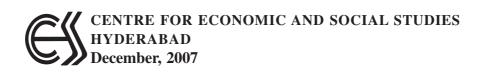
CESS MONOGRAPHS

Right to Development and Poverty Reduction Strategy

A Case Study of Andhra Pradesh

S. Mahendra Dev S. Galab P. Prudhvikar Reddy



4

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Foreword

The persistence of poverty in all parts of the world in spite of economic growth has forced economists and policy makers to rethink the early assumption that the benefits of economic growth would automatically percolate to and reach all segments of the population, and would result in the gradual reduction and ultimate elimination of poverty. In spite of the consequent introduction of specific antipoverty measures in India, though the percentage of poor has declined in rural and urban areas, in 2004-05 302 million persons in the country still lived below the poverty line, accounting for more than a quarter of the world's poor. The emerging perspective on poverty in the last decade emphasizes that poverty is a condition of multiple deprivations and that a well-being or human development index based on indices of economic performance, health and education would give a more meaningful insight into the dimensions of poverty and the public action required. The complexities of the relationship between economic development, poverty and human development become more evident at the disaggregated level. In Kerala, overall poverty and rural poverty have declined, which has been achieved in spite of a moderate level of development through the effective implementation of land reforms, good public health services, very high literacy and a high degree of political awareness. In the north-eastern states also, there is virtually no severe poverty among the large tribal population because of high levels of literacy and social development. Andhra Pradesh, in spite of being one of the middle income states in India has had an impressive rate of reduction in rural poverty. But the record of the state in human development has been poor and its rank among the major states has actually regressed between 1973-74 and 2004-05. Within the state, also, there are significant disparities across regions, districts and social groups in levels of economic and social development.

The idea of Right to Development is now gaining recognition for further reduction of poverty and disparities. Right to Development is a process that enables the progressive realization of basic human rights together with economic growth and defined by certain standards, namely that the process should be equitable, nondiscriminatory, participatory, accountable and transparent.

The objective of this monograph is to outline a development programme for Andhra Pradesh following the Right to Development approach. The study has been conducted in two districts of Andhra Pradesh, Mahaboobnagar and Chittoor, selected purposively because Mahaboobnagar is the most backward district in the state, while Chittoor is more developed, with a more diversified economic base.

Based on fieldwork this monograph seeks to identify whether different social and economic groups are ensured or denied access to food, health, basic amenities, civic-political security and thereby their human rights. The study finds that in both districts, on nearly all the indicators, the most disadvantaged social and economic groups - SCs, STs, female-headed households, landless labourers and the poorest classes - suffer higher levels of deprivation in terms of food intake, chronic illness, maternal and child care and health, education and participation in governance structures. This underlines the nature of chronic poverty in which the poor are locked in a vicious cycle of low income, inadequate food, poor health and low capabilities. However, the study also finds that the situation is much better in Chittoor than in Mahaboobnagar with respect to health and education, so that the level of economic development is also seen to determine the level of well-being.

The monograph also gives an assessment of the policies and programmes which have been designed to address the concerns of deprivations of basic needs and to examine the functioning of public institutions which deliver these services to different social groups. The functioning of the Public Distribution System (PDS), public health and education services and the effectiveness of anti-poverty programmes have been examined in the two districts. The study concludes that there are several factors which play a part in the effective delivery of government services. A programme which caters only to the poor (like PDS) tends to be more equitable and non-discriminatory, though not accountable, transparent and participatory. But programmes like anti-poverty programmes which are implemented by multiple institutions need not be automatically equitable, nondiscriminatory, accountable, transparent and participatory. A single institutional set-up may implement such programmes more efficiently. Educational and health institutions which serve both the rich and the poor can function well, but deteriorate because the rich opt out of these institutions. The organization of the poor into Self-Help Groups and the pressure from NGOs would strengthen the capabilities of the people and increase accountability both among policy makers and service providers.

S. Mahendra Dev Director, CESS.

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ACRONYMNS

BC	-	Backward Caste
OC	-	Other Caste
SC	-	Schedule Caste
ST	-	Schedule Tribe
DPIP	-	District Poverty Initiative Project
ENTAP	-	Equity, Non-discrimination, Transperency, Accountability and Participation
GS	-	Gram Sabha
GP	-	Gram Panchayat
NP	-	Not poor
NSP	-	Not so poor
PDS	-	Public Distribution System
PIP	-	Participatory Identification of the Poor
POP	-	Poorest of the Poor
RTD	-	Right to Development
SEAG	-	Self Employed in Agriculture
SENAG	-	Self Employed in Non-Agriculture
SHG	-	Self Help Group
UN	-	United Nations
VES	-	Village Education Committee
WEAG	-	Wage Employed in Agriculture
WEANG	-	Wage Employed in Non-Agriculture
WUA	-	Water Users Association

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Authors

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Executive Summary

Eradication of poverty has probably been the greatest challenge for development planners and policy makers in India since Independence. The Right to Development became prominent goal of the national policy makers since its adoption the United Nations in 1986 under the Declaration on Right to Development. This, on the other hand, was the culmination of a long process of international deliberations on human rights which were perceived from the very beginning as an integration of all civil, political, economic, social and cultural rights. Owing to its association with justice and equity, the Right to Development is fundamentally different from conventional policies and indicators of development - the growth of GNP, access to basic needs, or improvement in the index of human development. Development as a human right is an emerging paradigm which aims to improve the well-being of individuals. The Right to Development (RTD) has been recognized as the right to a process that enables the progressive realization of basic human rights together with economic growth and defined by certain standards, viz., that the process should be equitable, non-discriminatory, participatory, accountable and transparent. The RTD approach incorporates the concept of human rights in the actual implementation of policies aimed at improving the well-being of people. In the case of India, the number of poor has increased from 173 million in 1960-61 to 321 million in 1973-74. Even after the implementation of specific anti-poverty programmes which impacted on the poverty levels in percentage terms, the number of poor increased to 329 million in 1977-78. In 2004-05, even though, the percentage of poor had declined to 27.1% in rural areas and 23.6% in urban areas, the number of poor people accounts for a total of 302 million persons, which is still an unacceptably high number, and close to the total number of poor people in the early 1970s. It is in this context that the present study has been undertaken to delineate a poverty reduction strategy for India which can be implemented following the RTD approach. More specifically, the study is an attempt to: i) identify social groups which are ensured/denied access to food, health, education, shelter, safe drinking water, proper sanitation and civicpolitical security and, thereby, their human rights and assessing the role of household and extra household factors that have ensured/ denied access to these basic needs; ii) assessment of the policies and programmes that are designed by the state to address the concerns of deprivation with regard to these basic needs; iii) examine the functioning of the public institutions and mediating structures that are designed to deliver the services to different social groups based on human rights standards, viz. equity, non-discrimination, transparency, accountability and participation (ENTAP); and iv) identification of a poverty reduction strategy based on the RTD approach which can be implemented.

The study has been conducted in two purposively selected districts of Andhra

Pradesh, Mahaboobnagar and Chittoor. Mahaboobnagar is in the Telangana region and Chittoor is in the Rayalaseema region of Andhra Pradesh. The former represents the most backward district and the latter a district at a medium level of development, which represents the average level of development of the state. A sample of five villages from each district was selected purposively. Thus, ten villages in total are drawn from ten different mandals spread across the two districts. Samples of 20 households from each village are randomly selected basing on the Participatory Identification of the Poor (PIP) list of Andhra Pradesh District Poverty Initiatives Project (APDPIP). Focus Group Discussions were also organized with different social groups in the villages to elicit information. All these methods were taken up with the objective of collecting information on human deprivation with regard to food, health, education, shelter, safe drinking water, proper sanitation and civicpolitical security; the individual/household/community resource base, and the functioning of public institutions in implementing the delivery of government programmes to people in the village. Thus, the study adopted both survey and nonsurvey methods to collect the required data.

Access to food, health, education, shelter, safe drinking water, proper sanitation and civic and political security should be ensured by the state to enable people to lead a decent life. Lack of access to these basic needs amounts to a denial of human rights. These have been analyzed in the second chapter with focus on the status of human deprivation vis-à-vis human rights perspective. The subsequent chapter deals with Human Deprivation and Role of Household Factors wherein an attempt is made to assess the role of household factors in human deprivations outlined in the preceding chapter. Human deprivation has close links with livelihood strategies of the households through their asset base given their social status, in terms of caste and the gender of the head of the household. For this, the households' access to material and natural assets are considered for analysis.

After examining how the household factors influence human deprivation, the study takes up the issue of how the extra household factors determine human deprivation. The basic assumption underlying this preposition is that the human deprivation of a social group should not be analyzed in isolation but in relation to other social groups. Moreover, state policies in certain contexts may also contribute to human deprivation and thereby to a violation of human rights. Thus, there is an attempt to identify the extra household factors as well as state policies that contribute to human deprivation and how their influence varies across social groups. A total of eight case studies have been purposively selected to examine the influences of different extra household factors on social groups in regard to human deprivation. First two case studies deal with how structural factors like non-exploitative institutions for SCs and other backward regions have impacted their lives. The next two case studies deal with the impact of development programmes on two tribal sub-sects. The case studies also inform about the paradox of programmes implemented by civil society organizations which limit themselves to land related programmes for the tribals,

whereas there is a strong necessity to diversify the livelihoods opportunities. The other two case studies examine the impact of modernization and industrialization on the lives of the poor. These two case studies exemplify one of the main dilemmas of development as to whether industrialization can be the best solution to address the problems of poverty. This also provides space for engaging with debate on tribal displacements and lessons for the public policy making. In yet another case study, an attempt is made to examine the role of water resources and irrigation and its impact on the resource poor. The final case study examines on the role of the poorest of the poor in the developmental programmes. Functioning of public institutions and human deprivation through right to development lens has been assessed by recapitulating the discussion on human deprivations and the role of household and extra household factors, with emphasis on suitable mediating structures and its role in successful implementation of poverty eradication programmes.

The study indicates that nearly all the indicators, the most deprived sections of society - SCs and STs among caste groups, female-headed households, the landless who work for wages in agriculture and non-agriculture among the occupational groups and the two poorer economic groups - suffer from high levels of deprivation, in terms of food intake, chronic illness, lack of maternal and child care and child health, education of children, and participation in governance institutions and structures. This underlines both the nature and the problem of chronic poverty, in which the poor are locked in a vicious cycle of poverty with low incomes, inadequate food and poor health and low capabilities. If we compare the developed district with the backward district, it can be seen that on most indicators of well-being like better public health facilities, maternal health, safe child birth, child mortality, enrolment in schools and dropping out of school the situation is much better in the developed district. This would indicate and support the proposition that ensuring a basic level of economic development is the first step in achieving the goal of poverty alleviation in a holistic sense.

Any direct complaint by the SCs on the functioning of the public institutions is ignored by the frontline service providers. The complaints are taken seriously by the authorities only if they are channeled through the OCs. But the OCs themselves do not take the complaints made by the SCs seriously and moreover the SCs themselves are hesitant to voice their complaints against the functioning of public institutions. Thus, there is a need for integration of SC households with the other SCs in the neighboring villages to ensure the critical minimum numbers required to derive positive outcomes from social mobilisation and organisation of poor SCs. Even among the homogeneous community (tribes), class formation has started to take place in the form of one group which had land with irrigation and was therefore better off, and the others who had land wherein irrigation facilities had failed. The latter often had to migrate in search of additional work since they could not cultivate their land for more than one season. Those with irrigation could stay back in the

village as they were able to raise more than one crop due to the availability of water. The recent initiatives in the form of developing social forestry through horticulture could have acted as a buffer for the employment requirements of the people. The externality arising out of the higher level of human capital and more secure employment is that all the public institutions in the village are functioning well. As a result the poor have also been able to access educational, health and other services effectively. In contrast, the poor have been forced to spend a considerable proportion of their income on medical care due to the adverse impact of industrialization. This is compounded with the ineffective functioning of public health institutions in that village. Moreover, the affected people are unable to protest against industrialization since it provides them with employment opportunities. Thus, the poor continue to be at the receiving end. In yet another case study, the poorest of the poor complain that all the benefits of government programmes are captured by the poor. Moreover, the existing political structures also support this process leaving the poorest of the poor exposed to continued deprivation against the mal-functioning of the public institutions. Thus all efforts to empower the poor must start with the poorest of the poor. The majority of Madigas (one of the poorest category among SCs) who constitute majority of poorest of poor are unaware about the existence of Sub-centre in the village but they knew about the services of ANM. Since most of the Madigas migrate, the health and education of their children are affected. They are also unable to make use of the available government programmes. The major reason for the high level of migration among the Madigas is that they do not own land nor is wage employment available for them in the village. Thus, asset creation as one of the main components of poverty reduction programmes need to be introduced.

There are several factors, which play a part in the effective delivery of government services. The institution which is implementing a programme that caters only to the poor (like PDS) automatically tends to be more equitable and non-discriminatory, though not accountable, transparent and participatory. But, multiple institutions which are implementing programmes that cater only to the poor (like anti-poverty programmes) need not be automatically equitable, non-discriminatory, accountable, transparent and participatory. A single institutional set-up to deliver all the antipoverty programmes may ensure a more effective implementation of the programmes. The institutions which are providing services to poor as well as rich (like education and health services) can be transparent, accountable, participatory, equitable and non-discriminatory as long as rich do not opt out of these public institutions. But the reality is that rich have been opting out of public institutions. Other structural factors like inequitable land distribution also decrease the efficiency of public institutions. These distortions can be counterbalanced by the organization of the poor into SHGs of DPIP model. The pressure of NGOs is another factor which strengthens the capabilities of the people and increases accountability both among policy makers and frontline service providers.

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CHAPTER 1

Context, Objectives and Methodology

Poverty in India – a Retrospect¹

Eradication of poverty has probably been the greatest challenge for development planners and policy makers in India after Independence. More importantly, the Right to Development has occupied preeminent goal for the national policy makers. This was more pertinent since the adoption by the United Nations in 1986 of the Declaration on the Right to Development which was the culmination of a long process of international deliberation on human rights which were perceived from the very beginning as an integrated whole of all civil, political, economic, social and cultural rights.² The Declaration says "The Right to Development is an inalienable human right by virtue of which every human person and all people are entitled to participate in and contribute to and enjoy economic, social, cultural and political development in which all human rights and fundamental freedoms can be fully realized" (Article 1, Paragraph 1). Because of its association with justice and equity, the Right to development is fundamentally different from conventional policies and progress for development, whether seen as increasing the growth of GNP, supplying basic needs, or improving the index of human development. The rights based approach imposes additional constraints on the development process, such as maintaining transparency, accountability, equity and non-discrimination in all the programmes. The individuals must have equal opportunity of access to the resources for development and receive fair distribution of the benefits of development.³ Another important thing is that the right to development approach confers unequivocal obligation on duty-holders: individuals in the community, states at the national level, and states at the international level. Nation states have the responsibility to help realize the process of development through appropriate development policies.

¹ This section draws upon Radhakrishna and Ray [2005] and Radhakrishna, Rao and Ray [2004]. Individual citations are not given.

² See Sengupta (2000, 2000a, 2002), Osmani (2000) and Sen (1982 and 1985)

³ S. Mahendra Dev, *Right to Food in India*, WP.50, Centre for Economic and Social Studies, Hyderabad, 2003.

However, in India, in the initial phases of planning, the implicit assumption was that the process of economic development would itself generate the dynamics which would result in the gradual reduction and ultimate elimination of poverty. By the early 1970s, however, it became clear that after two decades of planning chronic poverty had not been mitigated to any degree through the trickle down effect. Data on the incidence of poverty from 1956-57 to the mid-1970s show wide variations from year to year, but no trend. Thus, in 1956-57, 54.1 % of the rural population, or 182 million people were poor. In 1973-74, 56.4 % of the rural population was poor. This percentage dropped in good agricultural years, but increased sharply in drought years. The number of poor, however, increased from 173 million in 1960-61 to 321 million in 1973-74. Even after specific anti-poverty programmes began to have an impact on poverty levels in percentage terms, the number of poor increased to 329 million in 1977-78. In 2004-05, the percentage of poor had declined to 27.1 % in rural areas and 23.6 % in urban areas, a total of 302 million persons, which is still an unacceptably high number, and close to the total number of poor people in the early 1970s.

From the beginning it was clear that poverty was primarily a rural phenomenon and that the rural poor constituted nearly three-fourths of the total number of poor in the country. Several studies from the 1970s onwards have established that the level of poverty is closely related to agricultural performance. This still continues to hold true in India, and the rural poor still account for nearly 75 % of the total poor. Direct interventions which the state undertook from the late 1970s were therefore primarily targeted at the rural poor, to increase opportunities for employment through the creation of assets and providing training as well as welfare measures like the Public Distribution System (PDS). The results have been impressive, and the incidence of poverty in rural areas has come down to about 27 %, as noted. A worrying factor in recent years is that there has been a slowdown in the rate of decline of rural poverty in the post-Reform period, after 1990. In urban areas, however, the decline in poverty accelerated during the 1990s. Acute, or severe, poverty (i.e., population with per capita expenditure less than 75 % of the poverty line) has been declining in rural and urban areas at the rate of one percentage point per year since the mid-1990s, and is expected to be reduced to insignificant levels by the end of this decade in most states.

At the disaggregated level, several trends are emerging clearly with respect to the poverty scenario in the country. First, spatial variations in the incidence of rural poverty have become more striking since the 1990s. The more backward states of Bihar, Orissa, Madhya Pradesh and Uttar Pradesh accounted for a higher percentage of the rural poor (61 %) in 1999-2000 than they did in the early 1990s (53 %). The relationship between poverty and agricultural development continues to be evident, and even the more developed states like Maharashtra, Gujarat and West Bengal accounted for 20 % of the rural poor, mainly because agriculture is not as well-

developed in these states. The share of the agriculturally developed states (Punjab and Haryana) and the four southern states in the rural poor has declined during the same period. Within states, poverty levels have fallen in areas with irrigation and therefore dependable agriculture, while the poor are concentrated in rain-fed areas with low and erratic rainfall. Urban poverty, on the other hand, is very high in Orissa, Madhya Pradesh, Bihar, Uttar Pradesh, Maharashtra and Andhra Pradesh. Among economic classes, poverty is very high among agricultural labour and artisan households in rural areas and casual labour in urban areas, inasmuch as these classes now account for a higher percentage of the rural/urban poor than in the early 1990s. Among social groups, the same trend is seen among SCs, STs and backwards castes. Women and children under fifteen are the other vulnerable groups, and rising child poverty in rural and urban areas in the 1990s is a special cause of concern.

Such disaggregated analysis is useful in devising more specifically targeted antipoverty programmes. At the same time, it must be noted that there is a high degree of congruence across these variables, and that poverty manifests multiple dimensions. SCs and STs are also economically disadvantaged, owning little or no land, and with low levels of education and skills. They therefore depend on casual labour in agriculture and non-agriculture for their livelihood. Often, they also live in the more agriculturally backward areas where, even if they do own some land, their livelihood is precarious and subject to various shocks.

This brings up the major emerging perspective on poverty in the last decade, which emphasizes that poverty is a condition of multiple deprivations, characterized not merely by low income, but also chronic malnourishment, anaemia, energy deficiency, little or no education, lack of sanitation and poor access to safe drinking water and health facilities, whereas the state continues to treat poverty only in terms of income poverty. A well-being or human development index, based on indices of economic performance (per capita income or poverty ratio), health (life expectancy and/or infant mortality) and education (literacy – male/female, rural/urban) would give a more meaningful insight into the dimensions of poverty and public action required than programmes which only target income poverty.

Radhakrishna *et al.* [2004] therefore stress that the strategy to reduce poverty must be based on a holistic or "systemic" approach in which three phases can be identified. In the first phase, the emphasis should be on reducing hard core poverty usually achieved through the traditional anti-poverty programmes like IRDP and PDS, to increase income levels and provide for basic needs like food, with efficient delivery systems, as well as institutional reforms like land reforms. In the second phase, mechanisms are put in place for improving the delivery systems while giving the poor greater control over them. In the last phase, there is empowerment of the poor, to give them entry into mainstream economic, social and political processes. Radhakrishna *et al.* stress that empowerment is not just a question of seats in local

government (PRIs), but rather that it is a process in which the poor are able to mobilise themselves to overcome the disability and multiple deprivations of poverty.

The efficacy of empowerment in improving the condition of the poor is best seen in Kerala. Overall poverty had declined in Kerala to 12.7 % in 1999-2000, and rural poverty to less than 10 %, the lowest incidence next only to Punjab and Haryana. This has been achieved in spite of only a moderate level of economic development – the state SDP in 2000-1 was lower than the all-India average, and was the sixth lowest among the fifteen major states. Yet, the effective implementation of land reforms, good public health service, the highest rates of literacy in the country and a high degree of political awareness and participation by the people have given Kerala the highest rank among all the states in the index of socio-economic development. In the northeastern states (except Assam), there is almost no severe poverty among the large tribal population, because of high levels of literacy and social development, which is another example of how empowerment leads to lower levels of poverty.

Poverty and human development in Andhra Pradesh

The record of Andhra Pradesh in the reduction of rural poverty has been very good, especially during the 1990s. The incidence of rural poverty fell from 48.41 % in 1973-74 to 11.05 % in 1999-2000, and total poverty from 48.8 % to 15.77 %. The state has not done as well with respect to the incidence of urban poverty which stood at 26.63 %, the sixth highest among the fifteen major states. The record of the state in overall social development, however, has been poor. A recent study [Ghosh 2006] ranks Andhra Pradesh at 10 in Human Development Index⁴ ahead only of Orissa, Madhya Pradesh, Uttar Pradesh, Assam and Bihar. The state, in fact, seems to have regressed in human development during the 1990s, whereas Rajasthan (one of the original BIMARU states) has improved its rank from 12 to 9 during the same period. Among the southern states, Tamil Nadu and Karnataka, with much higher levels of rural and overall poverty than Andhra Pradesh had a rank of 8 in SDP among the states, but ranked a lowly 12 in literacy, clearly pointing to the locus of the social backwardness of the state.

Within the state, there are significant disparities across regions and districts and across social groups in levels of social and economic development. For instance, south coastal Andhra and northern Telangana have the lowest incidence of poverty (10%) as against 20% in north coastal Andhra. Further, poverty is mainly concentrated among SCs and STs and the rate of decline in the incidence of poverty is higher among cultivators compared to labourers. Poverty and malnutrition are closely inter-related and prevalence of under-weight in A.P is very pronounced.

⁴ The HDI is based on per capita SDP in constant prices, life expectancy and literacy.

Though infant mortality in A.P is lower than the all India average, it is more predominant among SCs, STs and in rural areas. A regional difference in low body mass index for woman was also observed.

In terms of rural poverty, the incidence was higher than the state average in ten districts. [Dev 2000]⁵ Not surprisingly, these districts are all located in rain deficit regions, in north coastal Andhra, Rayalaseema and Telangana. The regional patterns varied slightly for the indicators of social development (female literacy and infant mortality). However six districts are among the bottom ten on all three indicators – Srikakulam, Vizianagaram, Mahaboobnagar, Warangal, Nalgonda and Kurnool. The location of the most backward mandals (numbering 192) is another way to look at the regional patterns of poverty. More than half of these mandals were concentrated in eight districts – Mahaboobnagar, Medak, Prakasam, Warangal, Nalgonda, Anantapur and Kurnool. It is noteworthy that four districts also figure in the earlier list of the six most backward districts.

The disaggregated analysis at the state level shows the close relationship between poverty and social deprivation which are concentrated in a few districts which are all located in regions with deficient and erratic rainfall and backward agriculture, which reinforces the general understanding of the relationship between agricultural performance and rural poverty.

Right to Development

Thus, in India, robust economic growth has reduced poverty but in the south and the northeast of India, with moderate growth multi-dimensional poverty has also been reduced with an empowered population. In spite of a significant reduction in the percentage of the population living under poverty during the 1990s, India is still home to over a quarter of the world's poor. A substantial reduction in the number of people living under poverty in India would have a positive impact on the achievement of the principal target set by the international community through the Millennium Declaration. Development as a human right is an emerging paradigm in the debate on the process that improves the well-being of individuals. The Right to Development (RTD) has been recognized as the right to a process that enables the progressive realization of basic human rights together with economic growth and defined by certain standards, viz., that the process should be equitable, non-discriminatory, participatory, accountable and transparent. The RTD approach incorporates the concept of human rights in the actual implementation of policies aimed at improving the well-being of people. It is in this context that the current study has been undertaken to delineate a poverty reduction strategy for India which can be

⁵ The study is based on 1993-94 data, and is consequently somewhat outdated. However, the overall scenario in terms of inter-district disparities would not have changed to any degree during the past decade.

implemented following the RTD approach.

