

Social Sectors

Development and utilisation of human resources and the improvement in the overall quality of life of the people are central to any development planning. There are, however, two-way linkages between human development and overall economic progress. Sustained high economic growth is a necessary condition and a significant driver of human development. On the other hand, if people are healthy, educated and adequately skilled, they can participate fully and contribute more to economic development process. The Tenth Five Year Plan recognized these linkages while laying down monitorable targets for human development for the Plan.

10.2 Over the years, India has made substantial progress in human development. Sustained and high economic growth in the post-reform period reduced the poverty ratio significantly. There was also noteworthy improvement in the literacy rates over time leading to a decline in the absolute number of illiterates. However, India's overall performance on human development has been mixed in the last decade. Improvements in health indicators like life expectancy and infant mortality rates have been much slower than expected. There is widespread undernutrition among women and children, and maternal and child health still remain areas of concern.

10.3 UNDP's global Human Development Report (HDR) for 2005 ranks India at 127 out of 177 countries of the world in terms of a composite Human Development Index (HDI) for 2003 (Table 10.1). Between 2000 and 2003, while the absolute values of HDI and Gender Development Index (GDI) consistently improved for India, its ranking remained invariant at 127 consecutively for three years in a row. On the other hand, some of India's neighbours not only improved their HDI and GDI values, but also improved their relative ranks.

Country	Human development index (HDI)		HDI Rank		Gender development index (GDI)		GDI Rank	
	2000	2003	2000	2003	2000	2003	2000	2003
Norway	0.942	0.963	1	1	0.941	0.960	3	1
Australia	0.939	0.955	5	3	0.956	0.954	1	2
Sri Lanka	0.741	0.751	89	93	0.737	0.747	70	66
China	0.726	0.755	96	85	0.724	0.754	77	64
Indonesia	0.684	0.697	110	110	0.678	0.691	91	87
India	0.577	0.602	124	127	0.560	0.586	105	98
Pakistan	0.499	0.527	138	135	0.468	0.508	120	107
Bangladesh	0.478	0.520	145	139	0.468	0.514	121	105
Nepal	0.490	0.526	142	136	0.470	0.511	119	106
Mozambique	0.322	0.379	170	168	0.307	0.365	144	133
Niger	0.277	0.281	172	177	0.263	0.271	146	140

Table 10.1 : India's global position on human and gender development
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10.4 Progress of social development has varied across States. While Kerala stood apart from the rest and achieved high levels of human development comparable to the rich developed countries, the so called 'BIMARU' states (viz. Bihar, Madhya Pradesh, Rajasthan and Uttar Pradesh) fared particularly badly. Social sector subjects mostly fall under the State list. However, guided by the objectives laid down in the National Common Minimum Programme (NCMP), the Central Government has launched certain major initiatives for social sector development (Box 10.1).

10.5 The launching of the National Rural Employment Guarantee Scheme (NREGS) on February 2, 2006 to provide enhanced livelihood security for the poor in rural areas by providing at least 100 days of guaranteed wage employment in every financial year to every household whose adult members volunteer to do unskilled manual work constituted a major milestone in the social sector in 2005-06 (Box 10.2).

10.6 Central Government also provides assistance to the States for social sector development in the form of central assistance to States Plan, centrally sponsored schemes (CSS), special central assistance and additional central assistance. Expenditure of the Central Government on social services including rural development increased from Rs.18,240 crore in 1995-96 to Rs. 70,910 crore in 2005-06 (BE) (Table 10.2).

10.7 Trends of expenditure on social services by the general government (Centre and States combined) in the recent years reflect the emphasis on the social sector. (Table 10.3).

(a) Expenditure on social sectors as a proportion of total expenditure after decreasing from 22.3 per cent in

Box 10.1 : Major initiatives in the Social Sector undertaken in 2005-06

- National Rural Employment Guarantee Scheme launched.
- An ambitious programme for creation of rural infrastructure viz, **Bharat Nirman** has been launched to bring an additional one crore hectares under assured irrigation; to connect all villages with a population of 1000 (500 in hilly/tribal areas) with a road; to construct 60 lakh additional houses for the poor; to provide drinking water to the remaining 74,000 habitations; to reach electricity to the remaining 1,25,000 villages and offer electricity connection to 2.3 crore households; and to provide telephone connectivity to the remaining 66,822 villages.
- Allocation for National Food for Work programme increased from Rs.4,020 crore in 2004-05 to Rs.11,000 crore in 2005-06. Programme to be converted into the National Rural Employment Guarantee Scheme.
- National Rural Health Mission (NRHM) has been launched on April 12, 2005 with the objective of providing greater access of the rural population especially the rural poor to the public health care facilities. Major components of the programme include training of health volunteers, providing more medicines and strengthening the primary and community health centres. NRHM has an initial outlay of Rs. 6, 731 crore in 2005-06 (BE).
- Antyodaya Anna Yojana: Coverage increased to 2.5 crore families in 2005-06 from 2 crore in 2004-05.
- Mid Day Meal Scheme: Increase in allocation from Rs. 1,675 crore in 2004-05 to Rs.3,010 crore in 2005-06.
- Sarva Shiksha Abhiyan: Allocation increased to Rs.7,156 crore in 2005-06 from Rs. 5080 crore in 2004-05. A non-lapsable fund called "Prarambhik Shiksha Kosh" has been created on November 14, 2005 for funding the programme.
- **Rural Infrastructure Development Fund:** The budget for 2005-06 had announced a corpus of Rs.8,000 crore in 2005-06.
- Jawahar Lal Nehru National Urban Renewal Mission (JLNNURM) has been launched on December 3, 2005 in selected cities which include an urban infrastructure development scheme for small and medium towns to provide reform linked assistance to the state Governments for infrastructure projects including water supply and sewerage projects for all towns and cities.

Box 10.2 : National Rural Employment Guarantee Act 2005

The National Rural Employment Guarantee Act was notified on September 7, 2005 and the scheme launched on February 2, 2006. The on-going programmes of Sampoorna Grameen Rozgar Yojana (SGRY) and National Food For Work Programme (NFFWP) will be subsumed within the NREGS in the 200 districts identified in the initial stage. All the districts in the country will be covered under the scheme within five years.

The objective of the Act is to enhance the livelihood security of the people in rural areas by generating wage employment through works that develop the infrastructure base of that area. The choice of work suggested addresses the causes of chronic poverty like drought, deforestation, and soil erosion. The objective behind suggesting certain key activities/works is to rejuvenate the natural resources of the area to stimulate the local economy enabling those who work for wage employment in creating an asset to take advantage of it to engage in productive ways of self-employment, and augment their income.

Implementation of the Act calls for the formulation of NREGSs by the State Governments. Section 4 of the Act provides that within six months from the date of commencement of the Act, every State Government shall, by notification, make a scheme for providing not less than 100 days of guaranteed employment in a financial year to every household in the rural areas covered under the scheme and whose adult members volunteer to do unskilled manual work subject to the conditions laid down in the Act.

Table 10.2 Central Government expenditure (Plan and Non-Plan)

2000-01 to 19.7 per cent in 2003-04, increased to 20.7 per cent in 2004-05 and further to 20.9 per cent in 2005-06 (BE).

increased from 9.7 per cent in 2003-04 to 10.1 per cent in 2005-06 (BE).

- (c) Similarly in respect of the health sector, the share in total expenditure increased from 4.4 per cent to 4.9 per cent between 2003-04 and 2005-06 (BE).
- (b) Expenditure on education as a proportion of total expenditure has

								(R	s. Crore)
So	ocia	Il service	1995-96	2000-01	2001-02	2002-03	2003-04	2004-05 (RE)	2005-06 (BE)
1.	So	cial service							
	a.	Education, Sports, Youth Affairs	3,630	7,696	8,642	9,885	10,917	13,358	18,175
	b.	Health & Family Welfare	2,542	5,291	5,977	6,521	6,856	7,900	9,697
	c.	Water Supply, Housing etc.	1,756	4,932	5,989	6,815	7,117	8,272	9,364
	d.	Information & Broadcasting	596	1,317	1,284	1,395	1,270	1,321	1,472
	e.	Welfare of SC/ST and OBC	800	968	1,093	1,152	1,144	1,270	1,508
	f.	Labour & Employment	507	894	847	771	827	1,022	1191
	g.	Social welfare & Nutrition	1,270	2,409	2,620	2,372	2,173	2,423	3,819
	h.	North-Eastern areas					4,193	6,378	9,143
	i.	Other Social Services	530	1,715	2,010	438	727	1,948	818
		Total	11,631	25,222	28,462	29,349	35,24	43,892	55,187
2.	Ru	ral Development	6,609	4,449	6,241	11,960	11,389	8,598	11,503
3.	I)	Pradhan Mantri Gramodaya Yojana (PMGY)*		2,350	2,533	2,600	2,400	2,766	_
	ii).	Pradhan Mantri Gram Sadak Yojana (PMGSY)*		2,500	2,500	2,500	2,325	2,468	4,220
4.		cial Service, Rural Dev, PMGY and PMGSY +2+3)	18,240	34,521	39,736	45,440	51,497	57,724	70,910

* : Launched in 2000-01 (BE) as a new initiative for basic rural needs. However, PMGY has been discontinued from 2005-06.

