period. There might be a need to increase the coverage of the public insurance scheme given the finding that it was less effective in increasing MCH utilization. Importantly, policies that aim to improve health services for women need to take maternal autonomy and empowerment into consideration.

Table 4 Multilevel ordered logistic regression with predictors

	Model 1	Model 2	Model 3	Model 4	Model 5	Model 6
Variables	Odds Ratio (95% C.I.)					
Wave						
2005	Reference	Reference	Reference	Reference	Reference	Reference
2011–12	3.865 ^a (3.497, 4.272)	3.762 ^a (3.398, 4.165)	3.862 ^a (3.483, 4.285)	3.492 ^a (3.106, 3.928)	4.992 ^a (3.856, 6.464)	6.674 ^a (5.104, 8.727)
Health Insurance						
No		Reference	Reference	Reference	Reference	Reference
Yes		1.493 ^a (1.187, 1.878)	3.100 ^a (1.761, 5.454)	2.887 ^a (1.537, 5.423)	2.805 ^a (1.495, 5.264)	1.275 (0.668, 2.434)
Wave # Health Insurance			0.418 ^a (0.226, 0.774)	0.434 ^b (0.220, 0.858)	0.443 ^b (0.225,0.875)	0.886 (0.444, 1.767)
Mothers age						1.026 ^a (1.010, 1.043
Mothers education						1.155 ^a (1.136, 1.175)
Total Children born						0.781 ^a (0.744, 0.822)
Household size						0.995 (0.970, 1.021)
Consumption per capita Quintile						
First quintile						Reference
Second quintile						1.289 ^a (1.085, 1.531)
Third quintile						1.718 ⁸ (1.430, 2.065)
Fourth quintile						2.324 ^a (1.911, 2.825)
Fifth quintile						2.529 ^a (2.027, 3.157)
Mother's health status						
Good or very good						Reference
Ok						0.922 (0.794, 1.071)
Poor or very poor						1.028 (0.800, 1.322)
Holds Below Poverty Line card						
No						Reference
Yes				2000		1.167 ^b (1.029, 1.324)
Mother's bargaining power (MBP)				1.236 ° (0.999, 1.529)	1.100 (0.793, 1.524)	1.172 (0.950, 1.446)
Mother's autonomy (MA)				2.031 ^a (1.769, 2.332)	2.576 a (2.153, 3.081)	2.294 ^a (1.896, 2.776)
Mother's restriction on movement (MRM)				0.791 ^a (0.667, 0.938)	0.987 (0.799, 1.219)	1.020 (0.814, 1.279)
Wife's name on rental/property document				_		
No				Reference	Reference	Reference
Yes				1.449 ^a (1.196, 1.757)	1.276° (0.955, 1.706)	1.276 ^b (1.056, 1.542)
Wave # MBP					1.179 (0.773, 1.799)	100012
Wave # MA					0.557 ^a (0.427, 0.726)	0.507° (0.389, 0.662)

Table 4 (continued)

	Model 1	Model 2	Model 3	Model 4	Model 5	Model 6
Wave # MRM					0.517 ^a (0.367, 0.729)	0.676 ^b (0.482, 0.948)
Wave # Wife's name on rental/property					1.184 (0.806, 1.738)	
B/n District variance	0.556	0.570	0.559	0.527	0.526	0.136
	(0.326, 0.948)	(0.335, 0.970)	(0.329, 0.952)	(0.302, 0.918)	(0.302, 0.917)	(0.066, 0.283)
B/n Community variance	0.508	0.508	0.501	0.443	0.428	0.109
	(0.362, 0.714)	(0.361, 0.715)	(0.355, 0.706)	(0.299, 0.655)	(0.288, 0.636)	(0.051, 0.231)
B/n Mother variance	2.167	2.179	2.165	2.158	2.101	1.019
	(1.868, 2.515)	(1.878, 2.530)	(1.864, 2.514)	(1.816, 2.564)	(1.764, 2.503)	(0.773, 1.344)
/cut 1	-0.927°	-0.917 ^a	-0.904 ^a	-0.283 ^a	-0.144	0.804 ^a
	(-1.164, -0.690)	(-1.156, -0.678)	(-1.142,, -0.667)	(-0.541, -0.026)	(-0.416, 0.127)	(0.335, 1.272)
/cut 2	0.955 ^a	0.971 ^a	0.982 a	1.617 ^a	1.752 ^a	2.706 ^a
	(0.717, 1.192)	(0.731, 1.211)	(0.744, 1.221)	(1.355, 1.879)	(1.476, 2.029)	(2.229, 3.183)
/cut 3	2.912 ^a	2.934 ^a	2.943 ^a	3.633 ^a	3.763 ^a	4.722 ^a
	(2.657, 3.167)	(2.677, 3.191)	(2.688, 3.199)	(3.346, 3.921)	(3.463, 4.063)	(4.220, 5.224)
Log likelihood	-9602.158	-9566.514	-9562.649	-8275.384	-8261.028	-6839.440
Wald chi2(1)	701.43	711.09	717.95	739.48	761.28	180.94
Prob>chi2	0.000	0.000	0.000	0.000	0.000	0.000