Objectives

With this main objective the present study has been undertaken to outline a development programme for Andhra Pradesh following the RTD approach. More specifically, this study addresses itself to the following objectives:

- i. Identification of social groups which are ensured/denied access to food, health, education, shelter, safe drinking water, proper sanitation and civic-political security and, thereby, their human rights;
- ii. Analysis of the role of household and extra household factors that have ensured/ denied access to these basic needs;
- iii. Assessment of the policies and programmes that are designed by the state to address the concerns of deprivation with regard to these basic needs;
- Examination of the functioning of the public institutions that are to deliver the services to different social groups based on human rights standards, viz. equity, non-discrimination, transparency, accountability and participation (ENTAP);
- v. Identification of a poverty reduction strategy following the RTD approach which can be implemented.

Methodology

Sample Design

This study has adopted a three stage stratified purposive–cum-random sampling design. Districts, Villeges and Households are selected in the first, the second and the third stages as sample units respectively.

Selection of District

The study has been conducted in two purposively selected districts of Andhra Pradesh, Mahaboobnagar and Chittoor. Mahaboobnagar is in the Telangana region and Chittoor is in the Rayalaseema region of Andhra Pradesh. The former represents the most backward district and the latter a district at a medium level of development, which represents the average level of development of the state.

Mahaboobnagar, with a total population of 3,509,182 [Census, 2001] is the most backward district in the state of Andhra Pradesh. Per capita income in the district is the lowest in the state at Rs.7909 in 2001-02, followed only by Vizianagaram [Economic Survey, AP 2003-04]. The main economic activity in the district is agriculture and the major crops sown in the area are jowar and groundnut. Gross irrigated area as percentage of gross cropped area is 17.86 [CMIE, 2000]. The main

sources of irrigation are tube wells, tanks and canals. Because it has the lowest rainfall in the region, the district is frequently subject to drought. For instance, in 2002-03 the district received only 535 mm of rain as against the normal of 603mm. [Season and crop Report, 2002-03].

Further, the district lags behind all the other districts of the state in all the three indicators of human development i.e. education index, health index and standard of living index. Even though the literacy rate has improved over the years, it still has the lowest female literacy rate of 32.8 and occupies 22nd rank in the state [Subrahmanyam 2004]. Total school enrolment rate in the district is 81.8 at primary school level but the drop-out rate is the highest in the state at 62.95 and this rate is even higher among girls [Selected Educational Statistics, 1999-2000]. Besides this, infant mortality rate is also high at 77 in 1991 and the district is ranked at 22 in the human development index of the state.

On the other hand, Chittoor district in Rayalaseema is more developed. Agriculture is the main source of income and gross irrigated area as percentage of gross cropped area is 43.94. The principal crops grown in the district are paddy, bajra, groundnut, and sugarcane. Irrigation is provided by medium irrigation projects, tanks and wells. In 2002-03 the district received 621mm rain against the normal rainfall of 935mm. There has been significant progress in industrial development in the district with the establishment of 910 factories. The per capita income (Rs.9974) was below the state average (Rs.10590) but was higher than in many other districts. With a rural poverty ratio of 23.1% in 1993-94, the district occupied the 8th rank in the state. There has been a significant improvement in the literacy level in the district which now stands at 67.46 per cent and is higher than the state average. The female literacy rate was 56.5, sixth highest in the state. At the primary school level, the drop-out rate in the district was 49.6% and this is higher among girls. In infant mortality, with an IMR of 60 in 1991, Chittoor occupies the 15th position in the state. Overall, the district is ranked 9 in the human development index of the state. Thus, in contrast to Chittoor, the level of human deprivation is greater, the resource base is weak and livelihood strategies are mostly centred around crop production in Mahaboobnagar.

Selection of Villages

A sample of five villages from each district was selected purposively. The ten villages in total are drawn from ten different mandals spread across the two districts. The villages were selected in consultation with district officials in triangulation with the relevant secondary data available at mandal and village level. Each village represents a specific characteristic that has an impact on human deprivation, resource base, livelihood strategies and the functioning of public institutions.

The five villages selected for the study from Mahaboobnagar were Basawapur, Mekaguda, Mushrifa, Pebbair and Koppunur. Basawapur village was selected

because there is widespread migration out of the village. The majority of the people from this village migrate to Hyderabad on short-term basis and to Rajasthan and Bombay for longer periods. *Mekaguda* was selected, as it is a village with a strong industrial base. *Mushrifa* was selected to represent villages where there is strong organisation of the poor. *Pebbair* is a major panchayat and represents villages in a semi-urban setting. *Koppunur* was selected to represent villages with highly skewed land distribution.

Nangamangalam, Thondawada, Kalluru, Gopalakrishnapuram and Maddinainapalli were selected from Chittoor district. Nagamangalam is a village with high literacy. Thondawada also has a high level of literacy and is also located near an urban centre. Kalluru is a village in a semi-urban setting. Gopalakrishnapuram is an exclusively tribal village and represents tribal villages organized around land on a co-operative basis. This village also has an NGO. Maddinainapalli is another village with NGOs selected for the study.

Selection of Households

A sample of 20 households was selected from each village randomly according to the PIP list of DPIP. This sample consists of 8 poorest of the poor, 6 poor, 3 not so poor and 3 non-poor households. Thus the total sample is 200 households covering 100 households from each selected district.

Data collection

The study adopted survey and non-survey methods to collect data required to examine the objectives. Household schedule and village schedule have been administered to collect information from households and villages respectively. Focus Group Discussions were organized with different social groups in the villages. All these methods were taken up with the objective of collecting information on human deprivation with regard to food, health, education, shelter, safe drinking water, proper sanitation and civic-political security; the individual /household/community resource base, and the functioning of public institutions in implementing the delivery of government programmes to people in the village.

Organisation of the Study

The study is organized into five chapters. Chapter 1 deals with the context, objectives and methodology of the study. Chapter 2 attempts to assess human deprivations among different social groups. The role of household factors in human deprivation is examined in Chapter 3. Chapter 4 deals with the role of extra household factors that contribute to human deprivation. The public institutions that implement government programmes are analysed in terms of human rights standards, i.e. equity, non-discrimination, transparency, accountability and participation (ENTAP) in chapter 5.

CHAPTER II

Human Deprivation and Human Rights

Introduction

Access to food, health, education, shelter, safe drinking water, proper sanitation and civic and political security should be ensured by the state to enable people to lead a decent life. Lack of access to these basic needs amounts to a denial of human rights. This chapter is an attempt to identify which social groups are denied/ensured access to these basic needs and to analyse the factors which have contributed to this. More specifically, this chapter also addresses other related issues about the status of women and children with respect to access to these basic needs.

Methodology

Consumer expenditure, quality of consumption and food security are the variables considered to assess access to food. General health-seeking behaviour to determine the health status at the household level; the extent to which maternal health services are accessed to assess the health status of women; and child health care and child mortality as indicators of the health status of children are the variables considered for analyzing access to health. Enrolment and drop-out of children are taken up to assess the access to education. Owning a house, the type of house and other related facilities, viz., toilets, electricity, drainage and drinking water are considered for assessing access to shelter and the quality of housing. Participation in village meetings and elections has been considered to assess political activity and personal security to assess civic security.

Analysis

Food security and human rights

SCs and BCs spend less on food among the social groups. This is also the case with female-headed households as compared to male-headed households. The composition of the food basket of these groups reveals that the consumption levels of SCs, STs and BCs are less than the prescribed norms of quantities in regard to cereals, pulse/ gram and gur/sugar. However, the consumption levels of all caste groups are much below the norms for vegetables and milk. SCs have the lowest levels of consumption. Interestingly, STs are consuming more milk than the norm. Further, SCs are spending more on cereals while STs are spending more on non-cereal food items among the social groups (Table 2.1). Cereal consumption is below

the norm for male as well as female-headed households. Their consumption of gur/ sugar, vegetables and milk is also well below the norm. However, women-headed households consumed relatively higher quantities of cereals and milk. They have spent a smaller proportion on all the non-cereal food items except pulse/gram, compared to the male-headed households. This indicates that female-headed households have substituted pulses for all the other non-cereal food items that include meat and fish, eggs and vegetables to the extent possible (Table 2.2).

About 14 per cent of households belonging to SCs, BCs and headed by women reported that all their family members did not have two full meals a day during the 12 months preceding the survey i.e. end of November 2004. This is more pronounced during the summer compared to the other seasons of the reference agriculture year. In summer the percentage of households which reported lowered food consumption increased to more than 30 per cent, and is very high for SC households (Table 2.3).

Health and Human Rights

General health

General ill health has been classified into two categories, viz., acute and chronic. Acute refers to malaria/high fever, diarrhea, jaundice, heart problem and, other minor ailments, which require immediate hospitalization. Chronic ill health includes pneumonia, fits/epilepsy, skin disease, anaemia, tuberculosis, respiratory diseases, congenital illness and kidney problem.

Across all caste groups malaraia was the major illness most frequently reported by households, both for adults (68 %) and for children (81 %). A higher percentage of ST, BC and SC households have reported malaria cases among adults, but the incidence is almost equally high even among OC households. Among children, the highest incidence is in SC households, followed by OC and ST households (Table 2.4). The very high incidence of malaria clearly points to a failure of preventive public health measures which has direct implications for the notion of human development and the right to development.

It is also interesting to note that across all caste groups, a higher percentage of households in Chittoor district have reported cases of major illness among adults than in Mahaboobnagar district. This is also true of male and female headed households in the two districts. Interestingly, treatment was sought for all ill health problems by all the social groups, and female and male-headed households. The STs followed by SC and BC among the caste groups, and female-headed households largely depend on public health institutions. The treatment of ill health affects livelihoods and involves high amounts of expenditure, and may lead to a downward slide in economic status, particularly among the SC and ST as there is no insurance protection against ill health (Tables 2.4, 2.4a, 2.4b, 2.5).

Women's health

A relatively larger proportion of pregnant women from SCs, STs and male-headed households have not received antenatal care. Antenatal care visits by health workers are very infrequent even for those who have received antenatal care (Table 2.6). The incidence of unsafe deliveries which take place at home, attended by untrained persons, is higher in Mahaboobnagar, and is highest among OCs, followed by BCs and SCs. In Chittoor district, in contrast, nearly 55 % of deliveries take place in hospitals or with a trained attendant. Unsafe deliveries are also lower among BCs and OCs, indicating a greater awareness on this issue in the more developed district. There is little difference between male and female headed households in Mahaboobnagar district in the percentage of unsafe deliveries, but in Chittoor district, the figure is much higher in female-headed households (Table 2.7, 2,7a, 2.7b).

Adoption of contraception is generally high in both districts, though the percentage is higher in Chittoor district (79 %) as compared to Mahaboobnagar (63 %). A high percentage of SC households do not go in for any method of contraception in both districts, especially in Chittoor. Tubectomy is the most preferred method adopted, across all social categories in both districts, and is a clear indication of gender bias in the use of contraceptive methods in society at large. The decision on family planning methods is to a large extent taken jointly by couples. However, a few women take this decision on their own (Tables 2.8, 2.8a to 2.8c).

Child health

A large proportion of women irrespective of the social category have had their children vaccinated. The percentage of children who have not been vaccinated is relatively high among SC and male-headed households. Nearly all lactating women belonging to all social groups have breastfed their children. A considerable proportion of children were denied supplementary food till they were older since they were being breastfed for longer periods by their mothers among these groups.

27 child deaths have been reported in the two districts, 14 of girl children and 13 of boys. Child mortality is much higher in Mahaboobnagar district, where 20 deaths have been reported. 60 % of the deaths were in SC households, and 60 % were girls. No child deaths were reported by SC families in Chittoor district, where 5 boys and 2 girls had died, and 4 deaths were reported by BC households (Table 2.9, 2.9a, 2.9b).

Education and human rights

Children's education

Non- enrolment of children in schools has been reported only in Mahaboobnagar, and all children in Chittoor district have been enrolled in schools. 14 of the 30 children not going to school were SCs, and 13 were BCs while 19 were from male headed households. 11 children from female headed families, or nearly 65 % of the children in these families, were not enrolled in school. More than 60 per cent of the children in both districts, across all caste groups, are enrolled in government schools. The percentage is almost the same across all castes in Mahaboobnagar, but in Chittoor, 40 % of children from OC families were enrolled in private schools. Expenditure on the education of children is found to be low among SC, ST and female-headed households (Table 2.10). The incidence of dropping out of school is high in Mahaboobnagar district, and most children drop out between the fifth and seventh class. In Chittoor fewer children drop out of school, and they also tend to leave school at a later stage, usually in or after the seventh class. More children of OC households drop out of school in Chittoor district, while the number is higher among the children of SC households in Mahaboobnagar, followed by BCs and OCs. In Mahaboobnagar, all the children who have left school are from male headed households, and in Chittoor district, only one child from a female-headed household has dropped out of school (Table 2.11 to 2.11c).

Shelter and human rights

More than 88 per cent of families across all caste groups live in their own house. The percentage is lowest for ST families, among whom only 75 per cent own their home. The percentage of families who live in their own house is slightly higher in Mahaboobnagar than in Chittoor. However, the living conditions in most of these houses are very poor. Most houses have only two rooms. A large number of these households live in kutcha and semi-pucca houses, which mostly do not have electricity, toilet facility, smokeless chulhas and drainage facility. Further, these households depend on a public tap for water which is located about one kilometer away from their residence (Table 2.12, 2.12a).

Political participation and human rights

Information is one of the basic prerequisites for political participation. SCs, STs and female-headed households in large proportion rarely/never get to know when and where the meetings of Grama Sabhas (GS) of Grama Panchayat (GP), Water Users Associations (WUAs) and Village Education Committees (VECs) are held. Participation of households in grama sabha meetings is however generally good, with two-thirds attending all meetings, though the number of ST households attending meetings is generally lower. In general, the attendance by the BCs and OCs, who would be the more well-off and influential groups in the community are

better in all local institutions. Attendance in WUAs is very low for all castes, but better in VECs (Table 2.13 to 2.13b).⁶ In general, participation in meetings is low even if the information is available.

The participation of STs and female-headed households in elections - at the local level for Grama Panchayat, Mandal Praja Parishad and Zilla Parishad, at the state level for MLA, and in the national Parliamentary elections - is quite low compared to other castes and male-headed households respectively. But participation in the elections of WUAs and VECs is more or less the same across the caste groups. The STs in large proportion felt that participation in the meetings of GS of GPs and WUAs and VECs was highly worthwhile for them, whereas a majority of SCs and BCs do not have this perception. A high percentage of households from all castes reported that they could raise issues in WUAs meetings compared to GP meetings. But they could not speak out in VEC to the extent they could in GS of GP. However, among the caste groups, most of the SCs, STs could not raise issues. The same is true in the case of female-headed households as compared to male-headed households.

A few SC, ST, BC and female-headed households reported that they are aware of the reservations of seats for women in GPs. The number who knew exactly what percentage of seats was reserved for women was even fewer. This is also the situation with regard to reservation of GP seats for SCs, STs (Table 2.14, 2.14a). As compared to their literacy levels, the habit of reading a newspaper is much less among the SCs, STs and BCs compared to OCs and among female headed as compared to male-headed households. The SCs among the social groups and female-headed households spend fewer hours per day in watching TV and listening to the radio. Very few across all caste groups have held public office. BCs with 5 persons in public office have had the highest representation, while only 1 SC and OC respondent have held public office (Table 2.15).

Personal Security

Six to ten per cent of SC, BC and male headed households have stated that they have a deep sense of personal insecurity. The sense of insecurity is much higher among SC households in Chittoor district (28.6%) as compared to Mahaboobnagar (5.6%). Some ST, OC and male headed households report that they have received threats to their honour. SCs generally seem less subject to abusive behaviour from government officials or private individuals because of the security provided by legal support. But many male-headed households report such abuse. A high percentage of respondents across all social categories in both districts feel that there is social discrimination (Tables 2.16, 2.17).

⁶ It may be noted in Table 2.13 that the number of respondents among SCs and STs regarding meetings of WUAs and VECs is very few in any case.

					(Kgs)
Description of food items	SC	ST	BC	OC	All	Norm
Rice	10.45	10.72	10.80	11.42	10.84	
Wheat	0.10	0.79	0.42	1.27	0.57	
Bajra/Jowar	1.14	0.64	0.95	0.68	0.91	
Maize	0.13	0.05	0.02	0.02	0.05	
Cereals	11.82	12.19	12.20	13.39	12.36	13.80
Pulse/Gram	0.47	0.81	0.60	1.61	0.81	1.20
Gur/Sugar	0.42	0.61	0.48	1.05	0.61	0.91
Meat and fish	0.35	0.45	0.25	1.12	1.08	
Eggs	1.01	3.13	1.94	3.10	2.10	
Vegetables	0.81	1.54	1.15	2.03	1.30	4.80
Fruits	0.45	1.62	1.24	1.46	1.14	
Milk	0.76	5.61	1.68	2.20	2.01	4.50

Table 2.1: Monthly Per Capita Food Consumption by Social Group

 Table 2.2: Monthly Per Capita Consumption of Food and Average Budget Shares by

 Gender of Head of Household

Description of	Quantity (kgs)		Value share (%)		
food items	Male headed	Female headed	Male headed	Female headed	
Rice	10.68	12.02	31.84	30.27	
Wheat	0.56	0.68	2.45	3.84	
Bajra/Jowar	0.95	0.50	2.06	0.90	
Maize	0.05	0.07	0.08	0.38	
Pulse/Gram	0.82	0.70	5.24	14.43	
Gur/Sugar	0.61	0.50	3.61	2.45	
Meat and fish	0.41	0.51	6.38	3.62	
Eggs	2.19	1.60	1.89	0.85	
Vegetables	1.32	1.13	3.59	3.01	
Fruits	1.10	1.34	3.33	2.31	
Milk	2.00	2.96	3.09	2.58	
Total Expenditure					
(Rupees)			289.43	336.60	

Social Group Season	SC	ST	BC	OC	ALL
Monsoon	42	24	75	46	187
%	97.67	96	91.46	100	95.41
Winter	39	23	76	45	183
%	90.7	95.83	92.68	97.83	93.85
Summer	17	21	54	43	135
%	39.53	84	65.85	93.48	68.88
TOTAL	98	68	205	134	505
%	75.97	91.89	83.33	97.1	86.03

Table 2.3: Households Reporting Availability of Food BySeason and by Social Group

Table: 2.4 Three Major Illnesses Reported by Social Group during the One Year Period Ending November 2004	e Majo	ir Illne	sses Ke	ported	by So	cial Gr	np dno	ıring tl	ie Une	Year F	eriod I	Unding	Noven	nber 2(104
Social Group		Ι	Illness 1				I	Illness 2				Ι	Illness 3		
Illness	\mathbf{SC}	\mathbf{ST}	BC	oc	IIA	\mathbf{SC}	\mathbf{ST}	BC	oc	All	SC	\mathbf{ST}	BC	oc	All
						Ad	Adult								
Malaria/high fever	21	19	52	25	117	3	7	11	6	30	3	6	11	10	33
- % Dneumonia 1	0	82.61 0	69.33 0	60.98 1	68.42 1	30.00	33.33 0	34.38 0	40.91	35.29	37.50	90.00	64.71	58.82	63.46
	>	0.00	0.00	0.00	0.58	10.00	0.00	0.00	0.00	1.18	0.00	0.00	0.00	0.00	0.00
Fits/epilepsy	0	0	0	1	1	7	0	1	0	ω	0	0	0	0	0
%		0.00	0.00	2.44	0.58	20.00	0.00	3.13	0.00	3.53	0.00	0.00	0.00	0.00	0.00
Skin disease	0	0	0	- :		1 .	5 2	4	0 0	6	1	1	0	0	6
%	(0.00	0.00	2.44	0.58	10.00	9.52	12.50	90.6	10.59	12.50	10.00	0.00	0.00	3.85
Anemia	0	0 0	- 27	0 0		10.00	91	4 (- u	12	5 5 5 7 5	0 0	1	0 00	n L
%	(000	1.33	0.00	80.0	10.00	10.82	00.21	4.00 4	14.12	00.62	0.00	5.88 0	0.00	11.0
I B	2		- c f	0	л г И И		7 5 7	0 0	1 55	, r , r	0 00	0 0	0 0	0 00	0 0
Janndice	-	00.0	cc.1 1	00.0	C/.1	0.00	عد.و 1	0.0	0.1 0	сс.с . <u>с</u>	0.00	0.0	0.00	00.00	0.0
%		0.00	1.33	0.00	1.17	10.00	4.76	0.00	0.00	2.35	25.00	0.00	0.00	0.00	3.85
Respiratory diseases	0	0	0	0	0	0	0	4	1	S	0	0	1	2	б
%		0.00	0.00	0.00	0.00	0.00	0.00	12.50	4.55	5.88	0.00	0.00	5.88	11.76	5.77
Congenital illness	0	0	0		1	0	0		ŝ	4	0	0	0	1	1
%	(0.00	0.00 ĵ	2.44	0.58	0.00	0.00 Û	3.13	13.64	4.71	0.00	0.00 ^	0.00 Û	5.88	1.92
Heart problem	0	0 0	τ π	9 11 60	6	0 0	0 0	- ;	0 0	1 10	0	0 0	0 0	0 00	0 0
Vidnow muchlow	-	00	4.00	14.00	07.0	00.00	00.00	0.1.0	00.0	1.10	00.00	00	00.00	00.00	00.0
	-	000	1 33	000	1 17	00.0	0000	000	000	000	000	000	000	0000	0000
Other	9	4	16	2000	33	1	6	9	5	15	0	0	4	4	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
%		17.39	21.33	17.07	19.30	10.00	14.29	18.75	22.73	17.65	0.00	0.00	23.53	23.53	15.38
Total	32	23	75	41	171	10	21	32	22	85	8	10	17	17	52

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Table: 2.4 Three Major Illnesses Reported by Social Group during the One Year Period Ending November 2004 (contd)	lajor II	lnesses	Report	ted by S	Social (Jroup	during	the On	e Year	Period	Ending	Noven	lber 2()04 (coi	ntd)
Social Group		I	Illness 1				I	Illness 2					Illness 3		
Illness	SC	$\mathbf{T}\mathbf{S}$	BC	OC	IIV	SC	$\mathbf{T}\mathbf{S}$	BC	0C	ШV	SC	$\mathbf{T}\mathbf{S}$	BC	0C	IIV
						Chi	Children								
Malaria/high fever	19	13	25	17	74	1	1	3	9	14	3	1	9	8	18
%		81.25	69.44	89.47	81.32	33.33	10.00	25.00	100.00	41.18	100.00	33.33	85.71	88.89	81.82
Pneumonia	0	0	б	0	ε	0	0	-	0	1					
%		0.00	8.33	0.00	3.30	0.00	0.00	8.33	0.00	2.94					
Skin disease	0	0	-		0	1	0	-	0	0					
%		0.00	2.78	5.26	2.20	33.33	0.00	8.33	0.00	5.88					
Anemia	0	0	0	0	0	0	0		0	1	0	0	1	0	1
%		0.00	0.00	0.00	0.00	0.00	0.00	8.33	0.00	2.94	0.00	0.00	14.29	0.00	4.55
Diarrhea	0	2	4	0	9	0	5	7	0	7					
Đ			+ + + +												
%		12.50	11.11	0.00	6.0	0.00	00.00	10.07	0.0	20.2					
Jaundice	0	0	0	0	7	0	2	4	0	9					
	%		0.00	5.56	0.00	2.20	0.00	20.00	33.33	0.00	17.65				
Congenital illness	0	0	0	-	-										
%		0.00	0.00	5.26	1.10										
Kidney problem	-	0	0	0	-										
%		0.00	0.00	0.00	1.10										
Other	0			0	5	1	2	0	0	Э	0	2	0	1	ß
%		6.25	2.78	0.00	2.20	33.33	20.00	0.00	0.00	8.82	0.00	66.67	0.00	11.11	13.64
Total	20	16	36	19	91	3	10	12	6	34	Э	3	7	6	22
%	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100