Source : Budget documents.

	Table 10.3 : Trends of social sector expenditure by General Government (Centre and State Governments combined)								
ITEMS	2000-01 Actual	2001 -02 Actual	2002 -03 Actual	2003-04 Actual	2004 -05 RE	2005 -06 BE			
Centre & States (In billions of Rupees)									
Total expenditure	5913	6447	7049	7964	9045	9798			
Expenditure on social sector	1318	1378	1452	1569	1869	2052			
Education	670	681	725	769	898	992			
Health	280	286	315	348	415	477			
Others	368	412	412	452	556	582			
As a proportion of GDP: (In per cent)									
Total expenditure	28.05	28.26	28.77	32.37	28.97	27.76			
Expenditure on social sector	6.25	6.04	5.92	5.68	5.98	5.81			
Education	3.17	2.98	2.95	2.78	2.87	2.81			
Health	1.32	1.25	1.28	1.26	1.32	1.35			
Others	1.74	1.80	1.68	1.63	1.78	1.64			
As a proportion of total expend	iture:								
Expenditure on social sector	22.3	21.4	20.6	19.7	20.7	20.9			
Education	11.3	10.6	10.3	9.7	9.9	10.1			
Health	4.7	4.4	4.5	4.4	4.6	4.9			
Others	6.2	6.4	5.8	5.7	6.1	5.9			
As a proportion of social sector	or expenditu	е							
Education	51	49	50	49	48	48			
Health	21	21	22	22	22	23			
Others	28	30	28	29	30	28			
Source : Budget documents of L	Inion and Sta	te Governmer	nts/RBI.						

(d) Expenditure on the social sector as a proportion of GDP has also gone up from 5.68 per cent in 2003-04 to 5.81 per cent in 2005-06 (BE).

Poverty

10.8 Incidence of poverty is estimated by the Planning Commission on the basis of the large scale quinquennial sample surveys on household consumer expenditure conducted by the National Sample Survey Organisation (NSSO). The latest such survey relates to the 55th round conducted in 1999-2000, and no official estimates of poverty are available beyond this date. Economic Surveys for 2003-2004 and 2004-2005, on the basis of results of the 55th round, had indicated that there has been an impressive decline in the incidence of poverty in the 1990s. However, the extent of the actual decline in the proportion below the poverty line (BPL) between 1993-99 and 1999-2000 has been a subject of an intense debate by academicians because of the change in methodology for collection of basic data in 1999-2000 and possible noncomparability with earlier rounds of the

consumer expenditure surveys. The next official estimates of poverty incidence will be based on the NSSO 61st round of large-scale sample survey conducted in 2004-05, results of which are expected to be published in 2006.

Poverty alleviation and employment generation programmes

10.9 Poverty reduction has been an important goal of development policy since the inception of planning in India. Various antipoverty, employment generation and basic services programmes have been in operation for decades in India (Box 10.3). The ongoing reforms attach great importance to removal of poverty, and addressing specifically the wide variations across States and the rural-urban divide. Anti-poverty strategy has three broad components: promotion of economic growth; promotion of human development; and targeted programmes of poverty alleviation to address multi-dimensional nature of poverty. The various programmes targeted at the poor have been streamlined and strengthened in recent years, including through the NREGS.

Box 10.3 : Anti-poverty, employment generation and basic services programmes

(a) Pradhan Mantri Gram Sadak Yojana (PMGSY)

Launched in December 2000 as a 100 per cent CSS, PMGSY aims to provide all-weather connectivity to all the eligible unconnected rural habitations. Bharat Nirman, envisages connectivity by 2009 to all the habitations with a population of 1000 or more in the plains, and of 500 or more in the hilly, desert and tribal areas. The systematic upgradation of the existing rural road network also is an integral component of the scheme, funded mainly from the accruals of diesel cess in the Central Road Fund, with support of the multilateral funding agencies and the domestic financial institutions. Up to December 2005, with an expenditure of Rs.12,049 crore, a total length of 82,718 km. of road works had been completed.

(b) Indira Awaas Yojana (IAY)

IAY aims to provide dwelling units, free of cost, to the Scheduled Castes (SCs), Scheduled Tribes (STs), and freed bonded labourers, and also the non-SC/ST BPL families in rural areas. It is funded on a cost-sharing basis in the rates of 75.25 between the Centre and the States. Under IAY, the ceiling on construction assistance is Rs.25,000/- per unit in the plains and Rs.27,500/- for hilly/difficult areas; and Rs. 12,500/- on upgradation of unserviceable kutcha house to pucca/semi pucca house for all areas. Up to January 30, 2006, about 138 lakh houses had been constructed/upgraded with an expenditure of Rs.25,208 crore.

(c) Swarnjayanti Gram Swarozgar Yojana (SGSY)

SGSY, launched in April, 1999 after restructuring the Integrated Rural Development Programme and allied schemes, is the only self-employment programme for the rural poor. The objective is to bring the self-employed above the poverty line by providing them income-generating assets through bank credit and Government subsidy. Up to November 2005, the Centre and States, sharing the costs on 75:25 basis, had allocated Rs.8,067 crore, of which Rs. 6,980 crore had been utilized to assist 62.75 lakh self-employed.

(d) Sampoorna Grameen Rozgar Yojana (SGRY)

SGRY, launched on September 25, 2001 to provide additional wage employment in the rural areas, has a cash and food grains component, and the Centre bears 75 per cent and 100 per cent of the cost of the two with the balance borne by the States/UTs. In 2004-05, 82.23 crore persondays were generated with the Centre releasing Rs. 4,496 crore as cash component and about 50 lakh tonnes of foodgrains to the States/UTs. Besides, under the special component of the SGRY, with the States/UTs meeting the cash components, Centre released 26 lakh tonnes of foodgrains to the 13 calamity affected States. In 2005-06 up to November, 2005, the number of persondays generated under SGRY was 48.75 crore, while the Centre's contributions in terms of the cash and foodgrains components up to January, 2006 were Rs. 4651 crore and 35 lakh tonnes, respectively. Under the special component, about 11.65 lakh tonnes of foodgrains have been released to the 11 calamity-hit States in the current year

(e) National Food for Work Programme (NFFWP)

The NFFWP was launched as a CSS in November 2004 in the 150 most backward districts to generate additional supplementary wage employment with food security. States receive food grains under NFFWP free of cost. The focus of the programme is on works relating to water conservation, drought proofing (including aforestation /tree plantation), land development, flood-control/protection (including drainage in waterlogged areas), and rural connectivity in terms of all-weather roads. In 2004-05, allocation of Rs 2,020 crore and 20 lakh tonnes of foodgrains generated 7.85 crore persondays of employment. In 2005-06, of the allocation of Rs 4,500 crore and 15 lakh tonnes of food grains (Revised), Rs.2,219 crore and 11.58 lakh metric tonnes of foodgrains had been released up to January 27, 2006. About 17.03 lakh persondays were generated up to December 2005.

(f) DPAP, DDP and IWDP

Drought Prone Areas Programme (DPAP) was launched in 1973-74 to tackle the special problems faced by those areas constantly affected by severe drought conditions. Desert Development Programme (DDP) was launched in 1977-78 to mitigate the adverse effects of desertification. Integrated Wastelands Development Programme (IWDP) has been under implementation since 1989-90 for the development of wastelands/

degraded lands. The basis of implementation has been shifted from sectoral to watershed basis from April 1995.

For 2005-06, Rs.353 crore, Rs.268 crore and Rs.485 crore have been allocated for DPAP, DDP and IWDP, respectively. So far in 2005-06 up to October, 2005, 3000 new projects covering 15 lakh ha., 2000 new projects covering 10 lakh ha. and 340 new projects covering 16 lakh ha. have been sanctioned under DPAP, DDP and IWDP, respectively.

(g) Swarna Jayanti Shahari Rozgar Yojana (SJSRY)

In December 1997, the Urban Self-Employment Programme (USEP) and the Urban Wage Employment Programme (UWEP), which are the two special components of the SJSRY, substituted for various programmes operated earlier for urban poverty alleviation. The SJSRY is funded on a 75:25 basis between the Centre and the States. In 2003-04, the central allocation of Rs. 94.50 crore plus Rs. 10.50 crore for North-Eastern Region including Sikkim was fully utilized. Even 2004-05 saw the release of the entire budgetary allocation of Rs. 122.00 crore. In 2005-06, out of an allocation of Rs. 160.00 crore, Rs. 84.52 crore had been utilized until November 30, 2005.