Notes: ^{a, b} and ^c refer to significant effect at the 1 percent, 5 percent and 10 percent levels of significance respectively

Full Article Here

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Theo Niyonsenga is Associate Professor of Biostatistics at the University of Canberra. He has more than 30 years' experience working as a Biostatistician in research, teaching, and statistical consulting for public health agencies. He held academic positions at Florida International University and the University of South Australia before moving to University of Canberra. Building on a mathematics degree, Dr Niyonsenga has accumulated extensive knowledge of and experience in contemporary statistical methods. His expertise includes multivariate analysis methods such as structural equations modelling and applied advanced statistical methods for longitudinal and multi-level data, and spatial statistics with applications epidemiology. He has developed in-depth knowledge and relevant methodological expertise in areas with important public health significance, particularly mental health and cardiovascular disease.

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GANESAN: "The Right to Food and

Freedom of Choice: Should Meat be



OP-ED FROM DISHA TRIVEDI: "The State of Adolescent Learning", The Hindu, April 12. Link.

Banned During Religious Festivals?", *TimesNow,* April 6, 2022. <u>Link.</u>

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Dongre, N.L. 2022. "The Caste System is Not Merely a Division of Labour: It Is Also a Division of Labourers", *Working Paper*, <u>Link</u>.

Ahmed, Tanima. 2022. "Pro-Girl Attitudes and Childhood Stunting in India", *Journal of Asian and African*Studies, https://doi.org/10.1177/00219096221086542. Link.

Roy, Sutirtha Sinha and Roy van der Weide. 2022. "Poverty in India Has Declined over the Last Decade but Not as Much as Previously Thought", *Policy Research Working Paper 9994*, Washington D.C.: Poverty and Equity Global Practice and Development Research Group, World Bank. <u>Link</u>.

Kukreja, Rolly. 2022. "Essays on Political Economy and Institutions", PhD Thesis submitted to the Indian Statistical Institute, New Delhi. Link.

Gupta, Seema. 2022. "Multidimensional Poverty Dynamics: Social Protection and Its Implication on Rural Poverty Dynamics in India", PhD Thesis submitted to the Department of Economics, SOAS, University of London. <u>Link</u>.

Desai, Sonal. 2022. "Building Capacity for Leveraging Longitudinal Data for Evaluation", in A. Desai and U. Prasad (eds.), *M&E@70: Strengthening India's*

Evidence Systems for Accelerated Reforms and Inclusive Growth. New Delhi: Development Monitoring and Evaluation Office, National Institution for Transforming India (NITI) Aayog. <u>Link</u>.

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ABOUT IHDS

The India Human Development Survey (IHDS) is a nationally representative, multi-topic survey of 41,554 households in 1503 villages and 971 urban neighbourhoods across India. The first round of interviews was completed in 2004-05; data are publicly available through ICPSR. A second round of IHDS re-interviewed most of these households in 2011-12 (N=42,152) and data for the same can be found here. IHDS 3 is in development and expected to be in the field in 2021.

IHDS 3 has been jointly organised by researchers from the University of Maryland, the National Council of Applied Economic Research (NCAER), Indiana University and the University of Michigan. Funding for the second round of this survey is provided by the National Institutes of Health, grants R01HD041455 and R01HD061048. Additional funding is provided by The Ford Foundation, IDRC and DFID.

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