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Social Group	Reported Incidence (%)	Received treatment (%)	No.of working Days Lost (Average)	Medical expenditure incured (Rs)	Other expenditure incured (Rs)
		Mah	aboobnagar		
SC ST BC OC Total	72.22 0 86.96 88.24 81	96.15 100 100 98.77	39.07	3082.81 300.00 5021.59 3131.25 3978.49	503.87 50.00 965.45 393.44 700.49
	•		Chittoor		•
SC ST BC OC Total	85.71 95.83 92.11 89.66 91.84	100 100 100 100 100	94.71 105.45 102.91 102.35 102.76	1500.00 1800.00 1989.19 9887.04 4175.00	1066.67 468.53 1912.89 5316.04 2606.81

Table: 2.4a	Households Reported Incidence and Burden of Illness Among	5
	Adults by Social Group and by District	

Table: 2.4b Households Reporting Incidence and Burden of Illness AmongAdults By Gender of the Head of Households and by District

Category of Household	Reported Incieidence (%)	Received treatment (%)	No.of working Days Lost	Medical expenditur (Rs)	Other expenditure (Rs)
		Mahabo	obnagar		
Male headed Female headed Total	81.71 77.78 81.00	98.51 100.00 98.77	33.35 35.29 33.66	4447.4 1721.88 3978.49	596.32 1195.31 700.49
		Chi	ttoor		•
Male headed Female headed Total	90.48 100 92	100 100 100	103.6 94.38 101.88	4723.13 1037.5 4108.85	2915.92 597.6 2606.81

	· ·		(Percentage)
Economic Category	Public Hospitals	Private Hospitals	All
POP	63.77	36.23	100
POOR	59.68	40.32	100
NSP	40	60	100
NP	13.04	86.96	100
All	52.51	47.49	100

 Table: 2.5 Households Reporting First Point of Contact in Case of Illnesses by Type of Hospital and by Economic Category

Table: 2.6 Households Reporting Availability of Health Workers by Economic
Category

(Percentage)

Economic Category		Response	
	Yes	No	Total
POP	95.65	4.35	100
POOR	93.55	6.45	100
NSP	100	0	100
NP	100	0	100
All	96.09	3.91	100

Table: 2.7Households Reporting Place of Delivery By
Economic Category

(Percentage)

Economic Category Place of Delivery	Public hospital	Private hospital	Home (trained Attendent)	Home (untrained Attendent)	Total
POP	10	6	7	26	49
%	20.41	12.24	14.29	53.06	100
POOR	11	11	2	25	49
%	22.45	22.45	4.08	51.02	100
NSP	7	2	0	8	17
%	41.18	11.76	0	47.06	100
NP	2	6	1	7	16
%	12.5	37.5	6.25	43.75	100
Total	30	25	10	66	131
%	22.9	19.08	7.63	50.38	100

Table: 2.7a	Households Reporting Place of Delivery by
	Social Group and District

(Percentage)	
(I CICCIntage)	

Social Group / Place of Delivery	SC	ST	BC	OC	All
	Mahal	ooobnagar			
Public	8	0	6	0	14
%	28.57	0	18.18	0	20
Private	7	1	4	3	15
%	25	100	12.12	37.5	21.43
Home Trained Attendent	1	0	4	0	5
%	3.57	0	12.12	0	7.14
Home Untrained Attendent	12	0	19	5	36
%	42.86	0	57.58	62.5	51.43
Total	28	1	33	8	70
%	100	100	100	100	100
	Cl	nittoor			
Social Group / Place of Delivery	SC	ST	BC	OC	All
Public	0	5	10	7	22
%	0	27.78	34.48	33.33	29.73
Private	0	1	2	9	12
%	0	5.56	6.9	42.86	16.22
Home Trained Attendent	0	2	2	3	7
%	0	11.11	6.9	14.29	9.46
Home Untrained Attendent	6	10	15	2	33
%	100	55.56	51.72	9.52	44.59
Total	6	18	29	21	74
%	100	100	100	100	100

				(Percentage
Place of delivery/ Gender of head of househol	d	Male headed	Female headed	All
	M	ahaboobnagar		
Public		12	2	14
	%	20	20	20
Private		12	3	15
	%	20	30	21.43
Home Trained Attendent		5	0	5
	%	8.33	0	7.14
Home Untrained Attendent	31	5	36	
	%	51.67	50	51.43
Total		60	10	70
	%	100	100	100
		Chittoor		
Public		22	0	22
T done	%	30.99	0	28.95
Private	70	12	1 1	13
1111440	%	16.9	20	17.11
Home Trained Attendent	70	6	1	7
	%	8.45	20	9.21
Home Untrained Attendent		31	3	34
	%	43.66	60	44.74
Total	, 0	71	5	76
	%	100	100	100

Table: 2.7bHouseholds Reporting Place of Delivery by Gender of Head of
Household and by District

(Percentage)

 Table: 2.8 Households Reporting Practice of Contraception by Different Methods And by Economic Category

		U	5	U	(Percentage)	
Economic	Me	Method of Contraception				
Category	Tubectomy	Vasectomy	Temporary	None	All	
РОР	27	1	5	16	49	
%	55.1	2.04	10.2	32.65	100	
POOR	31	1	2	16	50	
%	62	2	4	32	100	
NSP	11	3	0	4	18	
%	61.11	16.67	0	22.22	100	
NP	13	1	0	4	18	
%	82	6	7	40	135	
Total	60.74	4.44	5.19	29.63	100	

Economic	Decision on contraception					
Category	Self	Self Partner		All		
РОР	6	1	24	31		
%	19.35	3.23	77.42	100		
POOR	6	0	23	29		
%	20.69	0	79.31	100		
NSP	5	0	7	12		
%	41.67	0	58.33	100		
NP	2	0	11	13		
%	15.38	0	84.62	100		
Total	19	1	65	85		
%	22.35	1.18	76.47	100		

Table: 2.8aHouseholds Reporting on who takes Decision on
Contraception by Economic Category

(Percentage)

Table: 2.8bHouseholds Reporting on who takes Decision on contraceptionby Social Group and by District

(Percentage)

Decision on contraception	I I				All
	SC	ST	BC	OC	
	N	Iahaboobna	gar		
Self	1	0	1	1	3
%	7.14	0	4.35	14.29	6.67
Joint	13	1	22	6	42
%	92.86	100	95.65	85.71	93.33
Total	14	1	23	7	45
%	100	100	100	100	100
		Chittoo	or		•
Self	2	3	6	8	19
%	100	20	28.57	61.54	37.25
Partner	0	1	0	1	2
%	0	6.67	0	7.69	3.92
Joint	0	11	15	4	30
%	0	73.33	71.43	30.77	58.82
Total	2	15	21	13	51
%	100	100	100	100	100

Table: 2.8c	Households Reporting on who takes Decision on Contraception
	by Gender Head of Household and by District

(P	ercentage)	

Decision on	Category o	Category of Household		
contraception	Male headed	Female headed		
	Mahaboob	nagar		
Self	1	2	3	
%	2.5	40	6.67	
Joint	39	3	42	
%	97.5	60	93.33	
Total	40	5	45	
%	100	100	100	
	Chitt	oor		
Self	17	2	19	
%	34.69	50	35.85	
Partner	2	0	2	
%	4.08	0	3.77	
Joint	30	2	32	
%	61.22	50	60.38	
Total	49	4	53	
%	100	100	100	

Table: 2.9Distribution of Children died by Gender and by Head of
Economic Category

	Gender of Ch	Gender of Child who died		
Economic Category	Male	Female		
РОР	9	6	15	
%	60	40	100	
POOR	2	4	6	
%	33.33	66.67	100	
NSP	1	2	3	
%	33.33	66.67	100	
NP	1	2	3	
%	33.33	66.67	100	
All	13	14	27	
%	48.15	51.85	100	

			Social Group				
Child Mo	rtality	SC	ST	BC	OC	All	
Male		5	1	2	0	8	
	%	41.67	100	33.33	0	40	
Female		7	0	4	1	12	
	%	58.33	0	66.67	100	60	
Total		12	1	6	1	20	
	%	100	100	100	100	100	

Table: 2.9a Distribution of Children died by Social Group in
Mahaboobnagar District

 Table: 2.9b
 Distribution of Children died by Social Group in Chittoor District

Child Mo	rtality	ST	BC	OC	All
Male		1	3	1	5
	%	100	75	50	71.43
Female		0	1	1	2
	%	0	25	50	28.57
Total		1	4	2	7
	%	100	100	100	100

	Social Group					
Type of school	SC	ST	BC	OC	All	
	All Districts					
Public	51	31	86	29	197	
%	68.92	96.88	69.92	60.42	71.12	
Private	9	1	24	16	50	
%	12.16	3.13	19.51	33.33	18.05	
Not enrolled	14	0	13	3	30	
%	18.92	0	10.57	6.25	10.83	
Total	74	32	123	48	277	
%	100	100	100	100	100	
	Ν	Iahaboobnaş	gar District			
Public	45	1	46	14	106	
%	66.18	100	62.16	60.87	63.86	
Private	9	0	15	6	30	
%	13.24	0	20.27	26.09	18.07	
Not enrolled	14	0	13	3	30	
%	20.59	0	17.57	13.04	18.07	
Total	68	1	74	23	166	
%	100	100	100	100	100	
		Chittoor]	District			
Public	6	30	40	15	91	
%	100	96.77	81.63	60	81.98	
Private	0	1	9	10	20	
%	0	3.23	18.37	40	18.02	
Total	6	31	49	25	111	
%	100	100	100	100	100	

Table: 2.10 Distribution of Children Enrolled by Type of school and
by Social Group and by District

Type of School	Category o	Category of Household		
	Male headed	Female headed		
	Mahaboobnaga	ar District		
Public	101	5	106	
%	67.79	29.41	63.86	
Private	29	1	30	
%	19.46	5.88	18.07	
Not enrolled	19	11	30	
%	12.75	64.71	18.07	
Total	149	17	166	
%	100	100	100	
	Chittoor	District		
Public	84	9	93	
%	80	100	81.58	
Private	21	0	21	
%	20	0	18.42	
Total	105	9	114	
%	100	100	100	

Table: 2.10aDistribution of Children Enrolled by Type of School and
by Gender of Head of Household

Table: 2.11 Distribution of Children by Class at which she/he dropped outand by Economic Category

Class	РОР	POOR	NSP	NP	All
1	1	1	0	0	2
%	10	25	0	0	10.53
5	4	0	0	0	4
%	40	0	0	0	21.05
7	2	2	1	1	6
%	20	50	50	33.33	31.58
8	2	0	0	1	3
%	20	0	0	33.33	15.79
9	1	0	0	0	1
%	10	0	0	0	5.26
10	0	1	1	1	3
%	0	25	50	33.33	15.79
Total	10	4	2	3	19
%	100	100	100	100	100

			Social Group		
Clas	S	ST	BC	OC	All
		Mahab	oobnagar Distr	ict	•
1		0	1	0	1
_	%	0	25	0	8.33
5	~	2	2	0	4
-	%	33.33	50	0	33.33
7	01	2	0	2	
0	%	33.33	0	100	33.33
8	%	1 16.67	0 0	0	8.33
9	%0	10.07	0		0.55
2	%	16.67	0	0	8.33
10	70	0	1	0	1
10	%	0	25	0	8.33
Total	70	6	4	2	12
	%	100	100	100	100
		Ch	ittoor District	1	
1		0	1	0	1
-	%	Ő	50	Ő	14.29
7		0	1	1	2
	%	0	50	25	28.57
8	1	0	1	2	
	%	100	0	25	28.57
10	0	0	2	2	
	%	0	0	50	28.57
Total	1	2	4	7	100
	%	100	100	100	100

Table: 2.11aDistribution of Children by Class at which she/he Dropped Out
by Social Group and by District

Table: 2.11bDistribution of Children at which Class she/he Dropped out by
Gender of the Head of the Household in Chittoor District

Drop	oout	Category o	All	
		Male headed	Female headed	
1		1	0	1
	%	16.67	0	14.29
7		2	0	2
	%	33.33	0	28.57
8		1	1	2
	%	16.67	100	28.57
10		2	0	2
	%	33.33	0	28.57
Total		6	1	7
	%	100	100	100

Description of	House	SC	ST	BC	OC	All
Owned		38	18	76	41	173
o whee	%	88.37	75	90.48	91.11	88.27
Rented	70	3	2	5	2	12
10000	%	6.98	8.33	5.95	4.44	6.12
Other	,0	2	4	3	2	11
	%	4.65	16.67	3.57	4.44	5.61
Total	, -	43	24	84	45	196
	%	100	100	100	100	100
No of rooms		2	2	2	4	2
Access to Electric	city	_				_
Yes		19	23	57	44	143
	%	44.19	92	71.25	93.62	73.33
No	, -	8	2	17	1	28
	%	18.6	8	21.25	2.13	14.36
Unofficial Conne	ction	16	0	6	2	24
	%	37.21	Ő	7.5	4.26	12.31
Total	,0	43	25	80	47	195
	%	100	100	100	100	100
Having toilet	, -					
Yes		9	14	28	31	82
100	%	20.93	56	33.33	65.96	41.21
No	, -	34	11	56	16	117
	%	79.07	44	66.67	34.04	58.79
Total	,.	43	25	84	47	199
	%	100	100	100	100	100
Having smokelss						
Yes		3	0	17	24	44
	%	6.98	0	20.48	51.06	22.22
No		40	25	66	23	154
	%	93.02	100	79.52	48.94	77.78
Total		43	25	83	47	198
	%	100	100	100	100	100
Connected with a						
UG Drains	6	2	7	15	30	
	%	14.63	8	8.43	31.91	15.31
Covered drains	0	0	1	5	6	
	%	0	0	1.2	10.64	3.06
Open drains	5	13	21	13	52	
*	%	12.2	52	25.3	27.66	26.53
No drainage						
connection	30	10	54	14	108	
	%	73.17	40	65.06	29.79	55.1
Total	41	25	83	47	196	
	%	100	100	100	100	100

 Table 2.12 Households Living in Different Types of Houses and by Social Group

Type of House	SC	ST	BC	OC	Total
UG Drains	6	2	7	15	30
%	14.63	8	8.43	31.91	15.31
Covered drains	0	0	1	5	6
%	0	0	1.2	10.64	3.06
Open drains	5	13	21	13	52
% No	12.2 30	52 10	25.3 54	27.66 14	26.53 108
- NO %	73.17	40	65.06	29.79	55.1
Total	41	25	83	47	196
%	100	100	100	100	100
Major source of drinking water					
Overhead tank	1	0	13	15	29
%	2.33	0	15.66	31.91	14.65
Public tap	22	13	35	22	92
%	51.16	52	42.17	46.81	46.46
Hand pump	15	1	16	4	36
%	34.88	4	19.28	8.51	18.18
Tank/pond/stream %	5 11.63	11 44	17 20.48	6 12.77	39 19.7
Open well	0	44 0	20.48	0	19.7
%	0	0	1.2	0	0.51
Other	0	0	1	0	1
%	0	0	1.2	0	0.51
Total	43	25	83	47	198
%	100	100	100	100	100
How far		_			
Inside the house	6	7	30	27	70
%	13.95	28	36.14	57.45	35.35
Less than 1 KM away %	37 86.05	18 72	52 62.65	20 42.55	127 64.14
More than 1 KM away	0	0	02.03	42.55	04.14
%	0	0	1.2	0	0.51
	Mahaboobi	nagar Disti			
Ownership	30	0	42	16	88
- %	85.71	0	91.3	100	89.8
Rented	3	1	3	0	7
%	8.57	100	6.52	0	7.14
Other %	5 71	2	0 2.17	1 0	0 3.06
% Total	5.71 35	0	2.17 46	0 16	3.06 98
10tai %	100	100	100	100	100
10	100	100	100	100	100

Table 2.12 Households Living in Different Types of Houses and by Social Group
(Contd)

Type of House		SC	ST	BC	OC	All
		Chittoor	·District			
Owned		8	18	34	25	85
	%	100	78.26	89.47	86.21	86.73
Rented		0	1	2	2	5
	%	0	4.35	5.26	6.9	5.1
Other		0	4	2	2	8
	%	0	17.39	5.26	6.9	8.16
Total		8	23	38	29	98
	%	100	100	100	100	100

 Table 2.12 Households Living in Different Types of Houses and by Social Group (Contd....)

Table: 2.12aHouseholds Living in Different Types ofHouses by Gender of the Head of the ofHouseholds and by District

Type of Household Category of Household			f Household	Total
		Male headed	Female headed	*
		Mahaboobnag	ar District	
Owned		73	15	88
	%	90.12	88.24	89.8
Rented		6	1	7
	%	7.41	5.88	7.14
Other		2	1	3
	%	2.47	5.88	3.06
Total		81	17	98
	%	100	100	100
		Chittoor	District	
Owned		74	12	86
	%	87.06	80	86
Rented		5	1	6
	%	5.88	6.67	6
Other		6	2	8
	%	7.06	13.33	8
Total		85	15	100
	%	100	100	100

Frequency of	Social Group				
participation	SC	ST	BC	OC	All
Always	35	1	48	21	105
%	83.33	10	72.73	52.5	66.46
Mostly	2	2	2	3	9
%	4.76	20	3.03	7.5	5.7
Rarely	2	3	6	3	14
%	4.76	30	9.09	7.5	8.86
Never	1	2	10	9	22
%	2.38	20	15.15	22.5	13.92
NA	2	2	0	4	8
%	4.76	20	0	10	5.06
Total	42	10	66	40	158
%	100	100	100	100	100

Table: 2.13 Respondents Participated in Meetings of
Gram Panchayat by Social Group

Table: 2.13a Percentage of Respondents Participated in Meetings ofWater Users Association (WUA) by Social Group

Frequency of	Social Group				
participation	SC	ST	BC	OC	All
Always	0	2	4	4	10
%	0	20	18.18	21.05	17.24
Mostly	1	3	5	3	12
%	14.29	30	22.73	15.79	20.69
Rarely	1	3	5	4	13
%	14.29	30	22.73	21.05	22.41
Never	3	0	7	3	13
%	42.86	0	31.82	15.79	22.41
NA	2	2	1	5	10
%	28.57	20	4.55	26.32	17.24
Total	7	10	22	19	58
	100	100	100	100	100

Frequency of	Social Group				
participation	SC	ST	BC	OC	All
Always	3	2	8	7	20
%	20	20	28.57	30.43	26.32
Mostly	1	4	4	4	13
%	6.67	40	14.29	17.39	17.11
Rarely	5	4	4	3	16
%	33.33	40	14.29	13.04	21.05
Never	5	0	10	5	20
%	33.33	0	35.71	21.74	26.32
NA	1	0	2	4	7
%	6.67	0	7.14	17.39	9.21
Total	15	10	28	23	76
%	100	100	100	100	100

Table: 2.13bPercentage of Respondents Participated in Meetings of
Village Education Committees (VES)

Table: 2.14Awareness of Respondents on Reservations for Gram Panchyat
(GP) Seats for Women by Social Group

Social Group	Percentage of Seats				
	% (saying Yes)	% reserved			
SC	13.33	24			
ST	31.82	32.57			
BC	22.73	32.7			
OC	50	31.88			

Table: 2.14a	Awareness of Respondents on Reservations in Gram
Par	nchayat (GP) Seats by Type of households

Category of Household	Percentage of Seats			
	% (saying Yes)	% reserved		
Male headed	32.38	31.76		
Female headed	10	33		

Held public office		Social Group				
		SC	ST	BC	OC	All
Yes No Total	% %	$ \begin{array}{r} 1\\ 2.44\\ 40\\ 97.56\\ 41\\ 1 \end{array} $	2 8 23 92 25	5 6.17 76 93.83 81 0	$ \begin{array}{r} 1\\ 2.27\\ 43\\ 97.73\\ 44\\ 100\\ \end{array} $	9 4.71 182 95.29 191 100
	%	100.00	00.00	0	100	100

 Table: 2.15
 Percentage of Households Who Held Public Office by Social Group

Table: 2.16	Households Suffering from Personal Insecurity and Sources of
	Insecurity by Social Group

					(Per	centage)
No	Description of Personal Insecurity	SC	ST	BC	OC	Total
1	Suffer Personal Insecurity (Yes)	9.30	4.00	6.02	4.35	6.09
1a	If Yes Reported to Govt. Official	50.00		0.00		22.22
1b	Any Action Taken (Yes)	50.00		0.00		33.33
1c	Discrimination by officials (Yes)	0.00	21.74	10.26	20.00	15.00
1d	Reported to Local Leaders (Yes)	27.27	16.67	12.20	6.67	13.21
1e	Local Leaders Came to rescue (Yes)	100.00	75.00	16.67	0.00	50.00
1f	Discrimination by Local Leaders (Yes)	0.00	21.74	12.20	23.08	16.16
2	Govt. conducting educational					
	progs for non-violence (Yes)	5.88	25.00	10.00	16.67	12.94
3	Honour and reputation					
	threatened (Yes)	4.88	8.00	3.75	10.87	6.25
3a	If yes reported to Govt. officials (Yes)	100.00	66.67	11.11	57.14	42.86
3b	Anction taken? (Yes)	66.67	66.67	33.33	50.00	53.85
3c	Reported this to local leaders	28.57	13.64	8.11	14.81	12.90
3d	If yes, local leaders came to rescue	50.00	40.00	25.00	28.57	33.33
4	Social discrimination (Yes)	12.50	12.50	16.88	11.63	14.13
4a	Reported to authorities (Yes)	16.67	0.00	33.33	0.00	20.59
4b	Govt. Conducting Spl. Progs					
	in this regard (Yes)	5.71	12.00	14.06	10.81	11.18
5	Suffer abuse by Govt.					
	officials/private individuals (Yes)	0.00	4.55	3.75	6.67	3.70
5a	Approached Court (Yes)	0.00	0.00	0.00	33.33	6.67
6	Aware of free legal service (Yes)	0.00	12.50	6.33	13.64	7.45
7	Ever utilised it (Yes)	0.00	33.33	0.00	0.00	4.55
8	There is no discrimination					
	in free legal services (Yes)	0.00	0.00	5.00	8.70	4.19
9	There is no discrimination					
	in services of courts (Yes)	0.00	0.00	2.41	8.70	3.05

S.No	Description of	Changes	s of Household	All
	Personnel Insecurity	Male headed	Female headed	
1	Suffer Personal Insecurity (Yes)	6.06	5.88	6.03
1a	If yes Reported to Govt. Official	28.57	0	22.22
1b	Any Action Taken (Yes)	50	0	33.33
1c	Discrimination by officials (Yes)	14.12	17.65	14.71
1d	Reported to Local Leaders (Yes)	10.11	26.32	12.96
1e	Local Leaders Came to rescue (Yes)	40	75	50
1f	Discrimination by Local Leaders?	17.65	6.25	15.84
2	Govt. conducting educational progs for non-violence (Yes)	13.1	11.11	12.79
3	Honour and reputation threatened (Yes)	6.88	2.94	6.19
3a	If yes reported to Govt. officials (Yes)	42.11	50	42.86
3b	Action taken (Yes)	63.64	0	53.85
3c	reported this to local leaders	12.66	12.5	12.63
3d	If yes, local leaders came to	20.00	16.67	22.22
	rescue	38.89	16.67	33.33
4	Social discrimination (Yes)	15.58	6.25	13.98
4a	Reported to authorities (Yes)	25	0	20.59
4b	Govt. Conducting Spl. Progs in this regard (Yes)	11.94	6.9	11.04
5	Suffer abuse by Govt. officials/private individuals (Yes)	3.75	3.23	3.66
5b	Approached Court (Yes)	9.09	0	6.67
6	Aware of free legal service (Yes)	8.86	0	7.37
7	Ever utilised it (Yes)	5	0	4.55
8	There is no discrimination in free legal services (Yes)	4.4	2.94	4.15
9	There is no discrimination in services of courts (Yes)	3.03	2.94	3.02

Table 2.17: Distribution of Personal Insecurity and by Source of Insecurity
Reported by Gender of the Head of Household

CHAPTER III

Human Deprivation and Role of Household Factors

Introduction

Since human deprivation is determined by household factors and extra household factors, the State can play a greater role in reducing such deprivation by mediating through these factors. This chapter is an attempt to assess the role of household factors in human deprivations outlined in the preceding chapter. Human deprivation is linked with livelihood strategies of the households through their asset base given their social status, in terms of caste and the gender of the head of the household. Therefore, the chapter examines the relationship between human deprivation and livelihood strategies, with respect to the asset base of the different social and economic groups, how livelihood strategies are determined by the asset base and in turn influence human deprivation of different groups.