Physical performance of special employment and poverty alleviation programmes in urban areas (in lakhs)

Programmes			2003-04		004-05	20	005-06	
			Target	Achievement	Target	Achievement	Target	Achievement
I.	SJS	RY						
	(i)	USEP Beneficiaries under USEP	-	0.64	_	0.69	_	0.23
	(ii)	Beneficiaries assisted under Development of Women and						
		Children in Urban Areas (DWC	:UA) –	0.36	-	0.37	-	0.22
		Total	0.80	1.00	0.80	1.06	0.80	0.45
	(iii)	Persons trained	1.00	1.22	1.00	1.60	1.00	0.13
II.		EP – mandays of ployment generated	_	49.63	_	41.24	_	25.19
III.		eficiaries covered under munity structure component	_	325.58*	_	337.15*	_	337.40

(h) Valmiki Ambedkar Awas Yojana (VAMBAY)

VAMBAY, launched in December 2001, facilitates the construction and up-gradation of dwelling units for the slum dwellers, and provides a healthy and enabling urban environment through community toilets under Nirmal Bharat Abhiyan, a component of the Scheme. The Central Government provides a subsidy of 50 per cent, with the balance provided by the State Government. Since its inception and up-to December, 31 2005, Rs. 866.16 crore had been released as Central subsidy for the construction/upgradation of 4,11,478 dwelling units and 64,247 toilet seats under the Scheme. For 2005-06, out of the tentative Central allocation of Rs. 249 crore, up to December 31, 2005, an amount of Rs.96.4 crore had been released covering 60,335 dwelling units and 381 toilet seats.

Employment and unemployment

10.10 As part of the annual series in the 60th round of the NSSO, an all-India survey on the situation of employment and unemployment was conducted in January to June, 2004 with a moderately large sample of households. The survey points out the large rural-urban

and male-female divide in not only literacy, but also in employment and wages (Box 10.4). Between the rural and urban segments, there are differentials among the usual principal status, current weekly status, and current daily status of unemployment. In respect of current daily status (of unemployment),

Box 10.4: Results of 60th round of NSSO survey on employment and unemployment situation conducted in January-June 2004

- About 72 per cent of households belonged to rural India and accounted for nearly 75 per cent of total population. The average household size for the rural sector at 5.0 is higher than the urban average of 4.5.
- Male literacy was 62 per cent and 80 per cent in rural and urban areas, respectively. In females, the corresponding rates were 43 per cent and 68 per cent.
- According to the usual principal and subsidiary statuses taken together (called 'all' usual status), nearly 44 (37) percent of the rural (urban) persons were in the labour force. The corresponding percentages for males (females) were 55 (32) in rural areas and 56 (16) in urban areas.
- In the usually employed ('all' workers) category, 57 per cent among males and nearly 62 per cent among females were self-employed. The corresponding proportions in urban India were 44 per cent for males and 45 per cent for females.
- In the rural areas, about 66 per cent of usually employed males and 84 per cent of usually employed females were engaged in the agricultural sector.
- In urban India, the tertiary sector engaged 59 per cent of male workers while secondary sector accounted for 35 per cent of the usually employed males. For females, the corresponding proportions were lower at 53 and 31 per cent.
- In rural India, on an average, per day, a male casual labourer earned Rs. 56.53, Rs. 20.38 more than a female causal labourer who earned Rs.36.15.
- In urban India, wage difference was more prominent. A male casual labourer in the urban areas earned Rs.75.51 in a day and female, Rs. 44.28 in a day.

particularly of the intermittent variety, the rate appears to be larger in rural areas than in urban areas (Table 10.4).

10.11 Some salient features of the trend of unemployment rates in the country are:

- The unemployment rate went up between 1993-94 to 2004. On the basis of current daily status (unemployed on an average in the reference week), during the reference period, unemployment rate for males increased from 5.6 per cent to 9.0 per cent in rural areas, and from 6.7 per cent to 8.1 per cent in urban areas (Table 10.5).
- Similarly, unemployment rate for females increased from 5.6 per cent in

1993-94 to 9.3 per cent in 2004 in rural areas and from 10.5 per cent to 11.7 per cent in urban areas.

- Furthermore, unemployment rates on the basis of current daily status were much higher than those on the basis of usual status (unemployed on an average in the reference year) implying a high degree of intermittent unemployment. This could be mainly because of the absence of regular employment for many workers.
- Urban unemployment rates (current daily status) were higher than rural unemployment rates for both males and

	Т	able 10.4 Une	employment	rates*		
						(all-India
Status		Rural			Urban	
	Male	Female	Total	Male	Female	Total
Usual-principal status	24	22	23	46	89	53
Current weekly status	47	45	46	57	90	64
Current daily status	90	93	91	81	117	88

* Unemployment rates (number of persons {or person days} unemployed per 1000 persons {or person days}) Source : NSSO's 60th Round Survey on Employment and Unemployment conducted in January-June 2004.

Table 10.5 : Unemployment rates* for 50th round (1993-94)and 60th round (January-June 2004) of the NSSO

(all-India)

		-				-
		Males			Females	
			R.	ural ———		
Round	Usual	CWS	CDS	Usual	CWS	CDS
60th (2004)	24	47	90	22	45	93
50th (1993-94)	20	30	56	14	30	56
		Males			Females	
			Urk	ban		
Round	Usual	CWS	CDS	Usual	CWS	CDS
60th (2004)	46	57	81	89	90	117
50th (1993-94)	45	52	67	83	84	105

*Unemployment rates (number of persons {or person days} unemployed per 1000 persons {or person days})

CWS : Current Weekly Status, CDS: Current Daily Status

Source : NSSO's 60th Round Survey on Employment and Unemployment conducted in January-June 2004.

females in 1993-94. However, in 2004, rural unemployment rates for males was higher than that of urban males.

 Unemployment rates varied sharply across States. States, where wages are higher than in neighbouring ones because of strong bargains or social security provisions, such as high minimum wage, had high incidence of unemployment, in general.

Indian labour laws and labour markets

10.12 Indian labour market is characterized by a sharp dichotomy. A large number of establishments in the unorganized sector remain outside any regulation, while the organized sector has been regulated fairly stringently. It can be reasonably argued that the organised sector has provided too much of job-security for too long, while the unorganized sector has provided too little to too many.

10.13 Various studies indicate that Indian labour laws are highly protective of labour, and labour markets are relatively inflexible. These laws apply only to the organized sector. Consequently, these laws have restricted labour mobility, have led to capital-intensive methods in the organized sector and adversely affected the sector's long-run demand for labour. Labour being a subject in the concurrent list, State-level labour regulations are also an important determinant of industrial performance. Evidence suggests that States, which have enacted more proworker regulations, have lost out on industrial production in general.

10.14 Perhaps there are lessons to be learnt from China in the area of labour reforms. China, with a history of extreme employment security, has drastically reformed its labour relations and created a new labour market, in which workers are highly mobile. Although there have been mass layoffs and open unemployment, high rates of industrial growth especially in the coastal regions helped their redeployment. In spite of hardship, workers in China seem to have benefited from wage growth, additional job creation and new opportunities for self employment.

Education

10.15 The National Policy on Education (NPE), 1986, as modified in 1992, emphasises three aspects in relation to elementary education:

- universal access and enrolment,
- universal retention of children up to 14 years of age, and
- a substantial improvement in the quality of education to enable all children to achieve essential levels of learning.

NPE emphasises that education must play a positive and interventionist role in correcting social and regional imbalance, empowering women, and in securing a rightful place for the disadvantaged and the minorities. Government is firmly committed to providing education for all, the priority areas being free and compulsory elementary education, covering children with special needs, eradication of illiteracy, education for women's equality, and special focus on the education of SCs/STs and Minorities.

10.16 NPE 1986 had set a goal of expenditure on education of 6 per cent of the GDP. As against this target, the combined total expenditure on education by Central and State Governments was 3.49 per cent of GDP in 2004-05(BE). Central Plan Allocation for education was increased from Rs.8,225 crore in 2004-05 (BE) to Rs. 15,244 crore in 2005-06 (BE), with Rs.12,242 crore for elementary education, Rs. 290 crore for adult education and Rs.2,712 crore for secondary and higher education.

Elementary Education

10.17 Allocation for elementary education in the Tenth Five Year Plan period (2002-07) at Rs.28,750 crore is 75 per cent higher than the allocation in the Ninth Plan. Resources for elementary education have been augmented through imposition of the education cess at the rate of 2 per cent on direct and indirect Central taxes imposed through Finance (No.2) Act, 2004. With the imposition of the education cess, budgeted outlay for elementary and adult education more than doubled from Rs. 6,000 crore in 2004-05 to Rs.12,532 crore in 2005-06.

10.18 Gross enrolment ratio (GER) indicates the proportion of children in the 6-14 years age group actually enrolled in elementary schools. It has increased progressively from 32.1 in 1950-51 to 84.91 in 2003-04. With the rate of increase in GER of girls higher than that of boys, the gender gap in enrolment is declining. Drop-out rate at the primary level (Classes I-V) declined from 39.0 per cent in 2001-02 to 31.4 per cent in 2003-04. As on October 2005, number of out-of-school children, as reported by States/UTs, was down to 95 lakh from 320 lakh in 2001.

