



## WOMEN DEVELOPMENT

- **‘Women Don’t Get Same Opportunities As Men Even After Delaying Marriage, Childbirth’**



## COVID-19

- **COVID-19 Disrupted India’s Routine Health Services**
- **‘COVID Can Cause Entire Spectrum Of Heart Disease’**
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- **How Large-Scale Solar Could Create More Problems Than It Solves**

# Weekly Livelihoods Update

30 August 2020

- **'Women Don't Get Same Opportunities As Men Even After Delaying Marriage, Childbirth'** - Indian women working in STEM (science, technology, engineering and mathematics) jobs in India are likely dropping out due to gender discrimination, like their counterparts in developed countries, said Sai Krishna Kumaraswamy, a co-author of a recent report by the World Bank on advancing women's participation in this domain. "Global trends indicate low participation rates and high attrition rates for women in STEM jobs," he said in an email interview. While data are lacking on India, it is likely, he said, that some of the women dropping out of the workforce in India are in STEM jobs. This is despite the fact, he stressed, "that there is greater gender parity in STEM college enrolment in India than in upper-middle or high income countries". Male domination of some STEM fields creates "a chilly climate of STEM", Sai Krishna said. Women are treated as less competent, feel slighted and isolated, are paid less and denied promotions. Even when they delay marriage and children, they do not get the same opportunities as men, he added. [For further reading: <https://www.indiaspend.com/women-dont-get-same-opportunities-as-men-even-after-delaying-marriage-childbirth/> ]
- **COVID-19 Disrupted India's Routine Health Services** - The scale of disruption in routine health services in the wake of the COVID-19 pandemic in India is even larger than was earlier estimated, new official data show. April 2020 saw a higher fall in immunisations, maternal health interventions and treatments of conditions including kidney failure and cancer than in March 2020, while some indicators showed signs of revival in May and June. These delays could lead to long-term health effects, experts say. The National Health Mission's Health Management Information System (NHM-HMIS) tracks indicators on utilisation of health services from over 200,000 health facilities, from primary health centres to district hospitals in every district of the country and is updated nearly every day. These health facilities are predominantly in rural areas and in the public sector. Earlier this year, March 2020 data, after just a week of the lockdown, showed that health services were severely curtailed in the country as compared to previous months in 2020 and to March 2019. Subsequently, the NHM stopped publishing these data. This week, the NHM published updated data for April,

May and June. [For further reading: <https://www.indiaspend.com/covid-19-disrupted-indias-routine-health-services/> ]

- **'COVID Can Cause Entire Spectrum Of Heart Disease'** - COVID-19 is affecting the heart, as studies have shown, and patients with pre-existing heart conditions also have a higher incidence of severe disease, making it a double-edged sword, Sameer Gupta, an interventional cardiologist at the Metro Hospitals and Heart Institute in Delhi, says. Recovered COVID-19 patients are coming back with stress cardiomyopathy--a temporary weakening of the heart muscle--and myocarditis (weakness of the heart muscle due to inflammation), Gupta says in this interview, explaining that this is an effect of the massive infection or inflammation, and not of the virus itself. Gupta specialises in interventional cardiovascular and peripheral procedures. He completed his medicine residency at Penn State University, his fellowship at the University of South Florida, and interventional cardiology fellowship at the University of Chicago. Gupta has recovered from COVID-19 himself. [For further reading: <https://www.indiaspend.com/covid-can-cause-entire-spectrum-of-heart-disease/> ]
- **Covid-19: 'Indian Exceptionalism' May Not Explain Low Mortality** - New survey estimates are producing COVID-19 fatality rates for India that are lower than virtually anywhere else in the world by orders of magnitude. But the current narrative around these fatality rates could be doing a disservice to India's understanding of the disease by being too quick to attribute them to the government's "successful strategies" rather than searching for the underlying biological and sociological causes that could explain them, experts say. The Indian government frequently reiterates that India's COVID-19 mortality is particularly low compared to the rest of the world, and Prime Minister Narendra Modi has singled out this indicator for praise too. This claim has mostly relied on a crude measure called the case fatality rate (CFR). The CFR as it is currently being used is simply the total number of reported COVID-19 deaths by a particular date divided by the number of COVID-19 cases confirmed by that date. [For further reading: <https://www.indiaspend.com/covid-19-indian-exceptionalism-may-not-explain-low-mortality/> ]
- **How Large-Scale Solar Could Create More Problems Than It Solves** - From just over 11 megawatt (MW) of solar in 2010, India had installed 35.1 gigawatt (GW) of solar power as of June 2020, scaling up its solar capacity by over 3,000 times in less than a decade. Riding on political support, business interest, as well as positive public opinion, large-

scale solar projects have come to be viewed as the silver bullet to India's energy demands while mitigating carbon emissions. Large-scale solar projects, which make up the preponderant share of 32.3 GW in India's overall solar capacity, are exempted from environmental processes and public hearings. The biggest projects are fast-tracked and incentivised through various schemes. In solar parks, the state government acquires the land, sets up ancillary infrastructure and invites multiple private players to bid and set up for 'plug and play' installations, as in the Pavagada solar park in Karnataka. Then there are the standalone projects, such as Kamuthi in Tamil Nadu, where a single private firm wins the bid to build and operate. (In contrast, rooftop solar installations, typically of smaller-scale, total up to 2,817 MW.) [For further reading: <https://earthcheck.indiaspend.com/how-large-scale-solar-could-create-more-problems-than-it-solves/> ]