Methodology

The assets considered include material assets, viz., physical and financial. Assets are individual or collective. Natural assets are considered for this analysis and include both individual (private) and collective land and water owned by the households, which are called common property resources (CPRs). The livestock owned by the households, including small and big ruminants, are also considered under assets. Accessing of credit is the factor considered for financial assets. Livelihood strategy refers to the profile of economic activities pursued by the individual/household/ community. The proportion of contribution of income from different activities to the total household income reflects the relative importance of each activity. Economic activities have been broadly grouped into four categories. They include selfemployed agriculture (on-farm and off-farm), self-employed non-agriculture, agricultural wage employment and non-agricultural wage employment. Selfemployed agriculture includes crop production, forestry, fishing and livestock. Nonagriculture (non-farm) refers to industry, trade and transport, construction and artisan activities. Wage employment in on-farm and off-farm activities are grouped as agricultural wage employment and that relating to non-agriculture/non-farm activities are grouped as non-agricultural wage employment. Households are also classified according to economic status as poorest of poor (POP), poor, not so poor (NSP) and non-poor (NP).

Analysis

Asset Base

About 40 to 48 per cent of households belonging to SCs, STs and BCs own unirrigated land, while between 21 and 32 percent also have irrigated land. Many households, however, have no land at all. Furthermore, most of the land-owning households among the SCs are either marginal or small farmers. The average size of landholding is very small among SCs and STs. The proportion of irrigated land is low among the SCs. Land sales are high among BCs and OCs. Nearly 60 per cent of SC, ST and BC households do not possess livestock, while livestock holding is high among OCs. Many households among SCs, STs and BCs do not own either land or livestock. SCs and STs who do own livestock frequently tend to sell their animals (Table 3.1). Access to waste land and tanks is high across all caste groups, but access to endowment land is very low for SCs and BCs. (Table 3.2) ST households generally depend more on SHGs for credit, and in general are able to raise only very small amounts of money from all sources of credit (Table 3.3).

Livelihood strategies

The SC and ST obtain more income from wage employment than self-employment. Their dependence on non-farm income is less compared to other castes, and female-headed households that are in a similar situation. Migration is more pronounced among the SC, who sometimes migrate with their children in search of work. All the households are exposed to drought and in order to cope, most families resort to borrowing or mortgage or sell their assets (Tables 3.4 to 3.8).

Livelihood Strategies and Human Deprivation

Food security and human rights

Households whose main source of livelihood is wage employment in agriculture spent less on food compared to those from other occupations. The composition of the food basket shows that the consumption levels of this group are less than the prescribed norms in regard to all food items and also that they, among all the occupational groups, are spending more on non-cereal food. Interestingly, the incidence of food insecurity is relatively high for agricultural labour during the monsoon and winter but less in the summer, when many migrate looking for work.

Health and human rights

General health

The incidence of acute ill health is higher among the self-employed in agriculture as well the self-employed and wage employed in non-agriculture, while chronic ill health is high among agricultural labour households. The same pattern has been

found in the case of the children of these occupational groups. As seen in chapter 2, the incidence of illness is much higher in Chittoor district than in Mahaboobnagar across all occupational categories and economic groups. In both districts, families working for wages in agriculture are particularly vulnerable, while in Chittoor, the occurrence of illness is also high among the self-employed in non-agriculture. Among the economic groups, fewer non-poor have reported major illness in both districts, but there is no clear pattern across the other three groups (Table 3.9). Agricultural labour households, to a great extent, depend on public health institutions for treatment, as do the poorest of poor and poor. As a result, they spend less on medical care. But, the effect on livelihoods (i.e., number of working days lost) is the highest among agricultural labour. Further, the children did not get treatment in 4 per cent of agricultural labour households, whereas the children of other occupational groups could get treatment when they were ill. In Chittoor a higher proportion of households in all categories use public hospitals as compared to Mahaboobnagar. Less than half of even the poorest of poor in Mahaboobnagar use public hospitals, whereas in Chittoor, many non-poor also use the government facilities, indicating that public health services are better in the more developed district (Table 3.10).

Women's health

A higher proportion of pregnant women in agriculture – either working for wages as agricultural labour or self-employed, compared to other occupational group households, have not received antenatal care and even such antenatal visits have been very few. The incidence of unsafe deliveries is very high among agricultural labour and the self-employed in agriculture, compared to the self - and wageemployed in non-agriculture, in that order. In Mahaboobnagar, nearly two-thirds of deliveries in not-so-poor and non-poor households are unsafe and take place at home, as compared to deliveries in poor and poorest of poor families. In Chittoor, however, unsafe deliveries occur most in POP households. Agricultural workers (both self-employed and wage employed) in Mahaboobnagar, and wage employed in agriculture in Chittoor have the highest rate of unsafe deliveries. Overall, there are more unsafe deliveries in Mahaboobnagar than in Chittoor. Adoption of contraceptive methods is high across all economic classes. However the percentage is lowest among the poorest of poor, and highest among the two higher income groups. Among the occupational groups, contraception is high among the selfemployed in agriculture. The decision on family planning is generally taken jointly by couples. However, among the self-employed and those working for wages in agriculture, more women take the decision compared to those in non-agricultural occupations (Tables 3.11, 3.11ato 3.11d).

Child health

A large proportion of children of households working for wages in non-agriculture have not been vaccinated. Most women of agricultural labour households breastfeed

their children for a shorter period. Child mortality is relatively lower among the wage-employed households, but morbidity may be more among the children belonging to these households. The incidence of female child mortality is higher among households which are self-employed in agriculture and wage-employed in non-agriculture. In both districts, more than half the children who died were from POP households. Child mortality is high among those who work for wages in non-agriculture and the self-employed in agriculture, while in Chittoor, the children of the self-employed in agriculture are the vulnerable group (Table 3.12).

Education and human rights

Children's education

As noted in the previous chapter, non-enrolment of children in schools has been reported only in Mahaboobnagar. Surprisingly, a higher percentage of children from non-poor families are not enrolled in schools as compared to the not-so-poor and poor. The highest enrolment rate is in POP households. Children of households which are self-employed in non-agriculture and agriculture, in relatively large proportion and in that order, are not enrolled in schools. Those who are employed for wages in agriculture and are self-employed in agriculture, compared to other occupational groups, spend very little on the education of their children. In fact, except for non-poor families, most children are enrolled in public schools in both districts (Table 3.13). The incidence of dropping out of school is high among the children of wage-employed families in agriculture and non-agriculture. These children also tend to drop out early from school. Dropping out of school is also much higher among children of the two poorer classes, the POP and poor. Among the POP more children drop out of school from the fifth class onwards, while among the poor this happens in the seventh class. In Mahaboobnagar, the highest number of drop-outs is from households working for wages in non-agriculture, followed by the self-employed in agriculture. Three-quarters of the children who leave schooling do so before the seventh class. In Chittoor district also, more children from households of the same occupational categories drop out of school, but this happens only after class 7 (Table 3.14).

Shelter and human rights

A higher percentage of households who are wage-employed in agriculture do not own houses, and in Mahaboobnagar only 57 % of these families own their own home. Most live in two room tenements. A large proportion of households of all occupational groups live in kutcha and semi-pucca houses, especially families employed in agriculture either as self-employed or working for wages. Many houses do not have electricity, toilet facility, smokeless chulhas and drainage facility, particularly those belonging to households working as wage labour in agriculture and non-agriculture, and the poorer classes. Further, these households do not have

safe drinking water and drinking water has to be procured from some distance (Table 3.15 to 3.15e).

Political participation and human rights

Most households employed for wages in agriculture and non-agriculture rarely, if ever, get information about when and where the meetings of gramasabhas of gram panchayat, water users associations and village education committees are held. Consequently, their participation in gramasabhas meetings is poor. But attendance remains poor even when the information is available. Among the economic groups, a higher percentage of non-poor and not-so-poor households know about Panchayat meetings, and this is reflected in their attendance in the meetings, whereas both information regarding these meetings and attendance is very low among the poor and POP (Tables 3.16 to 3.16c, 3.17). However, all groups participate in large numbers in elections to the Gram Panchayat, Mandal Praja Parshad, Zilla Parishad and MP showing a high degree of political awareness. The poorer classes, however, show much less interest in the elections to the Water Users Association or the Village Education Committees (Table 3.18f, 3.18g). Among the various occupational groups, agricultural labour rarely take part in elections of Grama Panchayat, Mandal Praja Parishad, Zilla Parishad, MLA and MP, or in elections to Water Users Associations and Village Education Committees.

A majority of people working in non-agricultural activities felt that participation in the meetings of Grama sabhas and Grama Panchayats or WUA was not worth while for them, compared to other occupational groups perhaps because these bodies deal more with the concerns of the agricultural sector. But they felt that it was worthwhile to attend the VECs meetings. However, all classes felt that participation in meetings of local bodies was worthwhile, and even among the POP, more than a third felt this way (Table 3.19 to 3.19c). Most people who are self-employed in agriculture compared to other occupational groups reported that they could raise issues in Grama sabhas and Grama Panchayats. Non-agricultural and agricultural labour, similarly, had a more positive response to meetings of the WUA and VEC respectively. Persons from all economic groups had raised issues in local body meetings, especially in the panchayat meetings. However, the not-so-poor and non-poor had participated more vocally in all meetings (Table 3.20 to 3.20c).

A high proportion of the self-employed in agriculture stated that they were aware of the reservations of Grama Panchayat seats for women, though only a small number knew the exact provisions. Among households working for wages, either in agriculture or non-agriculture, very few were in the habit of reading newspapers, though they were literate. Agricultural labour families also spend fewer hours per day in watching TV and listening to radio. Few among the wage workers hold public office.

Personal security

The sense of insecurity is high among the poor in Mahaboobnagar and the POP in Chittoor. However, even the not-so-poor families in both districts complained of social discrimination. Households employed in non-agriculture (both self-employed and wage-employed) in Mahaboobnagar complained more about personal insecurity, while the self-employed households in agriculture complained of social discrimination. In Chittoor, families working for wages in agriculture and non-agriculture had a deeper sense of insecurity. Nearly all occupational groups however complain about social discrimination (Table 3.21to 3.21c, 3.22).

Conclusion

On nearly all the indicators, the most deprived sections of society - SCs and STs among caste groups, female-headed households, the landless who work for wages in agriculture and non-agriculture among the occupational groups and the two poorer economic groups - suffer higher levels of deprivation, in terms of food intake, chronic illness, maternal and child care and child health, education of children, and participation in governance institutions and structures. This underlines both the nature and the problem of chronic poverty, in which the poor are locked in a vicious cycle of poverty of low incomes, inadequate food and poor health and low capabilities.

If we compare the developed district with the backward district, it can be seen that on most indicators of well-being like better public health facilities, maternal health, safe child birth, child mortality, enrolment in schools and dropping out of school the situation is much better in the developed district. This would indicate and support the proposition that ensuring a basic level of economic development is the first step in achieving the goal of poverty alleviation in a holistic sense.

Table 3.1 Households Reported Possessing Assets by
Social Group and Type of Asset

(Percentage)

Description of Asset	Social Group			All
	ST	BC	OC	
Irrigated land	20.93	32.00	25.30	43.48
Un irrigated land	45.24	40.00	47.56	60.47
Livestock	42.86	40.00	41.67	53.33
working radio	23.26	40.00	25.00	31.11
working bicycle	34.88	48.00	45.24	55.56
Working TV	18.60	52.00	39.29	71.74
Working Motorbike/Scooter	0.00	20.00	7.14	47.83
Working fan	46.51	75.00	58.33	89.13

Table 3.2 Households Accessing the Existing CPRs bySocial Group

Common Property	Social Group			All
Resources (CPRs)	ST	BC	OC	
Endowment land	26.19	68	47.62	65.22
Waste land	88.1	92	85.71	93.48
Tanks	92.86	96	89.29	93.48
Forest/hills	31.71	92	51.19	63.04
Grazing land	54.76	80	70.24	76.09
Tamarind tress	16.67	92	50	54.35

Table: 3.3 Distribution of Credit Among Different Social Groups by Purpose of Credit

(In	Rupees)

Source and		S	Social Group		
purpose of credit		SC	ST	BC	OC
Formal Institutions					
Consumption	Expected	10000			
I I I I	Received	10000			
Agriculture	Expected	10337	11850	9436	23333
	Received	8670	10600	7800	22083
Livestock	Expected			13667	
	Received			13667	
Non-farm	Expected	20000		5500	30000
	Received	10000		5500	30000
House	Expected		5000	30000	105000
	Received	0000	5000	15000	105000
Marriage	Expected	8000	30000		
II 14h	Received	8000	30000	50000	
Health	Expected			50000	
SHGs	Received			50000	
Consumption	Expected	1813		1900	
Consumption	Received	1375		1600	
Education	Expected	3111		3000	4500
Education	Received	2778		2375	4000
Agriculture	Expected	2714		3857	5000
	Received	2286		3714	5000
Livestock	Expected	6167	3500	3750	4000
	Received	5167	2000	2000	3000
Non-farm	Expected		3500	6667	4000
	Received		3500	4667	2000
House	Expected		4000		
	Received		4000		
Health	Expected	3167	4000	3667	4000
	Received	2833	2000	3056	4000
Informal Institutions				60.00	
Consumption	Expected	3833		6000	27500
Education	Received	3333		4722	27500
Education	Expected	25000		30000	200000
A ani avaltarena	Received	20000		10500	200000
Agriculture	Expected Received	7290 6861		15702 13802	12667 12000
Livestock	Expected	0801		15602	5000
LIVESTOCK	Received				5000
Non-farm	Expected	5000		40000	30000
1,011 101111	Received	5000		40000	20000
House	Expected	2000		10000	50000
	Received			10000	50000
Marriage	Expected	11000		17400	135000
	Received	11000		16600	93333
Health	Expected	15091	5000	7324	5167
	Received	13818	5000	7253	5167

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CESS Monograph - 4	4
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Average	(Rupees per annun	00
[able 3.4 Source of Income and Type of Employment and by Social Group Averag		BC
le and Type of Employn		ST
3.4 Source of Incom		SC
Table		

Sector		SC			ST			BC			OC	
	Self emp	Wage emp	Total									
Agriculture	20282	21706	20984	21426	26036	23680	48825	40925	44875	96948	69875	84056
Forestry/ fisheries				5500	9940	7720						
Livestock	4250	5000	4500	7286	4933	6200	26387	18331	22646	21800	16500	19813
Artisan	41500	20750	31125				34213	24862	29871			
Industry				18000	72000	45000	44920	57000	50960	00006	138000	114000
Trade/transport				72000	36000	54000	79333	35500	61800	152500	103375	127938
Construction	14909	33300	23667				20286	45778	34625	20667	74000	47333
Others	30400	47040	38720	44125	69857	56133	29538	31932	30763	104825	123446	114718
Average	23044	30560	26721	22540	29740	26016	41096	36179	38666	96101	88402	92341
	1											

Note: Self emp=Self Employment; Wage emp=Wage employment

					(Rupees pe	er annum)
			Type of l	Household		
Sector		Male heade	d	Fe	male heade	d
	Self emp	Wage emp	Total	Self emp	Wage emp	Total
Agriculture	56034	45145	50678	13933	17927	15892
Forest/fisheries	5950	11500	8725	3700	3700	3700
Livestock	20137	14136	17443	10300	11400	10667
Artisan	38747	26708	33157	24500	14750	19625
Industry	59343	87343	73343	7200	21600	14400
Trade/transport	111400	77957	95793			
Construction	18000	52412	35727	16000	15200	15600
Others	48581	70281	59336	56000	24987	37392
Average	50189	50084	50138	20037	18355	19187

Table : 3.4a	Source of	Income and Type of Employment by Gender of Head
		of the Household

Note: Self emp=Self Employment; Wage emp=Wage employment

Table: 3.5 Distribution of Households Migrated in the last 12 months by
Social Group

Migration status (last 12 m	onths)	Social Group				
		SC	ST	BC	OC	
Migrated	%	21 50	4 22.22	21 27.27	6 14.63	
Not Migrated		21	14	56	35	
	%	50	77.78	72.73	85.37	
TOTAL		42	18	77	41	
	%	100	100	100	100	

Pattern of Migration	Social Group			
	SC	ST	BC	OC
Alone	8	1	7	2
%	38.1	50	38.89	40
Along with family including children	4		7	2
%	19.05		38.89	40
Along with family excluding children	9	1	4	1
%	42.86	50	22.22	20
TOTAL	21	2	18	5
%	100	100	100	100

 Table 3.6 Households Migrated by Pattern of Migration and Social Group

Table: 3.7	Households Ex	perienced Distress	Events b	v Social Group
Iunici on	nousenoius LA	perference Distress	Litenes o	y bottur Group

			(1	Percentage)
Distress Events		Social	Group	
	SC	ST	BC	OC
Drought	65.12	92	75	88.89
Cyclone/Floods/Hailstorms	0	0	0	2.63
Pest attack	2.5	0	2.47	7.89
Bad seed quality	2.5	0	1.25	7.89
Livestock epidemic	2.5	12	5	10.53
Human epidemic	0	4.17	2.5	2.63
Fire accident	0	0	1.25	0
Robbery/Violence	0	0	2.5	0
Death of the head of the HH	0	0	5	0
Death of the family members	10	0	2.5	5.26
Sudden heath problems	35	8.7	20.51	21.05
Others	33.33	0	0	0

Coping Mechanism		Social Gr	oup	
	SC	ST	BC	OC
Mortgage assets	1	2	4	7
%	2.04	7.14	4.3	12.28
Sell assets	3	5	3	
%	10.71	5.38	5.26	
Use savings	1	3	8	5
%	2.04	10.71	8.6	8.77
Withdraw children from school and sent	1			
%	2.04			
Migration	10	2	12	1
%	20.41	7.14	12.9	1.75
Seek bonded/ attached labour	2		2	
%	4.08		2.15	
Formal borrowing	9	5	16	6
%	18.37	17.86	17.2	10.53
Informal borrowing	12	3	27	12
%	24.49	10.71	29.03	21.05
Reduce consumption	7	1	6	8
%	14.29	3.57	6.45	14.04
Wage employment	5	4	4	6
%	10.2	14.29	4.3	10.53
Other	1	5	9	9
%	2.04	17.86	9.68	15.79
TOTAL	49	28	93	57
%	100	100	100	100

Table: 3.8 Households Reported Methods of Coping Distress EventsBy Social Group

Type of Employ- ment	% of households reporting major illness of adults	% of households reporting undergone the treatment	Treatment received in public hospitals (%)	Working Days Lost	Medical Expen- diture (Rs)	Other Expen- diture (Rs)
SEAG	84.85	100.00	38.18	60.62	4513	2331
SENAG	82.61	100.00	21.05	59.00	7807	2716
WEAG	96.15	98.00	64.00	80.33	2364	704
WENAG	81.36	100.00	35.42	65.48	3618	933
Total	86.50	99.42	43.02	67.38	4045	1557

Table: 3.9	Major Illnesses of Adults Among Households
	by Type of Employment

Note: SEAG=self employed in agriculture; SENAG=Self employed in non-agriculture; WEAG=wage employed in agriculture; WENAG=Wage employed in non-agriculture.

Table: 3.10	Households Reporting First Point of Contact of Hospital
	by Occupation

by Occupation						
Type of Occupation	Public Hospitals	Private Hospitals	Total			
SEAG SENAG WEAG WENAG Total	40.00 47.83 78.85 48.28 53.54	60.00 52.17 21.15 51.72 46.46	100 100 100 100 100			

Note: SEAG=self employed in agriculture; SENAG=Self employed in non-agriculture; WEAG=wage employed in agriculture; WENAG=Wage employed in non-agriculture.

Place of delivery/ By head of household	Male headed	Female headed	All
	Mahaboobnagar		
Public	12	2	14
%	20	20	20
Private	12	3	15
%	20	30	21.43
Home (trained attendent)	5	0	5
%	8.33	0	7.14
Home (untrained attendent)	31	5	36
%	51.67	50	51.43
Total	60	10	70
%	100	100	100
	Chittoor	-	
Public	22	0	22
%	30.99	0	28.95
Private	12	1	13
%	16.9	20	17.11
Home(trained)	6	1	7
%	8.45	20	9.21
Home (untrained)	31	3	34
%	43.66	60	44.74
Total	71	5	76
%	100	100	100

Table: 3.11Households Reporting Place of Delivery by the Gender of the
Head of the Household and by District

Economic Category						
		Tubectomy	Vasectomy	Temporary	None	– Total
POP		27	1	5	16	49
	%	55.1	2.04	10.2	32.65	100
POOR		31	1	2	16	50
	%	62	2	4	32	100
NSP		11	3	0	4	18
	%	61.11	16.67	0	22.22	100
NP		13	1	0	4	18
	%	72.22	5.56	0	22.22	100
Total		82	6	7	40	135
	%	60.74	4.44	5.19	29.63	100

Table: 3.11a Households Reporting Practice of Contraception by DifferentMethods and by Economic Category

Table: 3.11bHouseholds Reporting on Who takes Decision on
Contraception by Economic Category

Economic Category	Decisio	Total		
	Self	Partner	Joint	
POP	6	1	24	31
%	19.35	3.23	77.42	100
POOR	6	0	23	29
%	20.69	0	79.31	100
NSP	5	0	7	12
%	41.67	0	58.33	100
NP	2	0	11	13
%	15.38	0	84.62	100
Total	19	1	65	85
%	22.35	1.18	76.47	100

Decision on contraception		Social Group						
		SC	ST	BC	OC	All		
	Mahaboobnagar							
Self		1	0	1	1	3		
	%	7.14	0	4.35	14.29	6.67		
Joint		13	1	22	6	42		
	%	92.86	100	95.65	85.71	93.33		
Total		14	1	23	7	45		
	%	100	100	100	100	100		
	Chittoor							
Self		2	3	6	8	19		
	%	100	20	28.57	61.54	37.25		
Partner		0	1	0	1	2		
	%	0	6.67	0	7.69	3.92		
Joint		0	11	15	4	30		
	%	0	73.33	71.43	30.77	58.82		
Total		2	15	21	13	51		
	%	100	100	100	100	100		

Table: 3.11cHouseholds Reporting on Who takes Decision on
Contraception by Social Group and by District

Table: 3.12 Distribution of Children Died by Gender of Children and by
Economic Category of Households

Economic Category		Child mo	A 11	
		Male	Female	All
POP		9	6	15
	%	60	40	100
POOR		2	4	6
	%	33.33	66.67	100
NSP		1	2	3
	%	33.33	66.67	100
NP		1	2	3
	%	33.33	66.67	100
Total		13	14	27
	%	48.15	51.85	100

Gender of	Social Group					
Children Died	SC	ST	ST BC OC		All	
Male	5	1	2	0	8	
%	41.67	100	33.33	0	40	
Female	7	0	4	1	12	
%	58.33	0	66.67	100	60	
Total	12	1	6	1	20	
%	100	100	100	100	100	
Gender of	Social Group					
Children Died	ST	BC		OC	All	
	Chitt	oor				
Male	1		3	1	5	
%	100		75	50	71.43	
Female	0		1	1	2	
%	0		25	50	28.57	
Total	1		4	2	7	
%	100		100	100	100	

Table: 3.12aDistribution of Children Died by Gender and by
Social Group in the Districts

Type of school		Social	Group		
	SC	ST	BC	OC	All
		All Dist	ricts	•	
Public	51	31	86	29	197
%	68.92	96.88	69.92	60.42	71.12
Private	9	1	24	16	50
%	12.16	3.13	19.51	33.33	18.05
Not enrolled	14	0	13	3	30
%	18.92	0	10.57	6.25	10.83
Total	74	32	123	48	277
%	100	100	100	100	100
	Ma	ahaboobnaga	ar District	•	
Public	45	1	46	14	106
%	66.18	100	62.16	60.87	63.86
Private	9	0	15	6	30
%	13.24	0	20.27	26.09	18.07
Not enrolled	14	0	13	3	30
%	20.59	0	17.57	13.04	18.07
Total	68	1	74	23	166
%	100	100	100	100	100
	•	Chittoor D	istrict	•	•
Public	6	30	40	15	91
%	100	96.77	81.63	60	81.98
Private	0	1	9	10	20
%	0	3.23	18.37	40	18.02
Total	6	31	49	25	111
%	100	100	100	100	100