Sarva Shiksha Abhiyan (SSA)

10.19 The main vehicle for providing elementary education to all children is the ongoing comprehensive programme called Sarva Siksha Abhiyan (SSA) launched in 2001-02. The goals of SSA are:-

- i) All children in School, Education Guarantee Centre, Alternate School, Back-to-School camp by 2005;
- ii) Bridge all gender and social category gaps at the primary stage by 2007 and at elementary education level by 2010;
- iii) Universal retention by 2010; and
- iv) Focus on elementary education of satisfactory quality with emphasis on education for life.

SSA, implemented in partnership with the States, addresses the needs of 209 million children in the age group of 6-14 years. It covers 9.72 lakh existing primary and upper primary schools and 36.95 lakh teachers.

10.20 National Programme for Education of Girls at Elementary Level (NPEGEL) is an important component of SSA. NPEGEL provides additional support by way of girl-child friendly schools, stationery, uniforms, etc. for girls' education in educationally backward blocks (EBB), and in other areas for elementary education of under privileged and disadvantaged sections. EBBs are blocks with female literacy below, and gender gap above, the national average. Apart from EBBs, NPEGEL is also implemented in blocks of districts which are not covered under EBBs but have at least 5 per cent SC/ST population and where SC/ST female literacy is below 10 per cent, and also in select urban slums. In the Tenth Five Year Plan, an amount of Rs.1064.80 crore has been earmarked for this programme.

10.21 Another important component of SSA is the Education Guarantee Scheme and Alternative and Innovative Education

(EGS&AIE). EGS&AIE is specially designed to provide access to elementary education to children in school-less habitations and out-ofschool children. It supports flexible strategies for out-of-school children through bridge courses, residential camps, drop-in centres, summer camps, remedial coaching, etc., and helped to provide elementary education to 85.67 lakh children in 2004-05.

Mid-Day Meal Scheme

10.22 The Centrally-sponsored Mid-Day Meal Scheme was revised and universalized at primary level with effect from September, 2004 to make a provision for providing cooked meals to children studying in Government, Government-aided, and local body schools and EGS&AIE centres. Besides providing foodgrains free of cost to the States/UTs, and foodgrains transportation subsidy, the Central Government provides assistance for converting foodgrains into cooked meal at a rate of Re. 1 per child per day.

The programme now covers nearly 12 crore children studying in over 9 lakh primary schools and EGS&AIE Centres. Budget provision for this scheme, which is the world's largest school feeding programme involving preparation of a hot meal everyday, for 2005-06 is Rs. 3345.26 crore.

Kasturba Gandhi Balika Vidyalaya (KGBV)

10.23 The KGBV scheme was launched in August, 2004 to set up 750 residential schools at elementary level for girls belonging predominantly to the SC, ST, OBC and minorities, in EBBs. All 750 KGBVs have now been sanctioned by the Government of India, with 117 KGBVs (15.6 per cent) allocated to blocks with substantial minority population. Budget provision for the scheme for 2005-06 is Rs.250 Crore.

Prarambhik Shiksha Kosh (PSK)

10.24 Department of Elementary Education and Literacy issued orders on November 14, 2005 constituting Prarambhik Shiksha Kosh (PSK) to receive the proceeds of the education cess imposed through Finance (No.2) Act, 2004. PSK is a separate, dedicated, nonlapsable fund to be maintained by the Ministry of Human Resource Development.

Adult education

10.25 Literacy rates in India have risen sharply from 18.3 per cent in 1951 to 64.8 per cent in 2001. Nevertheless, India continues to lag behind several other developing countries in the region such as China (86 per cent) and Sri Lanka (92 per cent). The National Literacy Mission (NLM) was launched on May 5, 1988 as a Technology Mission to impart functional literacy to non-literates in the country in the age group of 15-35 years in a time-bound manner. This age-group has been the focus of attention because they are in the productive and reproductive period of life. The NPE,1986, as modified in 1992, recognizes the NLM as one of the three instruments to eradicate illiteracy from the country, the other two being SSA and non-formal education.

10.26 NLM's objective is to attain a sustainable threshold literacy rate of 75 per cent by 2007. The Total Literacy Campaign (TLC) has been the principal strategy of National Literacy Mission for eradication of illiteracy in the target age-group. These campaigns implemented by Zilla Saksharata Samities (District Level Literacy Societies) are area-specific, time-bound, volunteer-based, cost effective and outcome-oriented.

10.27 At present, 137 districts are implementing TLCs, 165 districts Post Literacy Programmes and 295 districts Continuing Education Programmes. In addition, 157 Jan Shikshan Sansthan have been set up to provide vocational training to the neo-literates and backward sections of the society, and 25 State Resource Centres established for providing academic and technical resource support for the literacy programmes.

10.28 NLM has accorded priority for the promotion of female literacy. According to 2001 Census, 47 districts in the country have female literacy rate below 30 percent. Most of these districts are concentrated in Bihar, Jharkhand, Uttar Pradesh and Orissa. Special innovative projects have been taken up to raise the level of female literacy in these areas. Special efforts have been made to target female Panchayati Raj functionaries and make them literate.

Secondary and higher education

10.29 Secondary education prepares students in the age group of 14-18 years for entry into higher education and employment. The number of secondary and senior secondary schools increased from 1,07,140 in 1997-98 to 1,45,899 in 2003-04 with a total student enrolment of 35.01 million (Classes IX to XII). There has been an impressive growth in the area of higher education with an increase in annual student enrolment from 7.26 million in 1997-98 to 9.95 million in 2003-04. Enrolment of women students rose from 2.45 million in 1997-98 to 4.03 million in 2004-05, constituting 40.22 per cent of the total enrolment. As per NSSO survey (55th Round 1999-00), there were inequalities in enrolment in higher education across various social groups in rural and urban areas, and also in terms of gender. Women belonging to SC and ST and those living in rural areas are the most disadvantaged. A Constitution Amendment Bill has been passed by Parliament in December, 2005, which enables the State to make special provisions, by law, for admission of students belonging to SC, ST and socially and educationally backward classes to educational institutions, including aided and unaided private educational institutions, except minority institutions referred to in Article 30(1) of the Constitution.

Health

10.30 Considerable progress has been achieved in the area of health since independence (Table 10.6). But the situation is far from satisfactory. The National Health Policy (NHP), 2002 sets out the basic objective of achieving an acceptable standard of good health amongst the general population of the country. It lays emphasis on providing increased access to decentralized public health system, enhancing public health investment, and convergence of public programmes. The NCMP has also placed emphasis on raising public health investment with focus on primary health care and increased investment in programmes to control communicable diseases. It envisages an increase in public spending on health to 2-3 per cent of GDP by increased contributions from the Central and State Governments. Towards this end the Government has launched a National Rural Health Mission (NRHM) (Box 10.5).

10.31 An Integrated Disease Surveillance Programme to strengthen surveillance of communicable diseases and of risk factors for non-communicable diseases was launched by the Government in November 2004. Plan outlay for the Central Health Sector Schemes in 2005-06 is Rs.2908 crore. About 55 per cent of the Plan outlay continues to be spent on centrally sponsored disease control programme for major communicable and noncommunicable diseases like malaria, tuberculosis (T.B.), leprosy, AIDS, blindness, cancer and mental disorders.

1951 1981 2004 (Period/Source)							
		1301	2004	· /			
SC/PHC/CHC*	725	57,353	1,68,986	Sept.2004-RHS**			
Dispensaries and Hospitals (all)	9,209	23,555	38,031	Jan.1, 2002-CBHI***			
Beds (Private & Public)	1,17,198	5,69,495	9,14,543	Jan.1, 2002-CBHI***			
Nursing Personnel	18,054	1,43,887	8,36,000	(2004)			
Doctors (Modern System)	61,800	2,68,700	6,25,131	(2004 MCI @)			
Malaria (Cases in Million)	75	2.7	1.84	(2004)			
Leprosy (Cases/10,000 population)	38.1	57.3	1.17	(Sept. 2005)			
Polio (no. of cases)	29,709	225	57	(Dec. 2005)			

* SC/PHC/CHC: Sub Centres/Primary Health Centres/Community Health Centres

** RHS: Rural Health Statistics

*** CBHI: Central Bureau of Health Intelligence

@ MCI: Medical Council of India

National Vector Borne Disease Control Programme (NVBDCP)

10.32 The main objective of NVBDCP, initiated in 2003-04 through convergence of three programmes on Malaria, Kala-azar and Filaria, and inclusion of Japanese Encephalitis and Dengue, is prevention and efficient control of vector borne diseases. In tandem with goals set under the NHP 2002, the mission of NVBDCP is integrated and accelerated action towards reducing mortality on account of malaria, dengue, Japanese encephalitis by a half and elimination of Kala-azar by 2010, and elimination of Lymphatic Filariasis by 2015.

10.33 The annual overall incidence of malaria has been brought down to less than 2 million cases over the last decade. Due to concerted implementation of strategies there has been a decline of 4.8 per cent in the reported cases in the current year as compared to the corresponding period of the previous year. About 95 per cent of the population of the country is in the malaria-endemic areas, and 80 per cent of malaria burden is confined in areas comprising 20 per cent of population that is mainly in tribal, hilly, difficult and inaccessible areas. 100 hardcore malaria districts in 8 States have been identified as high risk for enhanced support to 1045 tribal PHCs in these districts to intensify malaria control. In the effort towards elimination of filaria, the single dose mass drug administration initiated in 13 districts in 1997 was expanded in 2005 to 243 districts covering over 500 million population.

Tuberculosis

10.34 The Revised National T.B. Control Programme (RNTCP), using Directly Observed Treatment Shortcourse (DOTS) strategy, is being implemented in the country in a phased manner since 1997, with assistance from World Bank, Danish International Development Agency (DANIDA), Department for International Development (DFID), United States Agency for International Development (USAID), Global Drugs Facility (GDF) and Global Funds for Aids, T.B and Malaria (GFATM). By November 2005, 1065 million (95 per cent) of the country's population in 607 districts/reporting units were covered under the programme, and the entire country is expected to be fully covered shortly. Till date, the RNTCP has placed more than 49 lakh patients on DOTS treatment, thus saving about 8.8 lakhs additional lives.

Leprosy

10.35 The prevalence rate of leprosy per 10,000 has fallen significantly from an estimated 57.3 in 1981 to only 1.17 in September 2005. The goal of elimination of leprosy (prevalence rate of less than 1/10,000) has been achieved by 25 States; and another six States are very near the goal. The National Leprosy Eradication Programme, after the completion of World Bank support in December 2004, is continuing with Government of India support.

HIV/AIDS

10.36 HIV estimate in India for 2004 indicates 5.134 million cases and a prevalence rate of 0.9 per cent among the adult population. India has the second largest population of HIV-infected people, next to South Africa. Although the level of HIV infection appears to have stabilised in some States, such as Andhra Pradesh, Maharashtra and Tamil Nadu, it is still increasing amongst the high risk population in several other States. As a result, HIV prevalence continues to rise. Until November, 2005, 1,16,905 AIDS cases had been reported and the cumulative number of deaths reported due to AIDS till November, 2005 was 8,286. Unsafe sex is responsible for 86 per cent of the reported HIV/AIDS infections in India. These figures are a cause of concern as persons infected with HIV will progress to AIDS, resulting in a steep increase in number of AIDS patients in the country with consequent medical, economic and social implications.

10.37 In order to pay greater attention towards HIV/AIDS, there is a National Council on AIDS headed by the Prime Minister. National AIDS Control Policy, 2002 aims at prevention of further spread of HIV, reducing impact of HIV on health of people and socio

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economic development and achieve zero rate of growth of new infections by the year 2007. Anti-retroviral treatment (ART) was started from April 1, 2004 from eight government hospitals. Currently, 52 government hospitals are providing free ART services to 23,784 patients in 18 states. 48 additional centres have been identified for starting free ART services. Extensive condom promotion is being undertaken to control the problem of unsafe sex.

Control of non-communicable diseases (NCDs)

10.38 Non-communicable diseases (NCDs) cover a wide range of heterogeneous conditions affecting different organs and system in different age and socio-economic groups. Over the last two decades, morbidity and mortality due to cardiovascular diseases, mental disorders, cancers and trauma have been rising with increase in the number of senior citizens with high prevalence of these NCDs. Prevalence of NCDs in younger people is also on the rise with life-style changes, obesity and stress, and exposure to environmental risk factors and use of tobacco. Heart disease has become one of the leading causes of death in both urban and rural population. Similarly, there is a rising trend in prevalence of diabetes. Trauma and accidents are increasing gradually with rapid urbanisation and change in the lifestyle. It is estimated that more than one death is due to trauma every minute, or more than 1,800 deaths every day.

10.39 The National Mental Health Programme in the Tenth Plan is a new initiative with an outlay of Rs. 130 crore to enhance the coverage of the District Mental Health Programme from the existing 27 districts to 100 districts in the country. For reducing death due to trauma and for providing medical assistance within the golden hour, financial assistance is being provided to Government hospitals located on the national highways for upgradation and strengthening of emergency facilities. 27 hospitals in 17 States were granted assistance in the first two years of the 10th Plan.

Blindness

10.40 Of the total estimated 45 million blind persons in the world, 7 million are in India. Due to the large population base and increased life expectancy, the number of cases is expected to increase in the coming years. While cataract continues to be the major cause of blindness, other emerging causes include diabetic retinopathy and glaucoma. The National Programme for Control of Blindness has resulted in an increase in cataract surgery from 15 lakh in 1992-93 to 45 lakh in 2004-05. The outcome after cataract surgery has improved mainly due to the large number of implantations. The target cataract operations in 2002-07 is 211 lakh.

Cancer

10.41 It is estimated that there are nearly 2–2.5 million cancer cases at any given point of time. There are 7-9 lakh new cases of cancer and approximately 4 lakh deaths occur annually due to cancer. The National Cancer Control Programme has augmented the number of Regional Cancer Centres from 12 in 1995 to 22 at present. Since 50 per cent of cancer is related to tobacco, a comprehensive legislation for discouraging the use of tobacco was notified in 2003.

Integrated Disease Surveillance Project

10.42 Under Integrated Disease Surveillance Project, launched as a new scheme in November 2004 and to be implemented through States and District Surveillance units, activities were initiated in 19 States during 2005-06. District and peripheral laboratories are being strengthened in 206 districts. IT networks connecting all districts and training of district surveillance teams, medical officers, laboratory personnel and health workers is being carried out. The project has an outlay of Rs.88 crore for 2005-06.

Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy (AYUSH)

10.43 India has a rich heritage of traditional medicinal knowledge. If harnessed properly, Indian systems of medicine and Homoeopathy

can play an important role in the prevention and management of non-communicable diseases and life-style related disorders. There is a vast infrastructure of Ayurveda, Unani, Siddha and Homoeopathy in the country with approximately 6.9 lakh qualified practitioners of these systems, 1355 hospitals and 22,671 AYUSH dispensaries all over the country. However, this infrastructure is not evenly spread. Mainstreaming of AYUSH in the Health Care delivery network in the country is envisaged in the NRHM with focus on improvement and upgradation of standards of education, standardization of drugs and quality control, sustainable collection and cultivation of medicinal plants. The Department of AYUSH, Ministry of Health and Family Welfare

has taken a number of measures to popularize the systems through information, education and communication activities, both domestically and internationally. The Tenth Plan allocation for the Department of AYUSH is Rs.775 crore.

Population and Family Welfare

10.44 Accounting for 16 per cent of global population, India runs the risk of achieving the dubious distinction of the most populous country in the world by about 2050. One of the advantages though that India will continue to enjoy for some years is what is termed as a 'demographic dividend', namely a young population and a declining dependency ratio (Table 10.7).

Table 10.7 : Population projections (in millions)							
Year	2001	2006	2011	2016	2021	2026	
Total	1027	1114	1197	1275	1347	1411	
Under Age 15	363	360	351	343	337	328	
15-64	622	702	780	854	916	967	
65+	42	52	66	78	94	116	

Source : Office of the Registrar General, India.

SI. N	No. Parameter	1951	1981	1991	Current level
1	Crude birth rate				
2	(Per 1000 population) Crude death rate	40.8	33.9	29.5	24.8(2003)
3	(Per 1000 population) Total fertility rate (TFR)	25.1	12.5	9.8	8.0(2003)
4	(Per woman) Maternal mortality ratio (MMR)	6.0	4.5	3.6	3.0(2001)
	(Per 100,000 live births)	NA	NA	437 (1992-93)	407(1998)
5	Infant mortality rate (IMR)				
	(Per 1000 live births)	146 (1951-61)	110	80	60(2003)
6	Child (0-4) mortality rate	· · · ·			
	(Per 1000 children)	57.3 (1972)	41.2	26.5	17.8(2002)
7	Couple protection rate (per cent)*	10.4 (1971)	22.8	44.1	48.2(1998-99)
8	Life expectancy at birth				
	8.1 Male	37.2	54.1	59.7 (1991-95)	63.9(2001-06)
	8.2 Female	36.2	54.7	60.9 (1991-95)	66.9(2001-06)

Note: The dates in the brackets indicate years for which latest information is available. * National Family Health Survey NA: Not Available

Source : Ministry of Health & Family Welfare and Office of the Registrar General, India

10.45 The National Population Policy, 2000 aims at achieving net replacement levels of total fertility rate by 2010 through vigorous implementation of inter-sectoral operational strategies. The long-term objective is to achieve population stabilization by 2045, at a level consistent with the requirements of sustainable economic growth, social development and environment protection. Crude birth rate has come down, but needs to come down faster in view of the declining crude death rate (Table 10.8).