Table: 3.13 Distribution of Children Enrolled by Type of school and
by Social Group in the Districts

Type of school	Category of	Category of Household		
	Male headed	Female headed	1	
	Mahaboobnagar Distr	ict	•	
Public	101	5	106	
C,	67.79	29.41	63.86	
Private	29	1	30	
C,	% 19.46	5.88	18.07	
Not enrolled	19	11	30	
C,	% 12.75	64.71	18.07	
Total	149	17	166	
Ç	% 100	100	100	
	Chittoor District		•	
Public	84	9	93	
C,	% 80	100	81.58	
Private	21	0	21	
C,	% 20	0	18.42	
Total	105	9	114	
C,	% 100	100	100	

Table: 3.13a Distribution of Children Enrolled by Type of School and
Gender of the Head of Household and by Districts

Table: 3.14 Distribution of Children Dropped out by Class at which she/hedropped out and by Economic Category of Households

Class	РОР	POOR	NSP	NP	All
1	1	1	0	0	2
%	10	25	0	0	10.53
5	4	0	0	0	4
%	40	0	0	0	21.05
7	2	2	1	1	6
%	20	50	50	33.33	31.58
8	2	0	0	1	3
%	20	0	0	33.33	15.79
9	1	0	0	0	1
%	10	0	0	0	5.26
10	0	1	1	1	3
%	0	25	50	33.33	15.79
Total	10	4	2	3	19
%	100	100	100	100	100

			Social Group		
Cla	ss	ST	BC	OC	All
	•	Mahabo	obnagar Distric	rt	
1		0	1	0	1
	%	0	25	0	8.33
5		2	2	0	4
	%	33.33	50	0	33.33
7		2	0	2	4
	%	33.33	0	100	33.33
8		1	0	0	1
	%	16.67	0	0	8.33
9		1	0	0	1
	%	16.67	0	0	8.33
10		0	1	0	1
	%	0	25	0	8.33
Total		6	4	2	12
	%	100	100	100	100
		Ch	nittoor District		
1		0	1	0	1
	%	0	50	0	14.29
7		0	1	1	2
	%	0	50	25	28.57
8		1	0	1	2
	%	100	0	25	28.57
10		0	0	2	2
	%	0	0	50	28.57
Total		1	2	4	7
	%	100	100	100	100

Table: 3.14a Distribution of Children Dropped out by Class at which she/heDropped Out and by Social Group and by Districts

Dro	pout	Category o	Category of Household		
		Male headed	Female headed	All	
1	%	1 16.67	0	1 14.29	
7	%	33.33	0 0	28.57	
8	%	1 16.67 2	1 100 0	28.57	
Total	%	33.33 6	0 1	28.57 7	
	%	100	100	100	

Table: 3.14b Distribution of Children at which Class she/he Dropped out by	y
Gender of the Head of Household in Chittoor District	

Table: 3.15	Distribution of Ownership of Houses by
Eco	nomic Category of Households

Economic	Category	r	Type of House		
		Owned	Rented	Other	
POP		54	6	8	68
	%	79.41	8.82	11.76	100
POOR		55	4	2	61
	%	90.16	6.56	3.28	100
NSP		24	1	0	25
	%	96	4	0	100
NP		23	1	0	24
	%	95.83	4.17	0	100
Total		156	12	10	178
	%	87.64	6.74	5.62	100

Economic	Economic Category		Type ownership		
		Kucha	Semi Pucca	Pucca	
POP		23	43	4	70
	%	32.86	61.43	5.71	100
POOR		17	28	18	63
	%	26.98	44.44	28.57	100
NSP		3	15	7	25
	%	12	60	28	100
NP		3	11	10	24
	%	12.5	45.83	41.67	100
Total		46	97	39	182
	%	25.27	53.3	21.43	100

Table: 3.15a Distribution of Houses According to Type of Houses and
Economic Category of Households

Table: 3.15bDistribution of Electric Connections by Type and
Economic Category of Households

Economic C	ategory	Yes	No	Unofficial	All
РОР		38	17	12	67
	%	56.72	25.37	17.91	100
POOR		44	8	9	61
	%	72.13	13.11	14.75	100
NSP		22	2	1	25
	%	88	8	4	100
NP		22	1	1	24
	%	91.67	4.17	4.17	100
Total		126	28	23	177
	%	71.19	15.82	12.99	100

Economic	Category	Covered	Open	None	Total
POP		10	16	41	67
	%	14.93	23.88	61.19	100
POOR		6	15	42	63
	%	9.52	23.81	66.67	100
NSP		7	6	11	24
	%	29.17	25	45.83	100
NP		11	3	10	24
	%	45.83	12.5	41.67	100
Total		34	40	104	178
	%	19.1	22.47	58.43	100

 Table: 3.15c
 Distribution of Drainage Facilities by Economic Category of Households

Table: 3.15dDistribution of Type of Drinking Water Reported By
Economic Category of Households

Economic	Category	Safe	Unsafe	Total
POP		55	14	69
	%	79.71	20.29	100
POOR		50	13	63
	%	79.37	20.63	100
NSP		18	6	24
	%	75	25	100
NP		22	2	24
	%	91.67	8.33	100
Total		145	35	180
	%	80.56	19.44	100

Economic Category		Home	<1 KM	1-3 KM	Total
POP		11	57	1	69
	%	15.94	82.61	1.45	100
POOR		27	36	0	63
	%	42.86	57.14	0	100
NSP		10	14	0	24
	%	41.67	58.33	0	100
NP		10	14	0	24
	%	41.67	58.33	0	100
Total		58	121	1	180
	%	32.22	67.22	0.56	100

Table: 3.15eDistribution of Households who reported Distance to Drinking
Water Facilities by Economic Category

Table: 3.16	Awareness of Meetings of Various Village Level Institutions					
by Economic Category						

a. Panchayat

Economic Category		Always	Mostly	Rarely/Never	All
РОР	~	13	9	47	69
	%	18.84	13.04	68.12	100
POOR		10	13	38	61
	%	16.39	21.31	62.3	100
NSP		8	5	12	25
	%	32	20	48	100
NP		10	5	9	24
	%	41.67	20.83	37.5	100
Total		41	32	106	179
	%	22.91	17.88	59.22	100

b. V	Water	Users	Association	(WUA)
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Economic Category		Always	Mostly	Rarely/Never	All
POP	3	2	1	65	68
POOR	%	2.94	1.47	95.59 52	$\begin{array}{c}100\\62\end{array}$
FOOK	%	3.23	12.9	83.87	100
NSP	, -	3	5	17	25
	%	12	20	68	100
NP	~	4	3	17	24
	%	16.67	12.5	70.83	100
Total	%	11 6.15	17 9.5	151 84.36	179 100

Economic Category		Always	Always Mostly		All	
POP		7	3	58	68	
	%	10.29	4.41	85.29	100	
POOR		9	9	44	62	
	%	14.52	14.52	70.97	100	
NSP		4	3	18	25	
	%	16	12	72	100	
NP		5	3	15	23	
	%	21.74	13.04	65.22	100	
Total		25	18	135	178	
	%	14.04	10.11	75.84	100	

c.	Village	Education	Committee	(VEC)	
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Table: 3.17 Participation of Households in Grama Panchayat Meetings by
Economic Category and Type of Attendance

Economic	Participation					
Category	Always	Mostly	Rarely	Never	NA	Total
POP %	5 15.15	3 9.09	13 39.39	11 33.33	1 3.03	33 100
POOR	6	7	9	8	1	31
%	19.35	22.58	29.03	25.81	3.23	100
NSP	5	2	7	4	0	18
%	27.78	11.11	38.89	22.22	0	100
NP	6	3	4	3	0	16
%	37.5	18.75	25	18.75	0	100
Total	22	15	33	26	2	98
%	22.45	15.31	33.67	26.53	2.04	100

Table 3.18	Respondents Pa	articipating in	Elections by	Economic
	Category and by	y Type of Part	icipation	

Economic	Participation					
Category	Always	Mostly	Rarely	Never	NA	All
POP	37	2	7	6	4	56
%	66.07	3.57	12.5	10.71	7.14	100
POOR	30	5	2	9	4	50
%	60	10	4	18	8	100
NSP	19	0	3	0	0	22
%	86.36	0	13.64	0	0	100
NP	16	2	0	4	0	22
%	72.73	9.09	0	18.18	0	100
Total	102	9	12	19	8	150
%	68	6	8	12.67	5.33	100

a.	Gram	Panchayat	Meetings
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b. Mandal Praja Parishad Meetings

Economic	Participation					
Category	Always	Mostly	Rarely	Never	NA	All
РОР	37	0	6	11	3	57
%	64.91	0	10.53	19.3	5.26	100
POOR	30	4	1	12	3	50
%	60	8	2	24	6	100
NSP	16	1	1	5	0	23
%	69.57	4.35	4.35	21.74	0	100
NP	17	1	1	4	0	23
%	73.91	4.35	4.35	17.39	0	100
Total	100	6	9	32	6	153
%	65.36	3.92	5.88	20.92	3.92	100

c.	Zilla	Parishad	Meetings
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Economic						
Category	Always	Mostly	Rarely	Never	NA	All
POP	36	1	7	10	2	56
%	64.29	1.79	12.5	17.86	3.57	100
POOR	29	5	3	8	5	50
%	58	10	6	16	10	100
NSP	16	1	0	6	0	23
%	69.57	4.35	0	26.09	0	100
NP	16	3	0	4	0	23
%	69.57	13.04	0	17.39	0	100
Total	97	10	10	28	7	152
%	63.82	6.58	6.58	18.42	4.61	100

d. MLA Meetings

Economic		Participation						
Category	Always	Mostly	Rarely	Never	NA	All		
POP	36	3	6	9	3	57		
%	63.16	5.26	10.53	15.79	5.26	100		
POOR	29	5	2	10	5	51		
%	56.86	9.8	3.92	19.61	9.8	100		
NSP	17	2	0	4	0	23		
%	73.91	8.7	0	17.39	0	100		
NP	15	3	1	4	0	23		
%	65.22	13.04	4.35	17.39	0	100		
Total	97	13	9	27	8	154		
%	62.99	8.44	5.84	17.53	5.19	100		

e. M P Meetings

Economic						
Category	Always	Mostly	Rarely	Never	NA	All
РОР	36	2	7	8	3	56
%	64.29	3.57	12.5	14.29	5.36	100
POOR	29	4	2	11	4	50
%	58	8	4	22	8	100
NSP	15	2	0	4	1	22
%	68.18	9.09	0	18.18	4.55	100
NP	15	2	2	4	0	23
%	65.22	8.7	8.7	17.39	0	100
Total	95	10	11	27	8	151
%	62.91	6.62	7.28	17.88	5.3	100

f. Meetings of Water Users Association

Economic		Participation						
Category	Always	Mostly	Rarely	Never	NA	All		
РОР	0	2	6	3	2	13		
%	0	15.38	46.15	23.08	15.38	100		
POOR	2	3	3	5	4	17		
%	11.76	17.65	17.65	29.41	23.53	100		
NSP	4	3	3	0	1	11		
%	36.36	27.27	27.27	0	9.09	100		
NP	3	0	0	3	1	7		
%	42.86	0	0	42.86	14.29	100		
Total	9	8	12	11	8	48		
%	18.75	16.67	25	22.92	16.67	100		

Economic						
Category	Always	Mostly	Rarely	Never	NA	All
РОР	4	3	9	6	1	23
%	17.39	13.04	39.13	26.09	4.35	100
POOR	7	3	4	6	3	23
%	30.43	13.04	17.39	26.09	13.04	100
NSP	3	2	2	3	2	12
%	25	16.67	16.67	25	16.67	100
NP	4	1	1	2	0	8
%	50	12.5	12.5	25	0	100
Total	18	9	16	17	6	66
%	27.27	13.64	24.24	25.76	9.09	100

g. Meetings of Village Education Committees

Table: 3.19 Households Reporting on Worthiness of Attending the Meetings by Economic Category

a. Panchayat Meetings

Economic Category			All		
		Yes	No	Don't know	
РОР		11	6	16	33
	%	33.33	18.18	48.48	100
POOR		11	6	15	32
	%	34.38	18.75	46.88	100
NSP		7	2	9	18
	%	38.89	11.11	50	100
NP		10	2	5	17
	%	58.82	11.76	29.41	100
Total		39	16	45	100
	%	39	16	45	100

Economic Category		All		
	Yes	No	Don't know	
POP	4	3	5	12
%	33.33	25	41.67	100
POOR	4	4	9	17
%	23.53	23.53	52.94	100
NSP	8	0	3	11
%	72.73	0	27.27	100
NP	4	1	2	7
%	57.14	14.29	28.57	100
Total	20	8	19	47
%	42.55	17.02	40.43	100

b. Meetings of Water Users Association

c. Meetings of Village Education Committee

Economic Ca	ntegory		All		
		Yes	No	Don't know	
РОР		9	3	11	23
	%	39.13	13.04	47.83	100
POOR		10	2	11	23
	%	43.48	8.7	47.83	100
NSP		5	0	7	12
	%	41.67	0	58.33	100
NP		5	1	2	8
	%	62.5	12.5	25	100
Total		29	6	31	66
	%	43.94	9.09	46.97	100

Table: 3. 20Households Reporting That They Have Raised Issues In The
Meetings By Economic Category

a. Panchayat Meetings

Economic C	Category		Raise any issue				
		Once	Few times	No			
POP		6	8	19	33		
	%	18.18	24.24	57.58	100		
POOR		7	5	19	31		
	%	22.58	16.13	61.29	100		
NSP		7	3	8	18		
	%	38.89	16.67	44.44	100		
NP		5	6	6	17		
	%	29.41	35.29	35.29	100		
Total		25	22	52	99		
	%	25.25	22.22	52.53	100		

b. Water Users Association Meetings

Economic Category			All		
		Yes	No	Don't know	
POP		2	4	6	12
	%	16.67	33.33	50	100
POOR		2	4	10	16
	%	12.5	25	62.5	100
NSP		8	3	0	11
	%	72.73	27.27	0	100
NP		3	2	2	7
	%	42.86	28.57	28.57	100
Total		15	13	18	46
	%	32.61	28.26	39.13	100

Economic Cat	egory		All		
		Yes	No	Don't know	
POP		4	4	15	23
	%	17.39	17.39	65.22	100
POOR		6	5	11	22
	%	27.27	22.73	50	100
NSP		3	2	7	12
	%	25	16.67	58.33	100
NP		4	2	2	8
	%	50	25	25	100
Total		17	13	35	65
	%	26.15	20	53.85	100

c. V illage Education Committee Meeting	5
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Table: 3.21 Participation in Meetings Held In VillageBy Economic Category

Economic Category		Attendanded		All
		Yes	No	
POP		33	35	68
	%	48.53	51.47	100
POOR		32	28	60
	%	53.33	46.67	100
NSP		21	3	24
	%	87.5	12.5	100
NP		17	6	23
	%	73.91	26.09	100
Total		103	72	175
	%	58.86	41.14	100

a.]	Panchayat	Meetings
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Economic Cate	gory	Attendanded		All
		Yes	No	
РОР		29	37	66
	%	43.94	56.06	100
POOR		23	35	58
	%	39.66	60.34	100
NSP		21	3	24
	%	87.5	12.5	100
NP		14	6	20
	%	70	30	100
Total		87	81	168
	%	51.79	48.21	100

b. Water Users Association Meetings

c. Village Education Committee Meetings

Economic Category		Attendanded		All	
		Yes	No		
POP		32	34	66	
	%	48.48	51.52	100	
POOR		21	33	54	
	%	38.89	61.11	100	
NSP		19	4	23	
	%	82.61	17.39	100	
NP		17	4	21	
	%	80.95	19.05	100	
Total		89	75	164	
	%	54.27	45.73	100	

SI No	Description of Item	Male headed	Female headed	Total
1	Suffer Personal Insecurity (Yes)	6.06	5.88	6.03
1a	If yes Reported to Govt. Official	28.57	0	22.22
1b	Any Action Taken (Yes)	50	0	33.33
1c	Discrimination by officials (Yes)	14.12	17.65	14.71
1d	Reported to Local Leaders (Yes)	10.11	26.32	12.96
1e	Local Leaders Came to rescue (Yes)	40	75	50
1d	Discrimination by Local Leaders (Yes)	17.65	6.25	15.84
2	Govt. conducting educational progs for non-violence (Yes)	13.1	11.11	12.79
3	Honour and reputation threatened (Yes)	6.88	2.94	6.19
3a	If yes reported to Govt. officials (Yes)	42.11	50	42.86
3b	Action taken (Yes)	63.64	0	53.85
3c	Reported this to local leaders	12.66	12.5	12.63
3d	If yes local leaders came to your rescue	38.89	16.67	33.33
4	Social discrimination (Yes)	15.58	6.25	13.98
4a	Reported to authorities (Yes)	25	0	20.59
4b	Govt. Conducting Spl. Progs in this regard (Yes)	11.94	6.9	11.04
5	Suffer abuse by Govt. officials/private individuals (Yes)	3.75	3.23	3.66
5a	Approached Court (Yes)	9.09	0	6.67
6	Aware of free legal service (Yes)	8.86	0	7.37
7	Ever utilised it (Yes)	5	0	4.55
8	There is no discrimination in free legal services (Yes)	4.4	2.94	4.15
9	There is no discrimination in services of courts (Yes)	3.03	2.94	3.02

Table 3.22 Personal Insecurity Reported by Type of Household and by
Source of Insecurity: All Districts

CHAPTER IV

Human Deprivation and Role of Extra household Factors

Introduction

As mentioned in the preceding chapter, extra household factors also determine human deprivation. The basic assumption underlying this preposition is that the human deprivation of a social group should not be analysed in isolation but in relation to other social groups. Moreover, state policies in certain contexts may also contribute to human deprivation and thereby to a violation of human rights. This chapter is thus an attempt to identify the extra household factors as well as state policies that contribute to human deprivation and how their influence varies across social groups.

Methodology

Case study methodology has been used in this analysis. Eight case studies have been purposively selected to examine the influences of different extra household factors on social groups in regard to human deprivation.

Analysis

Case study 1 has been selected to explain the impact of structural factors on human deprivation of the most vulnerable section of the society, viz., Scheduled Castes. The village selected is one in which land distribution among different social groups is highly skewed. All the land is owned by OCs and BCs, and the SCs, by and large, do not own any land. The OCs represent one of the dominant castes of Mahaboobnagar district. Fifteen years ago the SCs used to work as annual farm servants to the OCs. They have now started gradually to break away from the landlords as they have started to migrate for work to other places. But, they continue to work as agricultural labour for the OCs and they also depend on the lands of OCs for grazing whatever livestock they have. Thus the dependence of SCs on OCs still continues, though it has decreased over time. Because of their better economic status the OCs and BCs are able to go to private institutions for education and health services, whereas the SCs depend on public institutions, though the quality of service is poor. Any direct complaint by the SCs on the functioning of these institutions is ignored by the frontline service providers. The complaints are taken seriously by the authorities only if they are channelled through the OCs. But the OCs themselves do not take the complaints made by the SCs seriously and moreover the SCs themselves are hesitant to voice their complaints against the functioning of public institutions.

The SCs were beaten by the OCs when they questioned the malpractices of ration shopkeepers, who are the frontline service provider of the PDS. The fact that these shops owners belong to OCs assumes significance in this context. Sexual violence on SC women by the OCs also reflects the clear-cut negative manifestations of the inequitable agrarian structure. The misappropriation of the infrastructure and space of the health sub-centre, the diversion of the amount sanctioned by the government by the Sarpanch of grama panchayat who is also from OCs, the exclusion of the SCs from getting employment from the works undertaken by Grama Panchayat with the SGRY funds, and the domination of OCs in the village development committee, all provide substantial evidence to the extent to which the inequitable agrarian structure erodes state initiatives and public institutions, resulting in the denial of the human rights of SCs. Besides this, the SCs constitute a very low percentage of the population in this village. They have been organized into a SHG under the new anti-poverty programme namely DPIP. The social mobilisation and organisation of SCs require a critical mass (adequate number of SCs) to harness their potential effectively to reduce human deprivation, which is not the case in this village. These SC households should be integrated with the other SCs in the neighboring villages to ensure the critical minimum numbers required to derive positive outcomes from social mobilisation and organisation of poor SCs.

Ensuring the effective functioning of organisations of poor SCs at the village level in the hostile social environment which is an offshoot of the inequitable agrarian structure poses a challenge to policy makers who are meant to make efforts to reduce the human deprivation of SCs.

Case Study- 1 Koppunuru- Village with High Skewed land distribution Mahaboobnagar District

When the Krishna river submerged this village in 1982, the people of Koppunuru shifted to higher areas and constructed their houses. The village has 840 householdss with a multi caste population of SC, BC and OC. The OCs are the dominant caste in the village owning nearly all the land. The SCs own very little land. A few years earlier, SCs used to work as annual farm servants with OCs, but now they have started to migrate to other places for work. However, their dependence on the OCs continues as they are mainly agricultural labourers.

In regard to health facilities in the village, the PHC is located about 20 KM away, but since a private hospital is located nearby the rich as well as the poor go to this private hospital. A sub-centre with all the required infrastructure

has been constructed in the village, but the OCs have taken the entire infrastructure and the building was given to start a private school. Two PDS shops are functioning in the village, but the rations are given out only on two days, and cheating on weights is a regular practice by the PDS dealers who belong to the OCs. When the SCs and BCs questioned on these malpractices, they were scolded and SCs were beaten up. This indicates that poor are denied quality of the public services. Further, the village has two primary schools, one high school and a private convent. The BCs and SCs are not able even to raise questions about absenteeism among the teachers, and the complaint is taken seriously only if it is made by the OCs. Funds of the village development committee are utilized only by the OCs for their personal benefit.

Under SGRY, a road was sanctioned in the village, but that work was taken up by three OC contractors without employing the local village labour. By this, SCs were denied the opportunity to gain income through these works. To solve the problem of water scarcity in the village, the government had sanctioned Rs. 8 lakhs under 'Swajaladhara Scheme' and a bore well was dug. The Sarpanch deliberately delayed the installation of an electric motor and continued to supply purchased water through tankers in order to make a profit, and is diverting the funds sanctioned under `swajaladhara' scheme for this.

Sexual violence against the SCs is reported in the village. A 15 year old SC girl was raped by a 50 year old PDS dealer of OC and though a case was registered against him at the instance of the SCs, no action was taken. However in recent times, youth have organized themselves to resist this kind of injustice. On all matters, the voices of the BCs and SCs are not given serious consideration due to the domination of OCs in the village.

Case study 2 is intended to capture the contribution of the institutions of the poor in reducing human deprivation. In the village selected vestiges of the manifestations of an inequitable agrarian structure and social discrimination based on caste still continue though the agrarian structure in the village has become less unequal over time. The social mobilisation of the poor and organizing them into SHGs, and the federation of SHGs at the village level and sub-district level (mandal level) have created the required critical mass to initiate collective actions for reducing human deprivations in all spheres of human life including political and civil insecurity. The initiatives taken by these institutions have contributed to the decline of practices of social discrimination, increased access to government programmes, been conducive for the shift to cost-effective and environment friendly agricultural

practices. They have also improved the understanding of the poor on health, education, civic and political rights and enabled them to participate in democratic institutions by appropriate capacity building endeavours. The entire planning, implementation and monitoring of the sectoral and anti-poverty programmes of the government have been made more equitable, non-discriminatory, transparent, accountable and participatory by these institutions of the poor. This case study demonstrates that non-exploitative institutions of the poor consolidated into larger federations at various levels can positively arrest human deprivation and thereby ensure all human rights, even in an economically very backward area. This model of development can also be a solution even in the hostile environment created by an inequitable agrarian structure in rural society.

Case Study –2 Mushrifa- SAPAP Village, Mahaboobnagar District

Mushrifa is one of the backward villages in the district of Mahaboobnagar. In 1996 the South Asian Poverty Alleviation Programme was implemented in this village. Later the Velugu programme took over the existing Self Help Groups (SHGs) and additional new groups were also formed. At present 14 Self Help Groups are functioning and these are federated to the Village Organisation (VO) and Mandal Samakhya (MS) at the village and mandal levels respectively. These groups were formed in 1999 and 2000. Because of the implementation of these programmes, awareness has increased about various issues among the poor and they have been able to undertake collective action to address the concerns of human deprivations. Besides this, the village is headed by a woman Sarpanch.

OCs are the dominant caste in the village and a few years ago agricultural land in village was mainly concentrated among them. Over time they have been selling their land and SCs are also purchasing the land to a certain extent. At present almost every household in the village has land. Besides this, the government had distributed fallow land of 200 acres among SCs and BCs in 1986.

The village has two primary schools, one Urdu Medium school and a high school. These are working well but there is a shortage of teachers. Para teachers were employed since group members, ward members and parents had asked the Sarpanch to employ more teachers, but the local people have given a representation for permanent teacher posts. All the child labourers in the village have been re-enrolled in school. The poorest of the poor among SCs were given the responsibility of conducting the mid day meal programme. For public health facility the people go to the Mandal headquarters. However, the ANM visits the village regularly. Medicines are supplied by the PHC and are available at the panchayat office in case of emergency. This was at the request of the VO which had appointed a health worker and trained her to take charge in times of emergency. Besides this, through the VO, the health worker has identified three TB patients for whom treatment was arranged in the public hospital. All the group members have undergone a family planning operation.

In recent times, group members of the village have fought against deep rooted practices of untouchability i.e. the two glass system, and bar to temple entry and have complained about these to the collector and MLA, who took measures to stop such practices. The implementation of the social discrimination project by Velugu has also helped in reducing these practices to some extent.

Through the Mandal Samakhya, six pairs of plough bullocks were given to SCs. Members of the SHGs have received agricultural inputs and RCL rice through VO. In addition, SHGs were able to access assistance from NGOs like Catholic Relief Services (CRS) catering to the needs of lactating mothers and children. Bio-fertiliser and pesticides like vermi compost and neem powder were prepared and marketed through the VO which earned a profit of Rs.70,000 in 2002-2003. Further, the VO has been able to access the housing scheme under IAY for some of its members. Training was given to groups under SAPAP and also by Panchayat Raj department on the functioning of panchayats. Now, because of this awareness, some poor women from SHGs have become ward members of the gram panchayat. Liaison workers like Agricultural assistant, Livestock assistant, community health assistant, veterinary assistant and marketing assistant were appointed by the VO, to access related public institutions.

Case study 3 presents the experience of organizing a tribe (Yanadis) around landcentred programmes through co-operative institutions. The village selected is exclusively inhabited by a single community who, along with land, were provided irrigation borewells by the government to improve the productivity of land. In course of time some of the borewells went dry. But the households could not make any further investment for digging new borewells because they did not have adequate funds of their own and also due to lack of adequate ground water. As a result, even among this homogeneous community, class formation started to take place in the form of one group which had land with irrigation and was therefore better off, and

the others who had land but the irrigation facilities had failed. The latter often had to migrate in search of additional work since they could not cultivate their land for more than one season. Those with irrigation could stay back in the village as they were able to raise more than one crop due to the availability of water. The recent initiatives in the form of developing social forestry through horticulture could have acted as a buffer for the employment requirements of the people. But at present, the land available with the households is not adequate as most families have split into nuclear families over a period of time. The additional families also need to be accommodated with housing. The public educational facilities were adequate for catering to the needs of the people. But for health services the people have turned to private health institutions as the public facilities are not functioning to their satisfaction. The government schools available in the village provide education in Telugu medium. But some of the relatively more well-off families, especially those who have had exposure to modern trends, want their children to be educated in English and hence they are sending their children to private English medium schools. The awareness level of these people has been improved through constant and continuous nurturing for appropriate capacity building by an NGO. But the livelihood strategies have not diversified from agriculture. This is posing a threat to the sustainability of the experiment of organizing a tribal community around land. Moreover, the capabilities relating to livelihood strategies need to be built up among these people. Hence, efforts have to be made to take away people from land. Some households have reported that government officials feel that priority should be given to the poor who have not got benefits rather than extending further assistance to people who have already got benefits from the government. This indicates that the funds available for providing basic needs should be prioritised at the cutting edge level. But the tribals feel that they deserve more help from the government to avoid any deterioration in their economic status. This experiment adds to the dilemmas of development as to whether the state can safeguard the interests of the future generations of tribals through its interventions on a continuous basis or with the available information and through capacity building enhance their capabilities in the domain of livelihood strategies to improve themselves on their own.

Case study 4 captures the adjustment process which the another tribal community (Chenchus) went through when they were displaced from Nallamala forests due to the construction of a large irrigation project and were relocated in a semi-urban setting to meet their basic needs for leading a decent life. This presents an opportunity to enter the on-going debate on whether tribals should not be displaced from forestry as they cannot adjust to mainstream culture. This tribe had made a long journey over 20 years of exposure to mainstream society and has been integrated into this culture. But they are marginalised with respect to livelihood because they were not provided with land which was the base of their livelihood when they were in the forests. While the older generation has continued to depend on the forest resources

to earn their living, the younger generations have diversified into non-agriculture, basically petty business. However, they are able to access public institutions for their other basic needs.

Case Study 3 Village: Gopalakrishnapuram, Mandal: Puttur, District: Chittoor

The village is predominantly a tribal village, with two smaller tribal villages near it. The village has well laid C.C. roads, and it is also connected by BT road to the mandal headquarters. In 1972 the Government had started a Cooperative Farming Society jointly for all the three villages, out of which the residents of Gopalakrishnapuram were allotted 300 acres. This land has been provided with 27 community bore wells. But over a period of time all except 5 bores, have dried up and the owners do not have money to dig new bore wells on their own.

The government has sanctioned pucca houses to all the villagers but the present houses are not enough to accommodate the growing population. The congested housing conditions are creating an unhealthy physical environment. Nearly 150 households in this village possess neither land nor houses.

The community elders have asked for more land to be distributed to the landless families in the village. Because the bore wells have dried up and the continuous drought, as well as the pressure of population on land, many tribals have been forced to rely on seasonal migration, leaving the children in the care of older family members who stay behind. In the absence of older people, only the men migrate for work, leaving their wives and children at home. The incidence of seasonal migration is high during Rabi and summer seasons.

The village has one upper primary school in addition to one hostel for boys and a well-established Bridge School. Most of the children were spending time out of school during school hours. After noticing this, some villagers had asked the teachers to control the students properly. Later on, the teachers began to show more interest and disciplined the children during school hours and started to teach them more seriously. Only five elite tribal families (Sarpanch, Vice-sarpanch, and other 5 well- off families) from this village are able to send their children to a private convent school because they want their children educated in English rather than in Telugu medium.

Enrolment in the school has increased because of the mid-day meal school programme. Nearly 45 children from this village are being fed in the Anganwadi centre.

The PDS depot is situated in the neighboring village Thorrur and the people find it difficult to fetch their rice rations from such a distance. Though the village elders have given a representation for a depot within the village, this has not happened. Most of the BPL families do not have white ration cards and the ration cards were issued only in 1996. Last year, 53 new houses were sanctioned under IAY scheme. There are 13 beneficiaries of Annapurna and 15 of Antyodaya schemes in the village.

Since this village has been adopted by a local NGO, a lot of development has taken place due to the efforts of the NGO. The tribals have learnt about their rights because of the NGO. The increased levels of awareness have enabled the tribals to give representations about their needs to the concerned officials of the line departments. The villagers have been able to get land assigned to them by the government and they are simultaneously pressing for more land and housing for the landless and homeless families of the village.

Case study-4

Scheduled Tribes (Chenchu) of Pebbair, Mahaboobnagar District

The tribal inhabitants (Chenchus) of Pebbair migrated from Nallamala forests in 1986, when their village was submerged due to the construction of the Srisailam project. The government constructed pucca houses for them in Pebbair, which is the mandal headquarters and is a well-developed village with well-laid CC roads. There are only sixty ST households which account for 3% of the total households in the village. All the ST inhabitants are landless labourers and their primary occupation is non-farm self-employment. The older generation has continued to depend on forests, collecting medicinal herbs and leaves which are sold in the local shandies. The younger people are in petty business -selling waste bottles, plastic and steel utensils, ornamental items like hair pins, ribbons, hair bands, combs etc in the village shandies, because of which they frequently migrate to other areas along with their families for short periods. Men as well as women are involved in this activity. This clearly indicates the occupational shifts of these tribes after being integrated with the mainstream. Even though they were denied rights to land in forests and were resettled in a town, they have not depended on landlords or other castes for their livelihood. They have got themselves integrated into the mainstream through their own activities.

All the inhabitants of this colony have access to primary school, public hospital, PDS shop and drinking water facility located in the village. Because

of a shortage of teachers in the government school, a few are sending their children to English medium private schools, as they want their children to get quality education and escape from the poverty which they are now facing. A few children have also been sent to the ST hostel located in village Mannanur of Amrabad Mandal after they complete the fourth class. This indicates their awareness about the need for quality education and its necessity for economic advancement. The anganwadi centre is located in the village and all children have access to this. The mid-day meal programme is being implemented in the school and is available to all without any discrimination.

Everybody has access to the public health facility in the village all the time, which is also used for delivery of babies. There is no report of any major diseases and the majority of the eligible persons have undergone family planning operation. They are given preference even in the supply of rations under PDS. Whenever any problems have arisen in the supply of PDS goods they have brought this to the notice of the sarpanch of the village. By and large, all the tribal inhabitants have ration cards. They do not have a water problem as they have a continuous supply of drinking water.

Their dependence on traders for credit has become substantially reduced due to the functioning of three self-help groups in the village from which they are taking loans for pressing needs. These groups have got loans from the banks and this amount was also used by the group members to start petty businesses. Besides this, within the community a class of people has emerged in a position to provide credit to others. They have requested the government for SGSY loans to start kirana shops, to buy milch animals, and to start STD phone booths.

The location of this colony adjacent to the BC and OC colonies has influenced their culture and has helped them to integrate easily with the mainstream. A few families also own consumer durables like radio and television. They participate in elections by voting but they do not get elected as ward members because of their relatively small numbers. They have not been deprived of their basic human rights by being integrated into the urban environment as they have been able to use all the facilities. The only deprivation they have faced is loss of land, for which they have been giving representations to the government. The government has promised to give them land but till now no further steps have been taken in this direction.

Case study 5 is intended to highlight the impact of exposure to modernization (urban life styles) on human deprivation. The selected village represents a rural settlement which is close to a town where the people have diverted their resources to improve

human capital - education - for better livelihood strategies. The poor in this village are able to depend upon the nearby town to supplement their options of employment in addition to those available in the village. All the non-poor in this village have acquired higher education and got jobs in government service and some have even settled abroad. The externality of the higher level of human capital and more secure employment is that all the public institutions in the village are functioning well. As a result the poor have been able to access educational, health and other services very effectively.

Caste Study 5 Village: Tondavada, Mandal: Chandragiri, District: Chittoor

This multi-caste village is situated 6km from the temple town of Tirupati The OCs are the major caste group in the village, which also has BCs and SCs and STs. The majority of the residents are working in Tirumala Tirupati Devasthanams, S.V.University or in other government establishments.

The employed people tend to send their children to a nearby convent school in Chandragiri. Only ST students study in the lower classes in the village school. The village has an anganwadi center but it is being held in the panchayat building located in the areas where the OCs and BCs live. This poses a problem for the STs in sending their children to the anganwadi.

This village is well connected by road with private and public transport. The concentration of employed people in the village with different levels of educational background has helped the present generation to go in for higher studies, which in addition to rising aspirations has encouraged the educated youth to go to abroad for well-paid jobs. This in turn has helped the community to get an inflow of capital into the community in the form of donations. One of the young men from this village, who has migrated to the USA, has donated Rs 5 lakhs for the construction of a school building. This influenced the Collector to sanction an additional amount of 7 lakhs for the same purpose. With the help of the donation from the abroad, a pucca building is coming up for the High School.

In order to have individual domestic water connection every household has paid Rs 50/- but the SCs and STs were given water connections free of cost. The Panchayat has also appointed two persons two look after the drinking water supply. All the households are supposed to pay Rs 10/- to meet the salaries of hired employees.

In addition to a sub-centre the village has one resident Doctor who offers treatment at nominal charges. Since he is an employee of the RUYA government hospital in Tirupati town, he encourages his patients to make use of Government services for other advanced medical treatment. This help from a qualified Doctor and effective medical counseling helps the patients not to spend a lot of money on medical treatment. Generally, the residents rely on PHC services for their gynecological and obstetrics problems and family planning operations.

Case study 6 gives a picture of the impact of industrialization on the poor. This is a village where chemical industries are located and the pollution from the factories has particularly affected the livelihoods of the poor. The industrial units near the village close to their lands are providing employment to the village people particularly to the poor. But the pollution from this industry has contributed to deterioration in the ecology of the village and has affected the health status of all the local people particularly the poor. The poor have been forced to spend a considerable proportion of their income on medical care, which has become expensive for them as they have to depend on private health institutions because the public health institutions are not functioning effectively. The people are not able to protest against the industry since it is providing them with employment. On the other hand they cannot keep silent as their health has begun to suffer. Thus, the poor continue to be affected. This case study is an example of one of the main dilemmas of development as to whether industrialization can be the best solution to address the problems of poverty.

Case Study-6

Scheduled Castes (Mala) of Mekaguda Village, Mahaboobnagar District

This village is located on the highway, 3 Km from the mandal Kottur and is a model village in Mahaboobnagar district. Chemical and pharmaceutical industries like NATCO and edible oil factories are located all around the village. Of the total population, BCs and OCs are in the majority and SC households comprise only 5% of the total number of households.

Eight acres of government fallow land was distributed among the SCs, but two acres of this land were allotted for house construction and the OCs occupied two acres, so that the SCs are now cultivating the remaining 4 acres of land. They have complained to the Sarpanch, MRO and MDO about the occupation of their land by the OCs, but no action has been taken. The SCs work as agricultural labour, and in the nearby factories. A few households have migrated to Hyderabad. Earlier they used to work as annual farm servants to large farmers but they are not doing so any longer. Primary school, a ration shop and drinking water facility are all available in the village and accessible to everyone. Only the SCs are sending their children to the government school. Their complaints are not taken seriously in the Vidya Committee. The BCs and OCs send their children to the private school run by NATCO in the village. No interest is taken in the suggestions to the Sarpanch by the SCs for improvements in the government school because the richer families in the village are not sending their children to the government school. Thus the SCs are denied quality education.

Because the government health facility is available at the distance of 5Km at Nandigama, the SCs prefer private hospitals. Edema in the legs is common among the children as well as older people because of the polluted drinking water and environment. These external factors have affected their livelihoods. There is a severe problem of potable water because the chemical factories have contaminated the water. The SCs have complained to the Sarpanch about inadequate supply of drinking water. Even though the factories have provided them with employment, the people, and especially the vulnerable section of the village, are denied their basic right to good health.

Only one SHG is working among the SCs and they depend mainly on large farmers for credit. Their level of participation in political activity is very low as there is hardly any possibility for any leaders to emerge among them because of the domination of OCs and their small numbers in the village.

Caste study 7 highlights the importance of water resources for irrigation on human deprivation. The village selected used to have surface water for irrigation a few years ago but at present this has dried up because this village has been disconnected from the irrigation project. All castes live in the village and a majority of families migrate for long periods to earn their living. As a result they are deprived of access to public institutions in the village. Moreover, the public institutions are not functioning effectively as there is no pressure on the frontline service providers because most of the people have migrated from the village. In this process the children are deprived of education and which contributes to the perpetuation of poverty from generation to generation (chronic poverty). The efforts of the state to organize the poor to empower them for bettering their livelihoods and improve the functioning of public services have met with failure as the groups became dysfunctional due to migration. This adds to the dilemmas of the development debate as to whether empowering the poor can work in villages in which the local resources are at a low level and are not enough to provide an adequate livelihood. Probably, employment assurance programmes to keep the poor in the village may be the better, immediate solution to start with, rather than self-employment programmes.

Case Study-7 All Castes of Basawapur, Mahaboobnagar District

This village has been selected because of the high levels of migration of the people. It has a mixed population of OC, SC, BC with 210 households. Because of lack of water in the Koil Sagar project, and the prevailing drought, the fertile irrigated lands of the village have become rain-fed, raising dry crops. Earlier, the farmers used to cultivate paddy but now a few are raising castor and a very small number cultivate jowar. This has resulted in food insecurity among the people. Further, some of the land is left fallow as the migrants could not return in time for cultivation as they are employed on contract. None of the villagers possesses more than 5 acres of land and a majority of the households have migrated to Gujarat, Rajasthan or Delhi on a long-term basis and to Hyderabad for shorter periods. Only the older members of the community have stayed behind in the village. Even the OCs work as agricultural labourers on land which belongs to the SCs, which is most unusual. The OCs are also not in a position to make private investment to cultivate their lands.

The education of the children gets affected as people migrate along with their families. PDS supply in the village is given only for two or three days. Development works in the village have taken a back seat because the majority has migrated out and the Sarpanch also does not take an interest in the problems of the village as he is from another village. Five of the 11 SHGs in the village are not functioning because their members have left the village. Migration has affected the health of the people to a significant extent as the contractors often exploit the migrant labourers but neglect them when they fall ill. As majority of the people have migrated they are not able to ask the government for any improvements in the village. The government had earlier promised the people to link Koil Sagar project with other rivers, but this was not done. Now the people hope that the present government will take measures in that direction so that migration from the village can be arrested.

Case study 8 is selected to contrast the differences in human deprivation between the poorest of the poor and the poor. This is traced in the context of the role of the state in addressing the deprivations of the poor. The poorest of the poor complain that all the benefits of government programmes are captured by the poor. Moreover, the political structures are also supporting this process leaving the poorest of the poor exposed to continued deprivation against the mal-functioning of the public institutions. Thus all efforts to empower the poor must start with the poorest of the poor.

Case study 8

Village: Maddinanyinapalli, Mandal : Mulakalachervu, District: Chittoor

This multicaste village is located 2km from the mandal headquarters and is well connected by BT road and has good bus services. There are three habitations and 130 households in the village. This village has an upper primary school and teachers come from Madanapally. There are no complaints about teachers or the quality of teaching.

Though there are three NGOs in the village no development work has been undertaken by them. The conflicts and disputes among the SC groups have become major obstacles to the effective functioning of the NGOs. Moreover, the fact that there are no Madiga ward members in the village is another reason why neither NGO nor Government services are being utilised.

Recently, DRDA has sanctioned 4 schemes to the followers of the local President. The Madigas also complain that the Malas (another SC sub-sect) are capturing all the developmental programmes because they are ward members. For example, Madigas told the research team that all the Mala households have Antypodaya cards and they did not need to migrate as they were getting 35kgs rice at the rate of Rs 3.50 per kg. The Madigas complain that all the programmes are implemented first to the benefit of Malas, who are a poor community, but not for the Madigas, the poorest of the poor.

In this village the Madigas are the only community living in extreme poverty. Nearly 90% out of the total 45 Madiga households are forced to migrate for work. Only 7 Madiga houses are provided with latrines. Out of 10 schoolgoing children, only 4 are in 7th class. None of their children stay in the Hostel. Only 4 children are attending the anganwadi. Due to the prevalence of discriminatory practices, the Aya who belong to other caste group (Mala) does not show any interest in taking the children from the Madiga community to the anganwadi. The majority of Madigas do not know about the existence of Sub-centre in the village but they knew about the services of ANM. Since most of the Madigas migrate, the health and education of their children are affected. They are also unable to make use of the available government programmes. The major reason for the high level of migration among the Madigas is that they do not own land nor is wage employment available for them in the village. Nearly 15 households do not have houses either.

The apparent reasons for their backwardness include lack of assets, poor targeting of government programmes, educational backwardness and lack of political participation.

CHAPTER V

Functioning of Public Institutions and Human Deprivation Through Right to Development Lens

Introduction

Human deprivations and the role of household and extra household factors have been examined in the previous chapters. There is an obligation on the part of the government to design appropriate policies and programmes to enable the poor to fulfil their basic needs viz., food, education, health, shelter, safe drinking water, proper sanitation and civic-political security. The programmes have to be implemented through the public institutions to reach the poor. Despite the formulation of well-intended policies and programmes, the ineffective implementation of these programmes to reach the poor may defeat the very goals of the policies. Hence, the governance of the public institutions (Mediating Structures) assumes significance in reaching the poor to ensure basic needs. This chapter is an attempt to assess whether the institutions have internalised the five principles of good governance viz., equity, non-discrimination, transparency, accountability and participation in implementing the programmes, which would enable the poor to realise the right to development. In particular, this chapter addresses the following:

- i. How effective is the Public Distribution System (PDS) in ensuring food security to poor?
- ii. To what extent are the poor are able to access health and education services from public institutions effectively?
- iii. How effectively are different anti-poverty programmes delivered to poor by public institutions?
- iv. How effectively has civic-political security been ensured to poor by the public institutions? and,
- v. What are the factors that have facilitated/inhibited the effective functioning of these institutions?

Methodology

Hard and soft data in terms of the perception of people are used to assess the functioning of public institutions. The functioning of PDS is evaluated through a set of parameters that include coverage of the poor and the type of ration cards

issued to the poor, the method of selection followed for issuing cards and quantity and quality of the ration supplied. The functioning of PDS is evaluated at two levels, viz., issue of ration cards and issue of rations through ration shop dealers. Coverage of the poor and the type of ration cards issued to them, the method of selection followed for issuing cards are taken up to assess the first aspect; and quantity, quality and weighing to assess the issue of rations by the shopkeepers. The functioning of public education institutions can be assessed at two levels, viz., functioning of schools; and the functioning of supporting educational programmes of the government. Enrolment and drop-out ratios, private investment in public education, attendance of the teachers, treatment of students by the teachers, parentteacher meetings, subjects taught and facilities in the school are considered to assess the functioning of schools. Similarly, access to the poor is analysed to assess the functioning of supportive educational programmes like mid-day meal programme, free textbooks and free hostels. The perceptions of households on the functioning of schools are also taken into consideration in the analysis. The efficacy of public health institutions is assessed at two levels, viz., health centers and the frontline service providers - ANM/health worker and ICDS worker. Access and availability of doctors and medicines are used to assess the functioning of health institutions. Availability and services provided are considered to assess the functioning of frontline service providers. The perceptions of households are also considered to assess the functioning of public health institutions. Similarly, awareness, access, method of selection of beneficiaries and participation of beneficiaries in the implementation of anti-poverty programmes have been considered for analyzing the functioning of public institutions implementing different anti-poverty programmes. But, all the parameters considered for assessing the functioning of public institutions are analysed within the framework of the five principles of governance.

Analysis

Public Distribution System

A considerable proportion of vulnerable sections in society do not possess ration cards in the selected districts. For instance, 16 percent of SCs, 8 percent of STs; overall 10 percent each of the poorest of the poor and poor and 24 percent of those working for wages (in agriculture and non-agriculture) do not possess ration cards. There are more households without ration cards in Mahaboobnagar district. Of the 13 households without ration cards, 7 belong to SC, and 6 are from the poorest of poor, and eight are employed as wage labour (Table 5.1 to 5.1c). About 20 percent of the poorest of the poorest of the poor and about 15 percent of the wage workers got ration cards only during the last 12 months. In contrast, the majority of the households in Chittoor (an average district which is representative of the state as a whole and considered a

developed district for the present study) acquired ration cards more than five years ago (Table 5.2 to 5.2c). There are instances of mistargeting in the distribution of ration cards i.e. issue of BPL cards to non-poor and APL cards to poor. One- third of the STs and one-sixth of the SCs obtained their ration cards through grama sabhas. In Chittoor district about one-fourth of the households obtained ration cards through grama sabhas whereas only 4.5 % of households in Mahaboobnagar district obtained their ration cards through village officials. In both districts, village officials seem to the main channel for getting ration cards (Table 5.3 to 5.2c).

In villages where an NGO is functioning, with higher literacy and strong organizations of poor, there is wider coverage of households under PDS. The proportion of ration cards issued through grama sabhas is very high in the cards issued recently, whereas, in the past, a high proportion of cards were distributed through officials. This indicates that transparency in the issue of cards has increased in recent times. This is further substantiated by the fact that the payment of bribes has been conspicuously absent when the poor obtained cards in recent times (Table 5.4ato 5.4d). Thus, transparency has led to a decrease in corruption in the system.