10.46 While considerable progress has been achieved in the socio-demographic parameters over the last two decades, the country continues to lag behind several other countries in the region (Table 10.9). The Tenth Plan targets a reduction in infant mortality rate (IMR) to 45 per 1,000 by 2007 and 28 per 1,000 by 2012, reduction in maternal mortality ratio (MMR) to 2 per 1,000 live births by 2007 and 1 per 1,000 live births by 2012, and a reduction in decadal growth rate of the population between 2001-2011 to 16.2 per cent. As against an allocation of Rs.15,120 crore for the Ninth Five Year Plan, the allocation for Family Welfare is Rs.26,126 crore for the Tenth Plan. For the Annual Plan, the allocation increased to Rs. 6,424 crore in 2005-06(BE) from Rs. 5,300 crore in 2004-05 (RE).

10.47 NCMP mandates health care as one of the seven thrust areas, wherein it is

proposed to increase the expenditure in health sector as a proportion of GDP from 0.9 per cent to 2-3 per cent over the next five years. Accordingly, NRHM has been launched on April 12, 2005 for a period of 7 years (2005-2012) (Box 10.5). NRHM includes the second phase of Reproductive and Child Health (RCH) Programme. The RCH Programme Phase-II has been launched with effect from April 1. 2005 for a period of 5 years. It intends to improve the performance of the family welfare programme in reducing maternal and infant morbidity and mortality and unwanted pregnancies, and lead to population stabilization. Reoriented and revitalized to give a pro-outcome and pro-poor focus, the programme is envisaged as an umbrella programme by integrating all the related and interlinked stand-alone schemes into a single composite programme. With a sector-wide approach to family welfare, the programme adopts a decentralized process by inviting each State/UT to prepare its own programme implementation plan based upon a situational analysis of ground realities and requirements.

10.48 Janani Suraksha Yojana (JSY), a safe motherhood intervention programme, is an integrated package of services and cash benefit launched all over India on April 12, 2005. The main objectives are to reduce maternal and infant mortality by promoting institutional delivery and making available quality care in pregnancy, delivery and post delivery by linking

Country	Life expectancy at birth (years)		mortality rate) live births)	Infant mor (per 1,000	-	Maternal mortality ratio (per 100,000 live births)
	2000-05	1990	2003	1990	2003	2005
China	71	49	37	38	30	56
India	63	123	87	80	63	540
Nepal	61	145	82	100	61	740
Pakistan	63	128	103	96	81	500
Sri Lanka	74	23	15	19	13	92
Bangladesh	63	144	69	96	46	380
South Asia	63	126	91	84	66	NA

website: http:/indiabudget.nic.in

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Box 10.5 : National Rural Health M	ission (NRHM) and Family welfare
Vision of NRHM	Target outcome
• To be implemented throughout the country with special focus on 18 States with weak public	• IMR to be reduced to 30/1000 live births by 2012.
health indicators and/or weak infrastructure.	 MMR to be reduced to 100/100,000 live births by 2012.
• To improve the availability of and access to quality health care.	• TFR reduced to 2.1 by 2012.
 To build synergy between health and determinants of good health like nutrition, 	 Malaria Mortality to be reduced by 50 per cent by 2010, and 60 per cent by 2012.
sanitation, hygiene and safe drinking water.	 Elimination of Kala Azar mortality by 2010.
• To mainstream the Indian Systems of Medicines to facilitate comprehensive health care.	• Filaria to be reduced by 70 per cent by 2010, 80 per cent by 2012 and eliminated by 2015.
 To increase the absorptive capacity of the health delivery system to enable it to handle increased allocations. 	 Dengue mortality to be reduced by 50 per cent by 2010 and sustaining it at that level till 2012.
 To involve the community over the planning process. 	 Cataract operations increasing to 46 lakh per annum.
 Upgradation of infrastructure. 	 Leprosy prevalence rate to be reduced from 1.8 per 10,000 in 2005 to less than 1 per 10,000
Capacity building.	thereafter.
 Increasing the fund allocation for health sector. 	 TB DOTS series – Maintain 85 per cent cure rate through entire Mission period.

delivery care to ante-natal check-up and neonatal care along with appropriate referral and transport assistance, in the BPL groups.

10.49 The Mother NGO (MNGO) programme of the Department of Family Welfare continued to be implemented in all the States. MNGOs receive grant-in-aid from Government of India through the State Standing Committee on Voluntary Action (SCOVA) and provide funds to ground level NGOs called Field NGOs (FNGOs) in their allocated districts. The underlying philosophy of the MNGO scheme is one of nurturing and capacity building, which includes assessing the gaps in information on RCH services in the project area; building strong institutional capacity at the State, district, and field levels; advocacy and awareness generation; and facilitate service delivery in the underserved and unserved areas. Currently, 215 MNGOs are working in 324 districts of the country.

10.50 Under the immunization programme, vaccines are given to infants and pregnant women for controlling vaccine-preventable diseases, namely childhood Tuberculosis

(BCG), Diphtheria, Pertussis and Neonatal Tetanus (DPT), Measles and Poliomyelitis (OPV). Significant achievement has been made under this programme. At the beginning of the programme in 1985-86, vaccine coverage level ranged between 29 per cent for BCG and 41 per cent for DPT. As per the latest figures available for 2004-05, the provisional percentage coverage for DPT, BCG, Measles, TT vaccine (pregnant women) and OPV are 93.6, 99.9, 90.3, 78.6 and 94.2, respectively.

10.51 India has made remarkable progress in controlling the spread of wild polio virus in the country with only 65 polio cases reported in the country in 2005. In order to achieve zero transmission in 2006, efforts for 100 per cent vaccination of children up to 5 years of age in Supplementary Immunization Rounds need to continue.

Empowerment of women

10.52 The Mid-Term Review of the Tenth Plan has identified areas of concern such as adverse child sex ratio, high infant and maternal mortality, wide gender gaps in literacy and wage rates, escalating violence against women, and child trafficking. It has recommended universalizing programmes like Integrated Child Development Services (ICDS), expanding crèches, evaluation of existing programmes, strengthening the delivery mechanism, and assessing the gender impact of all programmes. Planning, policies, programmes and schemes of the Department of Women and Child Development (DWCD) are being specially formulated to ensure that these objectives in terms of social and economic empowerment of women and gender justice reach the targeted groups.

Health and nutrition of women

10.53 Measures to uplift health and nutrition standards of women, under the ICDS, include health check up for pregnant women and new mothers, immunization, pre and post-natal care, and supplementary nutrition. Under the 'Nutrition Programme for Adolescent Girls' (NPAG), special attention is being given to nutrition requirements of the potential mothers of the future. DWCD has been operating NPAG as a pilot project in 51 districts with the ultimate objective of universalizing the scheme.

Training and Employment of women

10.54 Empowerment of women cannot happen unless they are provided with adequate income generating activities, through wage and self- employment. A number of schemes such as Swyamsiddha, Swablamban and Support to Training-cum-Employment Programme (STEP) are in progress where women mobilized as viable SHGs are utilizing micro credit with the help of agencies like the Rashtriya Mahila Kosh for income generating activities or getting trained in various traditional trades and crafts (such as poultry, bee keeping and weaving) as well as newly emerging vocations (such as the IT sector), or skill upgradation and capacity building. To facilitate the employment of women away from their homes/towns, schemes such as Working Women Hostels with day-care centres and creches/day centres are also being implemented. Care and protection of women in distress is a focused area for attention.

Legal Safeguards

10.55 The National Commission for Women (NCW) safeguards the interests of women with a mandate covering almost all aspects of women's rights. There are about 42 Central Acts concerning women, of which 32 Acts have been reviewed by the NCW for their efficiency and removing gender discriminatory provisions. In addition, the DWCD is also in the process of initiating new legislation amending existing ones so that they become more potent in protecting women. These include Protection of Women from Domestic Violence Act, 2005, which came into force on September 14, 2005. The Act seeks to provide immediate and emergent relief to women who face situations of violence in their homes. Protection Against Sexual Harassment of Women Bill, seeking to confer on women the right to be protected from sexual harassment, is being drafted at the moment.

Gender Budgeting

10.56 The Tenth Plan reinforced the commitment to gender budgeting to establish its gender-differential impact and to translate gender commitments into budgetary commitments. It is perceived as a powerful tool not only for tracking allocation of resources for women but also covers implementation issues and outcomes. The Union Expenditure Budget 2005-06 has institutionalized Gender Budgeting in the budget document through statement 19, Expenditure Budget, Vol. 1 wherein it has been indicated that the budget provision in the BE 2005-06, substantially meant for welfare of women and children, is Rs. 14,378.68 crore. At present Gender Budget cells have been set up in 35 Departments of the Government of India.

Welfare and development of children

10.57 A 'rights based' approach has been adopted in the Tenth Plan with the strategy of promoting survival, protection and development of children, and the adoption of the 'National Charter for Children' in February 2004 and the 'National Plan of Action for Children' in August 2005. Proposal to set up a 'National Commission for Child Rights' is under consideration of the Parliament.