The functioning of PDS has been evaluated in terms of the perceptions of households regarding selection of ration-card holders, entitlement of ration, the quality of the items supplied, information on the availability of items and the distance to be travelled to access the ration shop. A considerable proportion of the more vulnerable sections – SCs, STs and female headed households – are dissatisfied on many of these aspects. In general, a higher percentage of households are dissatisfied about the functioning of PDS in Mahaboobnagar than in Chittoor. On most aspects, the OCs are highly dissatisfied with PDS in both districts. On the issue of quality of rations, however, there is dissatisfied with PDS than the poorer groups (Table 5.5a to 5.5w). This would indicate that the socially and economically more advantaged groups have higher expectations regarding the performance of public institutions.

Further, irrespective of the type of village, the majority of the people are not aware of the quantity lifted by the ration-shop dealer for the distribution of items in the village. However, during a Focus Group Discussion (FGD) in some villages it was learnt that people confronted the ration-shop dealer about frauds in weighing, illegal sale of items and on the prices of items supplied.

It is clear that, at the village level, the functioning of PDS is still lagging on the counts of equity and participation. The fact that a fairly large number of poorer households especially in the backward district are unable to obtain ration cards

attests to this. Further, because of the lack of transparency and accountability in the system, the poor had to resort to bribery in order to obtain ration cards, though this has been on the decline in recent times. Similarly, there is a lack of accountability and transparency on the part of the service provider also. On the other hand, the macro level reality should also be kept in mind to retain a proper perspective. The PDS in Andhra Pradesh is one of the most extensive in the country, covering millions of poor households. In this sense, there is a high degree of equity and participation in the programme. The micro level deficiencies highlight how this can be made more effective within the ENTAP framework.

Public Education Institutions

Among the vulnerable sections, 97 percent of the households belonging to STs are sending their children to government schools in contrast to the other castes (OCs). Similarly, 83 % of the POP, and 72 % of the poor have opted for government schools. It is also interesting to note that a substantial proportion of households in the more developed district are also sending their children to government schools (Table 5.6). This is an indication of the quality of education of the schools. It is also observed that there is gender discrimination when a family chooses the type of school for boys and girls, i.e. boys were sent to private schools and girls to public schools.

There are no drop-outs in villages with NGOs, in villages with close proximity to towns and with high literacy. The drop-outs are higher among the poorest of the poor (12%) and those employed for wages in agriculture (10%) when compared to other comparable categories. Similarly, the drop-out rates are slightly higher in the backward district (Table 5.7). The majority of the drop-outs are reported from the villages in which the SAPAP programme is being implemented, with more outmigration and highly-skewed distribution of land. This indicates that mere enrolment in the schools with the active participation of people's organizations may not ensure good quality of education and compensate for the educational handicap of illiterate parents for the first generation students from poor families. Institutional arrangements for providing extra educational support to the first generation students may ensure better quality of education.

The proportion of households who are satisfied with the schools is high in the more developed district. For instance, almost all the households expressed satisfaction about teacher attendance, treatment of students by the teachers, and standard of teaching, but there was dissatisfaction about the facilities in the schools and the mid-day meal served. The majority of the poor in almost all the villages reported that they meet the teacher of the school from time to time. Most people, including the poor, reported that they are satisfied with the attendance of teachers in the villages. It is reported that the quality of education and the overall functioning of

schools are good in the villages where the teachers reside in the village itself. In the backward district, the proportion of households expressing dissatisfaction is more pronounced in the village with the highly skewed distribution of land and more outmigration (Table 5.8).

The mid-day meal programme, free textbooks and uniforms are the two government programmes accessed by the majority of the children of households belonging to SCs, STs and BCs (Table 5.8c). Among the villages, the proportion of households utilising free text books is high in the villages categorized as model villages with all infrastructure facilities and presence of NGOs. Over one- third of the ST households are also using the free hostels, especially in the villages where NGOs are present and in villages with high literacy. The proportion of households who utilize free hostels is much more in the more developed district than in the backward district. People have observed that the mid-day meal programme has enhanced the enrolment rates in the schools. However, 12 percent of SCs and 19 percent of BCs do not benefit from any of the government programmes. Instances of questioning and making representations to the authorities in regard to the quality of teaching and mid-day meal are observed in both the districts, especially in villages where there are NGOs, and the village identified as best panchayat (semi-urban setting).

A considerable proportion of people of the vulnerable sections, especially in the backward district, are dissatisfied with the manner in which the teacher treats the students, things taught in the school, facilities like toilets, play ground and also on the mid-day meal services (Table 5.8a to 5.8c). A little more than half of the poor stated that they knew of the incentives provided by the government to send girl children to school. Interestingly, the majority of the people in Chittoor, an average district, are not aware of these government incentives for girl children. Around 15 percent of SC households and 24 percent of the BC households have reported that they have faced discrimination in getting the benefits extended by the government (Table: 5.8d). The average expenditure incurred towards education per child by the SCs and STs is just one fifths of the expenditure incurred by the OCs. But, the utilisation of the above programmes has led to lower private cost of education to the families of these social groups.

The general experience of the poor and vulnerable groups is much better with regard to public educational institutions. Though the poorest are the most deprived in terms of not sending their children to schools, the considerations of equity and nondiscrimination are met to a substantial degree in education. The extensive use of government schools and other support programmes offered by the state points to a high level of awareness regarding these services. Though complaints of discrimination and poor service, especially regarding the service providers (teachers)

have been encountered, the overall perception regarding schools is positive. It can also be inferred that better awareness and participation among the people also ensures greater accountability, which is reflected in the better performance of the institutions. But the general experience is that there is less effective pressure on the service providers and deterioration in the services, when the rich began to withdraw from public institutions.

Public Health Institutions

The majority of the poor opted to go to public health institutions as the first point of contact for treatment when they become ill. Among the occupational groups, 79 % of the households who worked for wages in agriculture used public health institutions first. A majority first went to public hospitals for treatment in the more developed district. This is more so in the villages with the presence of NGO. In some villages, people have to travel 18 – 20 kms to get to government hospitals. In fact, nearly 38% of the poor go to nearby private doctors in spite of the high costs involved to avoid loss of wages and transportation charges. This is more pronounced in the backward district. Inconvenient working hours of public hospitals has forced the poor to opt out of public health services.

The people reported that they have faced difficulties because doctors do not live in the villages, especially when they need medical services during an emergency at night. A considerable proportion of households reported that medicines were not always available in the public health institutions. It is also reported that discrimination exists in terms of gender, religion, caste, poverty, social status and age. Thus, a considerable proportion of households observed that the services in the public health institutions are not satisfactory. The public hospitals are functioning well in the villages where NGOs are present, where there are active poor people's organizations, active sarpanch of gram panchayat and where the services are utilized by the poor as well as the rich.

Surprisingly, more than 80 percent of poor and poorest of the poor (88 % of SCs, 96 % of STs), even in the more developed district are not aware about where to register a complaint in case of a problem with the availability and quality of the health care. However, only about 47 percent of the poorest registered a complaint from among those who knew where to register a complaint. The proportion of households who have registered a complaint is very high in the more developed district compared to the backward district. Most of these complaints are registered with the doctors and a small proportion with the sarpanch of gram panchayat. Lack of awareness and illiteracy are the main reasons cited for not registering a complaint. Nearly one-third of the registered complainants reported that there was no action by the officials on their complaints. By and large, this is true in both the districts. This reflects the poor status of accountability of the public institutions.

Among those who had received reproductive and child health care, the majority of SCs, STs and 72 % of households depending on wage labour in agriculture had accessed public health institutions for pre-natal care. More unsafe (home/ untrained) deliveries are reported among the poor and vulnerable sections of the society. This is true in both the districts irrespective of the type of the village. The majority of the households preferred tubectomy as a family planning measure. A significant proportion of households reported that their children received only two or less than two out of the four specified immunization vaccines. Interestingly, the proportion of households receiving all the four specified immunization vaccines is higher in the backward district. A small proportion of poor households have received supplementary food from ICDS. By and large, ANMs/Community health workers are available in all the villages and are accessible to the poor. As ANMs/Community health workers were given targets in respect of family planning operations, they are taking a personal interest in completing the targets, which results in better access to the poor to public health services. Locational disadvantages including the availability of the services of ANMs deprived the people, especially the poor, even from accessing supplementary nutrition in some villages (village with more out-migration, village with highly skewed distribution of land, and NGO targeted village).

Though public health facilities are extensively used, the poor often do have to turn to more expensive private facilities because of many deficiencies in service. Of these, the absence of qualified personnel and medicines, and more especially, the distance at which the government hospital is located, are major obstacles which inhibit the poor. As was the case with public schools, the use of government facilities both by the rich and the poor, and the presence of NGOs and strong organizations of poor which provide strength to the people to voice their complaints, all result in the better functioning of public health facilities.

Institutions Implementing Poverty Alleviation Programmes

The anti-poverty programmes can be broadly classified into seven categories covering food security, health, education, shelter, sanitation, drinking water and livelihoods. The majority of households, irrespective of their caste affiliations, are not aware of programmes like Pradhan Mantri Gramodaya Yojana (PMGY), creditcum-subsidy scheme for rural housing, rural scholarship scheme, Antyodaya Anna Yojana, rural sanitation programme, drought prone area programme and national formal education centers. This indicates that awareness among the people is high on programmes initiated by the state government as compared to central government programmes. Among the social groups awareness of these programmes among STs, except about Indira Awas Yozana (IAY), was found to be low as compared to other communities. In general, there is little difference in awareness about the programmes across the districts. But a higher proportion of households are aware of the majority

of the programmes in villages with high levels of literacy, villages which are near an urban settlement and in a semi-urban setting. A high proportion of the households reported that the officials have played a major role in passing on information about the schemes in both the districts.

The percentage of households who have benefited from different programmes ranges from 1 percent under Pradhan Mantri Gramodaya Yojana, Antyodaya Anna Yojana and Drought Prone Areas Programme to 34 percent under Free Text-Book scheme. Benefits related to education are widely spread followed by shelter, health and livelihood enhancement programmes (wage employment). Nearly 14 percent of SC households reported that there are other eligible members in their families who did not get benefits under NOAP scheme (5.8f). 7 percent of SC households also reported that there were other eligible members in their families for Annapurna and CRSP schemes (5.8g, 5.8h). This is true in case of other castes also. A higher proportion of eligible members have been left out of these programmes in the backward district compared to relatively developed district. A considerable proportion of households also reported that they did not know why they had not been considered for the benefits. The eligible members who had not tried to get benefits have cited lack of faith in the selection process, and uncertainty in getting a suitable scheme as the major reasons. In the backward district, the involvement of PRIs is more visible. The majority of the households reported that there is no transparency in the selection. For instance, even in the free textbook scheme, only 58 % of SCs, 24 % of STs, and 36 % of BCs, felt that the process had transparency. The situation is much worse in other schemes. These observations were found in both the districts. The benefits under different schemes have been extended to the targeted population only. In most cases, beneficiary committees were not constituted to select beneficiaries under any of these programmes, implying that the selection of beneficiaries is mostly non-participatory.

The accountability of the institutions is less pronounced. For instance, each beneficiary visited the concerned offices more than once for getting the benefit. On an average, the poor incurred more than Rs.25/- per visit towards travel and other incidental expenses, but the imputed value of wages foregone due to the number of visits which had to be made for getting these benefits ranged between Rs.25/- to 203/-. The time gap is high between sanction and final disbursement of benefit in the case of SCs, STs and BCs when compared to upper castes. For instance, it took one month for OCs to get the benefit as against 1.5 to 4 months in the case of vulnerable communities. Similarly, the time taken for the final disbursement of the benefit is relatively less in the more developed district, especially in the village with a high level of literacy. A majority of the beneficiaries were of the view that the behaviour of the bank officials, mandal and village level officials, people's representatives and others was normal and good.

Many households also reported that they faced discrimination in the process of selection of beneficiaries. There is a discrimination/bias against women/lower caste people especially in wages and also in payment of the beneficiary amount. This is true across all social groups and also in both the districts.

Awareness about government programmes is more or less same both in the backward as well as in the relatively developed district. Awareness is high in the villages nearer urban and semi urban settlements and also with a high level of literacy. Among the caste groups, awareness is less among the STs. Across the programmes, awareness about schemes sponsored and implemented exclusively by the central government is found to be low. However, awareness is high about schemes related to shelter, education and social security. The proportion of households accessing the benefits is also very low in respect of the schemes sponsored and implemented by the central government and also in the area development programme. The coverage is high in schemes related to education, shelter, health and enhancement of livelihoods. Some of the eligible poor households are being denied access to National Old Age Pension Scheme, Annapurna and Central Rural Sanitation Programme (Table: 5.8f). Between the districts, by and large, there is poorer coverage under the programmes in the backward district. But, the PRIs took an active part in the backward district in all the schemes as against the officials in the relatively developed district. Interestingly it is also reported that most of the beneficiaries have not had to pay bribes to get the benefits. However, the majority of those who paid bribes are from the backward district, perhaps due to political patronage. Among the villages, the villages with more people's participation and nearer to urban and semi-urban paid less bribes.

The accountability of the institutions is less than desired. The poor have to go to the offices numerous times to obtain the benefits as the institutions are taking longer times to deliver the schemes. Among the poor, the relatively better off are getting the benefits more quickly. Though considerations of equity and non-discrimination are not always met, it seems clear that the level of awareness among the beneficiary populations themselves ensures a better transparency in the functioning of programmes. Local level institutions also respond better to the demands of the populations.

Conclusions

There are several factors, which play a part in the effective delivery of government services.

The institution which is implementing a programme that caters only to the poor (like PDS) automatically tends to be more equitable and non-discriminatory, though

not accountable, transparent and participatory. But, multiple institutions which are implementing programmes that cater only to the poor (like anti-poverty programmes) need not be automatically equitable, non-discriminatory, accountable, transparent and participatory. A single institutional set-up to deliver all the anti-poverty programmes may ensure a more effective implementation of the programmes.

The institutions which are providing services to poor as well as rich (like education and health services) can be transparent, accountable, participatory, equitable and non-discriminatory as long as rich do not opt out of these public institutions. But the reality is that rich have been opting out of public institutions. Other structural factors like inequitable land distribution also decrease the efficiency of public institutions. These distortions can be counterbalanced by the organization of the poor into SHGs of DPIP model. The pressure of NGOs is another factor which strengthens the capabilities of the people and increases accountability both among policy makers and frontline service providers.

Occupation		All			
	BPL	APL	Antyodaya	No Card	
SEAG	38	19	4	5	66
%	57.58	28.79	6.06	7.58	100
SENAG	16	5	0	2	23
%	69.57	21.74	0	8.7	100
WEAG	43	4	3	2	52
%	82.69	7.69	5.77	3.85	100
WENAG	33	10	4	12	59
%	55.93	16.95	6.78	20.34	100
Total	130	38	11	21	200
%	65	19	5.5	10.5	100

 Table: 5.1 Households Possessing PDS Cards by Type of Occupation and Type of Card

Type of card		Social	Group	_	All				
	SC ST		BC	OC					
Mahaboobnagar District									
BPL card	27	0	34	9	70				
%	75	0	73.91	52.94	70				
APL card	2	0	6	6	14				
%	5.56	0	13.04	35.29	14				
Antyodaya card	0	1	2	0	3				
%	0	100	4.35	0	3				
No Card	7	0	4	2	13				
%	19.44	0	8.7	11.76	13				
Total	36	1	46	17	100				
%	100	100	100	100	100				
	•	Chittoor 1	District						
BPL card	4	17	30	7	58				
%	57.14	70.83	78.95	24.14	59.18				
APL card	0	4	4	16	24				
%	0	16.67	10.53	55.17	24.49				
Antyodaya card	3	1	2	2	8				
%	42.86	4.17	5.26	6.9	8.16				
No Card	0	2	2	4	8				
%	0	8.33	5.26	13.79	8.16				
Total	7	24	38	29	98				
%	100	100	100	100	100				

Table 5.1a Households Possessing PDS Cards by SocialGroup and Type of Card in the Districts

Econo							
Category		BPL	BPL APL Antyodaya No		No Card	All	
		Ma	haboobnag	ar District			
POP		28	2	3	6	39	
	%	71.79	5.13	7.69	15.38	100	
POOR		23	3	0	3	29	
	%	79.31	10.34	0	10.34	100	
NSP		13	2	0	0	15	
	%	86.67	13.33	0	0	100	
NP		5	7	0	3	15	
	%	33.33	46.67	0	20	100	
Total		69	14	3	12	98	
	%	70.41	14.29	3.06	12.24	100	
			Chittoor D	listrict			
POP		26	0	3	1	30	
	%	86.67	0	10	3.33	100	
POOR		20	5	5	3	33	
	%	60.61	15.15	15.15	9.09	100	
NSP		4	5	0	1	10	
	%	40	50	0	10	100	
NP		1	7	7 0 1		9	
	%	11.11	77.78	0	11.11	100	
Total		51	17	8	6	82	
	%	62.2	20.73	9.76	7.32	100	

Table: 5.1 bHouseholds Possessing PDS Cardsby Economic Category andType of Card in the Districts

		Type of card					
Occupation	BPL	APL	Antyodaya	No Card	All		
Mahaboobnagar District							
SEAG	19	8	0	3	30		
%	63.33	26.67	0	10	100		
SENAG	14	3	0	2	19		
%	73.68	15.79	0	10.53	100		
WEAG	10	2	1	2	15		
%	66.67	13.33	6.67	13.33	100		
WENAG	27	1	2	6	36		
%	75	2.78	5.56	16.67	100		
Total	70	14	3	13	100		
%	70	14	3	13	100		
	•	Chittoor	District		•		
SEAG	19	11	4	2	36		
%	52.78	30.56	11.11	5.56	100		
SENAG	2	2	0	0	4		
%	50	50	0	0	100		
WEAG	33	2	2	0	37		
%	89.19	5.41	5.41	0	100		
WENAG	6	9	2	6	23		
%	26.09	39.13	8.7	26.09	100		
Total	60	24	8	8	100		
%	60	24	8	8	100		

Table : 5.1.cHouseholds Possessing PDS Cards by Type of
Occupation and Type of Card in the Districts

Occupational					
Category	< 1 year >1 year >5 years		> 10 year	All	
SEAG	3	2	19	37	61
%	4.92	3.28	31.15	60.66	100
SENAG	1	3	5	12	21
%	4.76	14.29	23.81	57.14	100
WEAG	6	4	17	17	44
%	13.64	9.09	38.64	38.64	100
WENAG	8	5	12	23	48
%	16.67	10.42	25	47.92	100
Total	18	14	53	89	174
%	10.34	8.05	30.46	51.15	100

Table: 5.2Time Took to Receive PDS Cards by Occupational Category of
Household

When did		Social Group						
you receive	SC	ST	BC	OC	All			
	•							
< 1 year	5	1	5	0	11			
%	17.24	100	11.63	0	12.5			
>1 year	2	0	6	1	9			
%	6.9	0	13.95	6.67	10.23			
>5 years	7	0	11	4	22			
%	24.14	0	25.58	26.67	25			
> 10 years	15	0	21	10	46			
%	51.72	0	48.84	66.67	52.27			
Total	29	1	43	15	88			
%	100	100	100	100	100			
	•	Chittoor 1	District					
< 1 year	0	1	3	3	7			
%	0	4.55	9.68	12	8.33			
>1 year	1	3	1	0	5			
%	16.67	13.64	3.23	0	5.95			
>5 years	2	9	11	9	31			
%	33.33	40.91	35.48	36	36.9			
> 10 years	3	9	16	13	41			
%	50	40.91	51.61	52	48.81			
Total	6	22	31	25	84			
%	100	100	100	100	100			

Table: 5.2a	Time Took to Receive	PDS Cards According to Social Group
	in the	e Districts

Econo								
Category		< 1 year >1 year >5 years > 10 year		All				
Mahaboobnagar District								
POP 9 6 8 11 34								
	%	26.47	17.65	23.53	32.35	100		
POOR		1	2	6	17	26		
	%	3.85	7.69	23.08	65.38	100		
NSP		0	1	6	8	15		
	%	0	6.67	40	53.33	100		
NP		0	0	2	10	12		
	%	0	0	16.67	83.33	100		
Total		10	9	22	46	87		
	%	11.49	10.34	25.29	52.87	100		
			Chittoor 1	District				
POP		3	3	7	12	25		
	%	12	12	28	48	100		
POOR		2	1	12	14	29		
	%	6.9	3.45	41.38	48.28	100		
NSP		1	1	2	4	8		
	%	12.5	12.5	25	50	100		
NP		0	0	2	6	8		
	%	0	0	25	75	100		
Total		6	5	23	36	70		
	%	8.57	7.14	32.86	51.43	100		

Table 5.2 bTime Took to Receive PDS Cards by Economic Category
in the Districts

		Time Taken to Receive							
Occupation	< 1 year	< 1 year >1 year >5 years > 10 year		Total					
Mahaboobnagar District									
SEAG	G 1 1 5 20								
%	3.7	3.7	18.52	74.07	100				
SENAG	1	3	3	10	17				
%	5.88	17.65	17.65	58.82	100				
WEAG	3	2	4	4	13				
%	23.08	15.38	30.77	30.77	100				
WENAG	6	3	10	12	31				
%	19.35	9.68	32.26	38.71	100				
Total	11	9	22	46	88				
%	12.5	10.23	25	52.27	100				
	•	Chittoor 1	District						
SEAG	2	1	14	17	34				
%	5.88	2.94	41.18	50	100				
SENAG	0	0	2	2	4				
%	0	0	50	50	100				
WEAG	3	2	13	13	31				
%	9.68	6.45	41.94	41.94	100				
WENAG	2	2	2	11	17				
%	11.76	11.76	11.76	64.71	100				
Total	7	5	31	43	86				
%	8.14	5.81	36.05	50	100				

Table 5.2cTime Took to Receive PDS Cards by OccupationCategory of Households in the Districts

Occupation		Through gramsabhas	Through village officials	All
SEAG		9	51	60
	%	15	85	100
SENAG		0	21	21
	%	0	100	100
WEAG		11	37	48
	%	22.92	77.08	100
WENAG		8	39	47
	%	17.02	82.98	100
Total		28	148	176
	%	15.91	84.09	100

Table: 5.3 Households Reporting The Channels of Acquiring PDS Cards by
Occupation of Houesholds

Table: 5.3a	Households Reporting The Channels of Acquiring PDS Cards
	by Social Group in the Districts

		Social Group				
How did you get	SC	ST	BC	OC	All	
	Mahabo	obnagar Dis	strict			
Through gramsabha	2	0	2	0	4	
%	6.9	0	4.65	0	4.55	
Through village officials	27	1	41	15	84	
%	93.1	100	95.35	100	95.45	
Total	29	1	43	15	88	
%	100	100	100	100	100	
	Chi	ttoor Distri	ct			
Through gramsabha	4	7	6	6	23	
%	57.14	33.33	18.18	24	26.74	
Through village officials	3	14	27	19	63	
%	42.86	66.67	81.82	76	73.26	
Total	7	21	33	25	86	
%	100	100	100	100	100	

Economic Category		Chan				
		Through gramasabha Through village officials		All		
Mahaboobnagar District						
POP		2	32	34		
	%	5.88	94.12	100		
POOR		1	25	26		
	%	3.85	96.15	100		
NSP		1	14	15		
	%	6.67	93.33	100		
NP		0	12	12		
	%	0	100	100		
Total		4	83	87		
	%	4.6	95.4	100		
		Chittoor I	District			
POP		11	17	28		
	%	39.29	60.71	100		
POOR		6	24	30		
	%	20	80	100		
NSP		4	3	7		
ND	%	57.14	42.86	100		
NP	%	1 12.5	7 87.5	8		
Total	%	12.5	87.5 51	100 73		
Total	%	30.14	69.86	100		

Table 5.3bHouseholds Reporting The Channels of Acquaring PDS Cards
by Economic Category of Households in the Districts

Occupational Group	Through gramasabha	Through village officials	All
	Mahaboobnag	ar District	•
SEAG	1	26	27
	3.7	96.3	100
SENAG	0	17	17
	0	100	100
WEAG	0	13	13
	0	100	100
WENAG	3	28	31
	9.68	90.32	100
Total	4	84	88
	4.55	95.45	100
	Chittoor]	District	
SEAG	8	25	33
%	24.24	75.76	100
SENAG	0	4	4
%	0	100	100
WEAG	11	24	35
%	31.43	68.57	100
WENAG	5	11	16
%	31.25	68.75	100
Total	24	64	88
%	27.27	72.73	100