10.58 One of the largest child intervention programmes in the world is the ICDS Scheme initiated in 1975 with a package of six basic services for children up to six years of age, and for pregnant and nursing mothers. These services are: health-checkup, immunization, referral services, supplementary feeding, pre-school education, and health and nutrition education through a single window delivery system. Staring with a modest 33 blocks/projects, it has gradually expanded to 5,652 projects of which 5,624 projects with 7,43,156 Anganwadi Centres were operational on July 31, 2005. ICDS covers 484.42 lakh beneficiaries consisting of 403 lakh children below 6 years of age and 81 lakh pregnant and lactating mothers.

10.59 To fulfill the NCMP commitment of providing a functional Anganwadi in every settlement and ensuring full coverage of all children, and also to comply with the Supreme Court's directives, Government has approved expansion of the ICDS Scheme to 467 additional ICDS projects and 1,88,168 Anganwadi Centres, out of which only 11 ICDS Projects remain to be sanctioned. A number of new initiatives have been taken to improve the impact of the programme, which includes sharing of a half of the cost of supplementary nutrition with the States under ICDS.

10.60 Special schemes such as the Ballika Samriddhi Yojana (BSY) and Kishori Shakti Yojana (KSY) are being implemented for improving the life cycle approach of the girl child. The BSY initiated in 1997-98 provides for cash deposit in an interest bearing account to pay for the girl child's education and subsequently to revert to her on her attaining the age of 18 years. The scheme is in the process of being transferred to the States. KSY is a special intervention for adolescent girls (11-18 years), which uses the ICDS infrastructure to provide them all round development including nutrition, literacy and vocational skills. KSY, which was implemented in only 2000 blocks up to 2004-05, is being expanded to the remaining blocks of the country in 2005-06.

10.61 The scheme of Creches and Day-Care Centres for Children of Working and Ailing

Mothers is being implemented by the Central Social Welfare Board and two other national level voluntary organizations, namely, Indian Council for Child Welfare and the Bhartiya Adimjati Sevak Sangh.

Rural water supply and Sanitation

10.62 Water is a State subject, and the schemes for providing drinking water facilities are implemented by the States. The Central Government supplements the efforts of the States by providing financial and technical support. The Tenth Plan envisages provision of safe drinking water to all rural habitations. A major programme - "Accelerated Rural Water Supply Programme (ARWSP)" is being implemented since 1972-73 to achieve this objective. With an investment of over Rs. 50,000 crore (up to March 31, 2005), considerable success has been achieved in meeting the drinking water needs of the rural population. More than 3.7 million hand pumps and 1.73 lakh piped water schemes have been installed in the rural areas. As on April 1, 2005, 96.1 per cent of rural habitations were fully covered, and 3.6 per cent were partially covered, leaving 0.3 per cent not covered with drinking water facilities. The diversity in the State-wise coverage of habitations under Rural Water Supply (Table 10.10) needs to be addressed through accelerated improvement in the lagging States.

10.63 ARWSP, currently being implemented through the Rajiv Gandhi National Drinking Water Mission, aims at coverage of all rural habitations with population of 100 and above, specially the un-reached ones, ensure sustainability of the systems and sources, tackle the problem of water quality, and institutionalize water quality monitoring and surveillance through a catchment area approach. Adequate operation and maintenance (O&M) is critical for sustaining water supply systems already created. The annual estimated cost of O&M at Rs. 6,000 crore is heavy for the Government alone to bear. Peoples' involvement is envisaged not only to enhance the economic viability of O&M but also for better upkeep and enhanced life span of the system created. The Central allocation of funds for ARWSP has been

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Table 10.10 : Status of coverage of habitations under rural water supply (as on April 1, 2005)

State/UT	Status of habitations			
_	NC	PC	FC	Total
Andhra Pradesh	0	0	697.32	697.32
Arunachal Pradesh	158	510	3,630	4,298
Assam	238	7137	63180	70,555
Bihar	0	0	1,05,340	1,05,340
Chhattisgarh	0	0	50,379	50,379
Goa	0	6	389	395
Gujarat	0	36	30,233	30,269
Haryana	0	0	6,745	6,745
Himachal Pradesh	0	6891	38476	45,367
Jammu & Kashmir	660	2,551	7,973	11,184
Jharkhand	0	0	100096	1,00,096
Karnataka	0	5618	51064	56,682
Kerala	0	7573	2190	9763
Madhya Pradesh	0	0	1,09,489	1,09,489
Maharashtra	327	17411	68,192	85,930
Manipur	0	0	2791	2791
Meghalaya	12	239	8,385	8,636
Mizoram	0	112	695	807
Nagaland	41	690	794	1,525
Orissa	0	0	1,14,099	1,14,099
Punjab	803	1,128	11,518	13,449
Rajasthan 2	2,300	0	91646	93,946
Sikkim	0	74	1,605	1,679
Tamil Nadu	0	0	66,631	66,631
Tripura	0	0	7,412	7,412
Uttar Pradesh	0	0	2,43,508	2,43,508
Uttaranchal	30	242	30,702	30,974
West Bengal	0	0	79,036	79,036
A&N Islands	0	102	402	504
Dadra Nagar Havel	i 19	41	476	536
Daman& Diu	0	0	32	32
Delhi	0	0	219	219
Lakshadweep	0	10	0	10
Pondicherry	0	108	159	267
Chandigarh	0	0	18	18
Total	4588	50479	13,67,236	14,22,303
NC : Not covered, PC: Partially covered FC : Fully covered.				

stepped up from Rs. 2,900 crore in 2004-05 to Rs.4,050 crore in 2005-06.

10.64 The results of a fresh habitation survey conducted in 2003 are under validation. However, the preliminary results of the survey indicate large incidences of slippage from 'fully covered' to 'partially/not covered' categories due to a number of factors such as: sources going dry, lowering of ground water table, systems outliving their lives, and increase in population resulting in lower per capita availability. Drinking Water Supply is one of the six components of Bharat Nirman, which has been conceived as a plan to be implemented in four years from 2005-06 to 2008-09 for building rural infrastructure. Under Bharat Nirman, it has been envisaged to cover 55,067 uncovered habitations of Comprehensive Action Plan, '99 and also to address the problem of slippage and water quality.

10.65 The Central Rural Sanitation Programme (CRSP) launched in 1986 was restructured in 1999 to introduce the Total Sanitation Campaign (TSC). TSC envisages synergized interaction between Government, people and active NGOs. It also incorporates intensive Information, Education and Communication (IEC) campaigns, provisions of an alternative delivery system and more flexible, demand-oriented construction norms. The revised centrally sponsored scheme envisages a shift from allocation-based programme to a demand-based project mode with greater household involvement, intensive IEC campaign and emphasis on school sanitation. Under TSC, projects in 540 districts covering 30 States/UTs have so far been sanctioned with an approved outlay of Rs. 5694.44 crore.

Urban water supply

10.66 The Accelerated Urban Water Supply Programme (AUWSP) was launched in March 1994 for providing water supply to towns having population of less than 20,000 as per the 1991 Census. Up to July 26, 2005, 1244 projects with an estimated cost of Rs. 1,822 crore had been approved and Rs. 760 crore released. This scheme is to be merged with the newly launched "National Urban Renewal Mission (NURM)".

Scheduled Castes (SCs)

10.67 Special Central Assistance (SCA) for the Special Component Plan (SCP) is a major scheme for the welfare and development of SCs. Under the scheme, 100 per cent assistance is extended to supplement the efforts of the States/UTs for ensuring rapid socio-economic development of SCs, especially those living below the poverty line. Allocation for 2005-06 is Rs. 407.36 crore.

10.68 Social empowerment of the disadvantaged groups is being carried out through reduction/removal of prevailing inequalities, disparities and other persisting problems especially in the field of education. The flagship scheme of Post-Matric Scholarships (PMS) to SC students continued to receive high priority. Under the scheme, over and above their committed liability to extend scholarships to all eligible SC students based on a means test, 100 per cent Central Assistance is provided for payment of tuition and compulsory fees, besides maintenance allowance. By November 2005, Rs.378.00 crore benefiting 28.59 lakh SC students had been released under PMS. The Scheme of Pre-Matric Scholarships for children of families engaged in unclean occupation is being implemented with the objective to promote education and wean these children away from the clutches of their traditional occupations. By January 2006, Rs.10.70 crore was released to benefit 5.54 lakh students. Against an amount of Rs.47.00 crore provided in 2005-06 for construction of hostels for SC boys and girls, expenditure up to January 2006 was Rs.45.00 crore (96 per cent).

10.69 For economic development of these disadvantaged groups through income generating schemes, special financial institutions have been set-up namely: Scheduled Castes Finance and Development Corporation (NSCFDC), National Safai Karamchari Finance and Development Corporation (NSKFDC), National Backward Classes Finance and Development Corporation (NBCFDC) and National Minorities Development and Finance Corporation (NMDFDC). The Protection of Civil Rights (PCR) Act, 1955, and the SC & ST Prevention of Atrocities (POA) Act, 1989 are the two important legal instruments to prevent/curb persistent problems of social discrimination, prevalence of social evils like untouchability and cases of exploitation and atrocities against these disadvantaged groups.

Scheduled Tribes (STs)

10.70 According to the 2001 Census, STs accounted for 84.32 million, equivalent to 8.2 per cent of the country's total population. Compared to the rest of the society, STs continue to persist in socio-economic backwardness. The objective of the Tenth Plan is to empower the STs through their educational, economic and social development.

10.71 For the welfare and development of the STs, an outlay of Rs. 1,499 crore has been provided in the Annual Plan for 2005-06, up 30.79 per cent from the corresponding outlay of Rs. 1,146 crore for 2004-05. The outlay of 2005-06 includes Rs.727 crore provided as Special Central Assistance (SCA) to Tribal-Sub Plan (TSP) and Rs.380 crore provided as grant-in-aid under Article 275(1) of the Constitution.

10.72 SCA to Tribal Sub-Plan (TSP) is a 100 per cent grant extended to States as an additive to undertake a number of developmental schemes. The focus is on family-oriented income-generating schemes, creation of critical infrastructure, extending financial assistance to SHGs for community-based activities, development of Primitive Tribal Groups (PTGs) and forest villages. Grant-inaid under Article 275(1) is also being provided to the States with an objective to promote the welfare of the STs and improve administration in the States to bring them at par with the rest of the States, and to take up such special welfare and development programmes which are otherwise not included in the Plan programmes. Under the flagship scheme of Post-Matric Scholarships (PMS), all eligible ST students are provided with stipend to pursue their education beyond matric including professional and graduate and post-graduate courses in recognized institutions. A new scheme of Rajiv Gandhi National Fellowship for ST students to pursue higher education is being introduced in 2005-06. Economic empowerment of the STs continued through extension of financial support to Finance Corporations and Tribal Cooperative Marketing Federation of India Limited (TRIFED). Under the Scheme of National Scheduled Tribes Finance and Development Corporation and Grant-in-Aid to State Scheduled Tribes Development and Finance Corporation, financial support is being extended to ST beneficiaries/entrepreneurs in the form of term-loans and micro credit at concessional rate of interests for income generating activities. An outlay of Rs.30 crore was provided in Annual Plan 2005-06 for these schemes. Other economic development schemes being implemented are grant-in-aid to NGOs, vocational training centres in tribal areas, investment in TRIFED and price support and grant-in-aid to STDCs.

Minorities

10.73 Five communities — Muslims, Christians, Sikhs, Buddhists and Parsis have been declared as minority communities by the Government. With a population of 189.5 million, the five notified minority communities constituted 18.42 per cent of the total population as per the 2001 Census.

10.74 An allocation of Rs.55 crore was made for 2005-06 for welfare and development activities of minorities. This includes Rs.30.00 crore for the Scheme of Maulana Azad Education Foundation. A significant proportion of the minority communities are engaged in traditional arts and crafts, like handlooms, handicrafts, glass works and metal works; and priority has been given for up-gradation of the technical know-how of these trades. National Minority Development Finance Corporation has been extending financial assistance and other technical support to minority entrepreneurs. National Commission for Minorities strives to protect the interest of the minority communities and work for their welfare and development.

Other Backward Classes (OBC)

10.75 Central assistance is provided to State Governments/UTs for educational development of OBCs. Till January 2006, Rs. 25.06 crore and Rs.19.20 crore had been released to States/UTs under Post-Matric Scholarships and Pre-Matric Scholarships for OBCs respectively. For construction of hostels for OBC boys and girls, Rs.10.72 crore had been released till January 2006 to State Governments/UTs/NGOs. The Ministry also implemented programmes through voluntary organisations for various skill development of OBCs.

10.76 National Backward Classes Finance and Development Corporation extends credit facilities to persons living below double the poverty line for undertaking various income generating activities. During April-November 2005, the Corporation had disbursed Rs. 42.35 crore benefitting 33,241 persons.

Welfare of persons with disabilities

10.77 In 2005-06, out of the allocation of Rs.250.60 crore for welfare of persons with disabilities, an expenditure of Rs.104.50 crore was incurred up to January 2006. Action has been initiated to suitably emphasize disability concerns in SSA and ensure that most of the children with disabilities are covered through inclusive education programmes.

10.78 Persons with Disabilities Act, 1995 is under implementation. Five composite rehabilitation centres at Bhopal, Guwahati, Lucknow, Srinagar and Sundernagar provide facilities for manpower development and ensure availability of rehabilitation services to all categories of persons with disabilities. Four Regional Rehabilitation Centres provide services to persons with spinal injuries at Bareilly, Chandigarh, Cuttack and Jabalpur. Of the 149 District Disability Rehabilitation Centres sanctioned in the country for providing comprehensive rehabilitation services at the grass roots level, 122 are functional. 10.79 Under the scheme of assistance to the disabled for purchase/fitting of Aids and Appliances (ADIP), Rs. 32.40 crore had been released to benefit 1.14 lakh beneficiaries in 2005-06 up to January 2006. Artificial Limbs and Manufacturing Corporation manufactures different types of aids and appliances for disabled persons at low cost and works towards development of new prototypes and aids and appliances.

10.80 Deen Dayal Disabled Rehabilitation Scheme (earlier known as Scheme to Promote Voluntary Action for Persons with Disabilities) provides financial assistance to voluntary organizations for running rehabilitation centres for leprosy-cured persons, for manpower development in the field of mental retardation and cerebral palsy, and for establishment and development of Special Schools in the major areas of orthopaedic, speech, hearing, visual and mental disability.

10.81 A Scheme of National Scholarship for Persons with Disabilities has been introduced from the year 2003-04. 500 new awards are given every year to students in different categories of disabilities for pursuing higher and technical education.

Social defence sector

10.82 The Social Defence Bureau of the Ministry of Social Justice and Empowerment undertakes programmes for the benefit of victims of substance abuse, children in need of care and protection, and welfare of the aged. Rigorous efforts are being made to tackle the problem of drug demand through an integrated and comprehensive community-based approach to the growing problem of alcoholism and drug abuse in the country, especially in the uncovered rural areas and North East, and among high-risk groups like street children and commercial sex workers. 54 counseling centres and 364 treatment cum rehabilitation centres are being supported under the scheme of Prevention of Alcoholism and Substance (Drugs) Abuse. Under the

'Programme of Juvenile Justice', the cost of maintaining mandatory homes for the children in conflict with the law, and for those in need of care and protection is shared between the Centre and the States. The programme presently supports services for 15,696 juvenile inmates in over 290 mandatory homes.

10.83 "1098" is a toll-free telephone number services 'Childline", which is a helpline for children in distress. A child in need or anyone on his/her behalf can call this number in 56 cities of India and seek emergency or other assistance by way of rescue from a situation of abuse, medical help, restoration to family, and emotional support. 85 lakh calls were received and attended to up to November 2005. Under the scheme of an Integrated Programme for Street Children, NGOs are being supported in running shelters, nonformal education and vocational training programmes coupled with nutritional support and medical care in 22 States.

Caring for the other disadvantaged

10.84 To fulfill the commitments of the National Policy on Older Persons for providing health, shelter, vocational training, recreation and protection of life, special emphasis is being given for expanding the old age homes and day care centres, provision of mobile medicare units and medicare centres under the Integrated Programme for Older Persons. Under this scheme, up to September, 2005, 300 NGOs running Old Age Homes, Day Care Centres and Mobile Medicare Units have been provided financial assistance.

10.85 A new scheme called Senior Citizens Saving Scheme has been introduced through Post Offices doing savings bank work for persons above 60 years of age. The National Institute of Social Defence focuses on training and manpower development of social defence personnel, especially in the areas of community based services for juvenile justice, prison welfare, prison administration, child adoption, children in need for care and protection, prevention of drug-abuse, welfare of senior citizens and emerging social problems.

Outlook

The combined effects of economic arowth and measures for direct interventions for poverty alleviation have translated into impressive decline in the incidence of poverty in the recent past. With a sustained growth momentum and launching of the major initiative for creation of rural employment in the form of the NREGS, this trend will continue in future. Progressive increase in the coverage of this programme from the current level of 200 districts to the whole country in the next five years, effective implementation along with transparency through the Right to Information Act and accountability through decentralized Panchayati Raj Institutions (PRIs) are expected to make a permanent dent on the incidence of unemployment and poverty in the country.

There has been a consistent upward trend in the public expenditure on the social sectors both by the Centre and the States. This trend will continue with the launching of certain major initiatives undertaken during 2005-06. Coverage under various programmes in the social sector has been considerably enhanced during the Tenth Plan. This is true of the sectors of elementary education, primary health care, nutrition, water supply, welfare and development of the backward classes, and programmes for development of women and children etc. The focus under many of these programmes is likely to shift from universalisation of the coverage or quantity to improvement in delivery or quality of the programmes. A number of new initiatives launched during 2005-06 specifically aim at achievement of these objectives. In the coming years, there will be greater stress on improvement in the quality of elementary education being imparted, quality of primary health care being delivered, quality of water supply and creation of productive assets through wage employment programmes. This will ensure tangible human development which will enhance capacity building of the people and improve the opportunity for their productive participation in the growth process.