Table 5.3cHouseholds Reporting The Channels of Acquiring PDS Cards
by Occupation in the Districts

Occupational Grup		Yes	No	All
SEAG		4	56	60
	%	6.67	93.33	100
SENAG		1	20	21
	%	4.76	95.24	100
WEAG		4	37	41
	%	9.76	90.24	100
WENAG		3	45	48
	%	6.25	93.75	100
Total		12	158	170
	%	7.06	92.94	100

Table: 5.4Households Reporting Payment of Bribes for Getting PDS Cards
by Occupational Groups

		Social Group				
Bribe	Bribe		ST	BC	OC	All
		Mahaboo	obnagar Dis	strict		
Yes		4	0	6	0	10
	%	13.79	0	13.95	0	11.36
No		25	1	37	15	78
	%	86.21	100	86.05	100	88.64
Total		29	1	43	15	88
	%	100	100	100	100	100
		Chitt	toor Distric	t		
Yes		0	0	1	1	2
	%	0	0	3.7	4	2.5
No		7	21	26	24	78
	%	100	100	96.3	96	97.5
Total		7	21	27	25	80
	%	100	100	100	100	100

Table: 5.4aHouseholds Reporting Payment of Bribes for Getting PDS
Cards by Social Group in the Districts

Economic Category		Bribe					
		Yes	No	All			
Mahaboobnagar District							
POP		6	28	34			
	%	17.65	82.35	100			
POOR		3	23	26			
	%	11.54	88.46	100			
NSP		1	14	15			
	%	6.67	93.33	100			
NP		0	12	12			
	%	0	100	100			
Total		10	77	87			
	%	11.49	88.51	100			
		Chittoor Distri	ct				
POP		0	27	27			
	%	0	100	100			
POOR		1	26	27			
	%	3.7	96.3	100			
NSP		0	9	9			
	%	0	100	100			
NP		1	7	8			
	%	12.5	87.5	100			
Total		2	69	71			
	%	2.82	97.18	100			

Table: 5.4b	Households Reports Payment of Bribes for Getting PDS Cards
	by Economic Groups in the Districts

Occupational Groups		Bribe					
		Yes	No	All			
Mahaboobnagar District							
SEAG		3	24	27			
	%	11.11	88.89	100			
SENAG		1	16	17			
	%	5.88	94.12	100			
WEAG		3	10	13			
	%	23.08	76.92	100			
WENAG		3	28	31			
	%	9.68	90.32	100			
Total		10	78	88			
	%	11.36	88.64	100			
	·	Chittoor Distric	t				
SEAG		1	32	33			
		3.03	96.97	100			
SENAG		0	4	4			
		0	100	100			
WEAG		1	27	28			
		3.57	96.43	100			
WENAG		0	17	17			
		0	100	100			
Total		2	80	82			
		2.44	97.56	100			

Table: 5.4cHouseholds Reporting Payment of Bribes for Getting PDS
Cards by Occupational Groups in the Districts

Occupational Group	Satisfied	Dissatisfied	Indifferent	All
SEAG	43	19	3	65
%	66.15	29.23	4.62	100
SENAG	16	7	0	23
%	69.57	30.43	0	100
WEAG	44	3	5	52
%	84.62	5.77	9.62	100
WENAG	38	12	7	57
%	66.67	21.05	12.28	100
Total	141	41	15	197
%	71.57	20.81	7.61	100

 Table: 5.5 Satisfaction Levels of Respondents on PDS by Occupational Groups

		Social Groups			
Opinion	SC	ST	BC	OC	All
	Mahaboo	obnagar Dis	strict		
Satisfied	26	1	35	10	72
%	72.22	100	76.09	58.82	72
Dissatisfied	10	0	11	7	28
%	27.78	0	23.91	41.18	28
Total	36	1	46	17	100
%	100	100	100	100	100
	Chit	toor Distric	t		
Satisfied	7	15	31	14	67
%	100	62.5	83.78	51.85	70.53
Dissatisfied	0	2	3	8	13
%	0	8.33	8.11	29.63	13.68
Indifferent	0	7	3	5	15
%	0	29.17	8.11	18.52	15.79
Total	7	24	37	27	95
%	100	100	100	100	100

Table: 5.5aSatisfaction Levels of Respondents on PDS by Social Group in
the Districts

Satisfied		Social Group				
		SC	ST	BC	OC	All
		Mahaboo	bnagar Dis	strict		
Satisfied	%	23 63.89	1 100	33 71.74	9 52.94	66 66
Dissatisfied	%	13 36.11	0	13 28.26	8 47.06	34 34
Total	%	36 100	1 100	46 100	17 100	100 100
		Ch	ittoor Distr	ict		I
Satisfied	%	7 100	15 62.5	28 75.68	13 48.15	63 66.32
Dissatisfied	%	0 0	2 8.33	6 16.22	9 33.33	17 17.89
Indifferent	%	0 0	7 29.17	3 8.11	5 18.52	15 15.79
Total	%	7 100	24 100	37 100	27 100	95 100

Table 5.5bSatisfaction Levels of Respondents on Entitlement from PDS by
Social Group in the Districts

 Table 5.5c. Satisfaction Levels on Quality of PDS Services by Social Group in the Districts

		Social Group			
Satisfied	SC	ST	BC	OC	All
	Mahabo	obnagar Dis	strict		
Dissatisfied Indifferent	$\begin{array}{c} 20\\ 55.56\\ 14\\ 38.89\\ 2\\ \%\\ 5.56\\ 36 \end{array}$	$\begin{array}{c} 0\\ 0\\ 1\\ 100\\ 0\\ 0\\ 1\end{array}$	2554.352043.4812.1746	$ \begin{array}{r} 10 \\ 58.82 \\ 7 \\ 41.18 \\ 0 \\ 0 \\ 17 \end{array} $	55 55 42 42 3 3 100
	% 100	100	100	100	100
	Ch	nittoor Distr	ict		-
Dissatisfied		$ \begin{array}{c} 12 \\ 50 \\ 5 \\ 20.83 \end{array} $	27 72.97 7 18.92	13 48.15 9 33.33	59 62.11 21 22.11
Indifferent Total	0 0 % 0 % 7 % 100	$ \begin{array}{c} 7 \\ 7 \\ 29.17 \\ 24 \\ 100 \end{array} $	3 8.11 37 100	5 18.52 27 100	15 15.79 95 100

		Social Groups			
Satisfaction Levels	SC	ST	BC	OC	All
	Mahabo	obnagar Dis	strict		
Satisfied %	23 63.89 12	1 100 0	28 60.87 18	11 64.71 6	63 63 36
Indifferent %	$ \begin{array}{c} 112 \\ 33.33 \\ 1 \\ 2.78 \end{array} $	0	39.13 0	35.29 0	36 1
Total %	36 100	1 100	46 100	17 100	100 100
	Ch	ittoor Distr	ict		
Satisfied %	7 100	12 50	24 64.86	13 48.15	56 58.95
Dissatisfied %	0 0	5 20.83	10 27.03	9 33.33	24 25.26
Indifferent % Total	0 0 7	29.17 24	3 8.11 37	5 18.52 27	15 15.79 95
%	100	100	100	100	100

Table 5.5d Household Satisfaction Levels on the Availability of
PDS Provisions by Social Group in the Districts

Table 5.5e	Household Satisfaction Levels on Information of Items of PDS
	by Social Group in the Districts

Satisfaction Lev	els	SC	ST	BC	OC	All
		Mahaboo	obnagar Dis	strict		
Satisfied	%	28 77.78	1 100	29 63.04	11 64.71	69 69
Dissatisfied	%	8 22.22	0 0	17 36.96	6 35.29	31 31
Total	%	36 100	1 100	46 100	17 100	100 100
		Ch	ittoor Distri	ict		
Satisfied	%	7 100	14 58.33	26 70.27	13 48.15	60 63.16
Dissatisfied	%	0 0	2 8.33	8 21.62	9 33.33	19 20
Indifferent	%	0 0	8 33.33	3 8.11	5 18.52	16 16.84
Total	%	7 100	24 100	37 100	27 100	95 100

Satisfaction L	evels	SC	ST	BC	OC	All
		Mahaboo	bnagar Dis	strict		
Satisfied		29	0	41	15	85
Suisilea	%	82.86	0	89.13	88.24	85.86
Dissatisfied		6	1	5	2	14
	%	17.14	100	10.87	11.76	14.14
Total		35	1	46	17	99
	%	100	100	100	100	100
		Chitt	toor Distric	t		
Satisfied		5	13	26	10	54
	%	100	54.17	78.79	41.67	62.79
Dissatisfied		0	2	3	9	14
	%	0	8.33	9.09	37.5	16.28
Indifferent		0	9	4	5	18
	%	0	37.5	12.12	20.83	20.93
Total		5	24	33	24	86
	%	100	100	100	100	100

Table 5.5fHousehold Satisfaction Levels Regarding the Distance to PDS by
Social Group in the Districts

		Satisfaction Levels				
Economic Category	Economic Category		d	d Dissatisfie		All
		Mahaboobn	agar Dist	rict		
POP		2	9		10	39
9	6	74.3	6		25.64	100
POOR		1	9		10	29
9	6	65.5	2		34.48	100
NSP		1	2		3	15
0	6	8	0		20	100
NP		1	0		5	15
9	6	66.6	7		33.33	100
Total		7	0		28	98
0	6	71.4	3		28.57	100
		Chitto	or Distric	et		
		Satisfaction Leve			els	
Economic Category		Satisfied	Dissatisf	fied	Indifferent	All
POP		25		3	1	29
	6	86.21	10.3	-	3.45	100
POOR	-	23		4	5	32
	6	71.88	12	.5	15.63	100
NSP		8		1	1	10
9	6	80	1	0	10	100
NP		5		3	0	8
C	%	62.5	37.	.5	0	100
Total		61	1	1	7	79
9	6	77.22	13.9	92	8.86	100
		5		3	0	8
9	6	62.5	37.	.5	0	100
Total		61	1	1	7	79
<i>o</i> /	6	77.22	13.9	92	8.86	100

Table 5.5gHousehold Satisfaction Levels on the Selection of PDSBeneficiaries by Economic Categoryin the Districts

E	S	Satisfaction Levels				
Economic Category	Satisfie	ed Di	ssatisfied	All		
	Mahaboobi	nagar District				
POP	2	6	13	39		
%	66.6	7	33.33	100		
POOR	1	8	11	29		
%	62.0	7	37.93	100		
NSP	1	0	5	15		
%	66.6	7	33.33	100		
NP	1	0	5	15		
%	66.6	7	33.33	100		
Total		4	34	98		
%	65.3	1	34.69	100		
	Chitte	oor District				
_	Sa	Satisfactions Levels				
Economic Category	Satisfied	Dissatisfied	Indifferent			
POP	24	4	1	29		
%	82.76	13.79	3.45	100		
POOR	22	5	5	32		
%	68.75	15.63	15.63	100		
NSP	7	2	1	10		
%	70	20	10	100		
NP	4	4	0	8		
%	50	50	0	100		
Total	57	15	7	79		
%	72.15	18.99	8.86	100		

Table 5.5h Household Satisfaction Levels on Entitlement from PDS by Economic Category in the Districts

		Sa			
Economic C	ategory	Satisfied	Dissatisfied	Indifferent	All
		Mahaboobr	agar District		
POP		19	17	3	39
	%	48.72	43.59	7.69	100
POOR		15	14	0	29
	%	51.72	48.28	0	100
NSP		8	7	0	15
	%	53.33	46.67	0	100
NP		11	4	0	15
	%	73.33	26.67	0	100
Total		53	42	3	98
	%	54.08	42.86	3.06	100
		Chittoo	r District	•	
POP		23	5	1	29
	%	79.31	17.24	3.45	100
POOR		20	7	5	32
	%	62.5	21.88	15.63	100
NSP		8	1	1	10
	%	80	10	10	100
NP		4	4	0	8
	%	50	50	0	100
Total		55	17	7	79
	%	69.62	21.52	8.86	100

Table 5.5iHousehold Satisfaction Levels Regarding Quality of PDS Items
by Economic Category in the Districts

	Economic Category		Satisfaction Levels				
Economic Ca			Dissatisfied	Indifferent	All		
		Mahaboobr	agar District				
POP		24	14	1	39		
	%	61.54	35.9	2.56	100		
POOR		16	13	0	29		
	%	55.17	44.83	0	100		
NSP		10	5	0	15		
	%	66.67	33.33	0	100		
NP		12	3	0	15		
	%	80	20	0	100		
Total		62	35	1	98		
	%	63.27	35.71	1.02	100		
		Chittoo	r District	•			
POP		21	7	1	29		
	%	72.41	24.14	3.45	100		
POOR		18	9	5	32		
	%	56.25	28.13	15.63	100		
NSP		8	1	1	10		
	%	80	10	10	100		
NP		4	4	0	8		
	%	50	50	0	100		
Total		51	21	7	79		
	%	64.56	26.58	8.86	100		

Table 5.5jHousehold Satisfaction Levels on Availability of PDS Items
by Economic Category in the Districts

		S			
Economic Ca	ategory	Satisfie	d Di	ssatisfied	All
		Mahaboobr	agar District		
POP		2		12	39
	%	69.2		30.77	100
POOR		1		11	29
	%	62.0		37.93	100
NSP			9	6	15
	%	6		40	100
NP		1	-	2	15
	%	86.6		13.33	100
Total		6	7	31	98
	%	68.3	7	31.63	100
		Chitte	or District		
		Sa			
Economic Ca	ategory	Satisfied	Dissatisfied	Indifferent	All
POP		24	3	2	29
	%	82.76	10.34	6.9	100
POOR		21	6	5	32
	%	65.63	18.75	15.63	100
NSP		7	2	1	10
	%	70	20	10	100
NP		4	4	0	8
	%	50	50	0	100
Total		56	15	8	79
	%	70.89	18.99	10.13	100

Table 5.5kHousehold Satisfaction Levels Regarding PDS Information
by Economic Category in the Districts

-	5	Satisfaction Levels			
Economic Category	Satisfie	ed Di	issatisfied	All	
	Mahaboobi	nagar District			
POP	3	0	8	38	
%	78.9	5	21.05	100	
POOR	2	6	3	29	
%	89.6	6	10.34	100	
NSP	1	5	0	15	
%	10	0	0	100	
NP	1	2	3	15	
%	8	0	20	100	
Total		3	14	97	
%	85.5	7	14.43	100	
	Chitte	oor District			
	Sa	Satisfaction Levels			
Economic Category	Satisfied	Dissatisfied	Indifferent	All	
РОР	22	2	2	26	
%	84.62	7.69	7.69	100	
POOR	19	5	5	29	
%	65.52	17.24	17.24	100	
NSP	6	1	1	8	
%	75	12.5	12.5	100	
NP	2	4	0	6	
%	33.33	66.67	0	100	
Total	49	12	8	69	
%	71.01	17.39	11.59	100	

Table 5.51Household Satisfaction Levels on Distance to PDS
by Economic Category in the Districts

		S				
Occupational C	Occupational Category		d D	oissatisfied	All	
		Mahaboobr	agar District			
SEAG		2	0	10	30	
	%	66.6	7	33.33	100	
SENAG		1	4	5	19	
	%	73.6	8	26.32	100	
WEAG		1	3	2	15	
	%	86.6	7	13.33	100	
WENAG		2	5	11	36	
	%	69.4	4	30.56	100	
Total		7	2	28	100	
	%	7	2	28	100	
		Chitte	or District			
		Satisfaction Levels				
Occupational C	ategory	Satisfied	Dissatisfied	Indifferent		
SEAG		23	9	3	35	
	%	65.71	25.71	8.57	100	
SENAG		2	2	0	4	
	%	50	50	0	100	
WEAG		31	1	5	37	
	%	83.78	2.7	13.51	100	
WENAG		13	1	7	21	
	%	61.9	4.76	33.33	100	
Total		69	13	15	97	
	%	71.13	13.4	15.46	100	

Table 5.5mHousehold Satisfaction Levels Regarding Selection for PDS
by Occupational Category in the Districts

		S	Satisfaction Levels			
Occupational C	Occupational Category		d I	Dissatisfied		
		Mahaboobr	agar Distric	;		
SEAG		1	7	13	30	
	%	56.6	7	43.33	100	
SENAG		1	3	6	19	
	%	68.4	2	31.58	100	
WEAG		1	1	4	15	
	%	73.3	3	26.67	100	
WENAG		2	5	11	36	
	%	69.4	4	30.56	100	
Total		6	· .	34	100	
	%	6	6	34	100	
		Chitte	or District			
		Satisfaction Levels				
Occupational C	ategory	Satisfied	Dissatisfied	Indifferent		
SEAG		22	10	3	35	
	%	62.86	28.57	8.57	100	
SENAG		2	2	0	4	
	%	50	50	0	100	
WEAG		28	4	5	37	
	%	75.68	10.81	13.51	100	
WENAG		13	1	7	21	
	%	61.9	4.76	33.33	100	
Total		65	17	15	97	
	%	67.01	17.53	15.46	100	

Table 5.5n	Household Satisfaction Levels Regarding Entitlement of PDS
	by Occupational Category in the Districts

Occupational Category		Sa	tisfaction Lev				
		Satisfied	Dissatisfied	Indifferent	All		
Mahaboobnagar District							
SEAG		16	14	0	30		
	%	53.33	46.67	0	100		
SENAG		12	7	0	19		
	%	63.16	36.84	0	100		
WEAG		8	6	1	15		
	%	53.33	40	6.67	100		
WENAG		19	15	2	36		
	%	52.78	41.67	5.56	100		
Total		55	42	3	100		
	%	55	42	3	100		
		Chittoo	r District	•			
SEAG		19	13	3	35		
	%	54.29	37.14	8.57	100		
SENAG		2	2	0	4		
	%	50	50	0	100		
WEAG		27	5	5	37		
	%	72.97	13.51	13.51	100		
WENAG		13	1	7	21		
	%	61.9	4.76	33.33	100		
Total		61	21	15	97		
	%	62.89	21.65	15.46	100		

Table 5.50	Household Satisfaction Levels Regarding Quality of PDS Items
	by Occupational Category in the Districts

			tisfaction Leve	els				
Occupational Category		Satisfied	Dissatisfied	Indifferent	All			
	Mahaboobnagar District							
SEAG		18	12	0	30			
	%	60	40	0	100			
SENAG		14	5	0	19			
	%	73.68	26.32	0	100			
WEAG		11	4	0	15			
	%	73.33	26.67	0	100			
WENAG		20	15	1	36			
	%	55.56	41.67	2.78	100			
Total		63	36	1	100			
	%	63	36	1	100			
		Chittoo	r District					
SEAG		17	15	3	35			
	%	48.57	42.86	8.57	100			
SENAG		2	2	0	4			
	%	50	50	0	100			
WEAG		26	6	5	37			
	%	70.27	16.22	13.51	100			
WENAG		13	1	7	21			
	%	61.9	4.76	33.33	100			
Total		58	24	15	97			
	%	59.79	24.74	15.46	100			

Table 5.5p	Household Satisfaction Levels on Availability of PDS Cards
	by Occupational Category in the Districts

		5	Satisfacion Le	vels		
Occupational Ca	ategory	Satisfie	d D	issatisfied	All	
		Mahaboobr	agar District			
SEAG		1	7	13	30	
	%	56.6	7	43.33	100	
SENAG		1	4	5	19	
	%	73.6	8	26.32	100	
WEAG		1	3	2	15	
	%	86.6	7	13.33	100	
WENAG		2	5	11	36	
	%	69.4	4	30.56	100	
Total		6	9	31	100	
	%	6	9	31	100	
		Chitte	oor District			
		Sa	atisfacion Leve			
Occupational Ca	ategory	Satisfied	Dissatisfied	Indifferent	All	
SEAG		21	10	4	35	
	%	60	28.57	11.43	100	
SENAG		2	2	0	4	
	%	50	50	0	100	
WEAG		26	6	5	37	
	%	70.27	16.22	13.51	100	
WENAG		13	1	7	21	
	%	61.9	4.76	33.33	100	
Total		62	19	16	97	
	%	63.92	19.59	16.49	100	

Table 5.5qHousehold Satisfaction Levels Regarding PDS Information
by Occupational Category in the Districts

			atisfaction L	evels	
Occupational C	ategory	Satisfie	d I	Dissatisfied	
		Mahaboobr	agar District		
SEAG		2	5	5	30
	%	83.3	3	16.67	100
SENAG		1	6	3	19
	%	84.2	1	15.79	100
WEAG		1	2	2	14
	%	85.7	1	14.29	100
WENAG		3	2	4	36
	%	88.8	9	11.11	100
Total		8	5	14	99
	%	85.8	6	14.14	100
		Chitte	or District		
		Satisfaction Levels			
Occupational C	ategory	Satisfied	Dissatisfied	Indifferent	
SEAG		18	9	4	31
	%	58.06	29.03	12.9	100
SENAG		2	2	0	4
	%	50	50	0	100
WEAG		25	2	8	35
	%	71.43	5.71	22.86	100
WENAG		9	1	7	17
	%	52.94	5.88	41.18	100
Total		54	14	19	87
	%	62.07	16.09	21.84	100

Table 5.5rHousehold Satisfaction Levels on Distance to PDSby Occupational Category in the Districts

Occupational Category		Sa	Satisfaction Levels			
		Satisfied	Dissatisfied	Indifferent	All	
SEAG		39	23	3	65	
	%	60	35.38	4.62	100	
SENAG		15	8	0	23	
	%	65.22	34.78	0	100	
WEAG		39	8	5	52	
	%	75	15.38	9.62	100	
WENAG		38	12	7	57	
	%	66.67	21.05	12.28	100	
Total		131	51	15	197	
	%	66.5	25.89	7.61	100	

Table 5.5sHousehold Satisfaction Levels Regarding the Entitlement formPDS by Occupational Category

Table 5.5tHousehold Satisfaction Levels on Quality of PDS Items
by Occupationa Category

Occupational Category		Sa			
		Satisfied	Dissatisfied	Indifferent	All
SEAG		35	27	3	65
	%	53.85	41.54	4.62	100
SENAG		14	9	0	23
	%	60.87	39.13	0	100
WEAG		35	11	6	52
	%	67.31	21.15	11.54	100
WENAG		32	16	9	57
	%	56.14	28.07	15.79	100
Total		116	63	18	197
	%	58.88	31.98	9.14	100

Occupational Category		Sa			
		Satisfied	Dissatisfied	Indifferent	All
SEAG		35	27	3	65
SENAG	%	53.85 16	41.54	4.62	100 23
	%	69.57	30.43	0	100
WEAG	%	37 71.15	10 19.23	5 9.62	52 100
WENAG	70	33	19.25	8	57
	%	57.89	28.07	14.04	100
Total	%	121 61.42	60 30.46	16 8.12	197 100

Table 5.5uHousehold Satisfaction Levels Regarding Availability of PDS
by Services by Occupational Category

Occupational Category		Sa	Satisfaction Levels		
		Satisfied	Dissatisfied	Indifferent	
SEAG		38	23	4	65
	%	58.46	35.38	6.15	100
SENAG		16	7	0	23
	%	69.57	30.43	0	100
WEAG		39	8	5	52
	%	75	15.38	9.62	100
WENAG		38	12	7	57
	%	66.67	21.05	12.28	100
Total		131	50	16	197
	%	66.5	25.38	8.12	100

Table 5.5vHousehold Satisfaction Regarding Information of PDS
by Occupational Category

Occupational Category		Sa			
		Satisfied	Dissatisfied	Indifferent	All
SEAG		43	14	4	61
	%	70.49	22.95	6.56	100
SENAG		18	5	0	23
	%	78.26	21.74	0	100
WEAG		37	4	8	49
	%	75.51	8.16	16.33	100
WENAG		41	5	7	53
	%	77.36	9.43	13.21	100
Total		139	28	19	186
	%	74.73	15.05	10.22	100

Table 5.5wHousehold Satisfaction Levels on Distance to PDS
by Occupational Category

Table: 5.6	Distribution of Children Enrolled by Economic Category an	d			
Type of School					

Economic			. 11		
Category		Public school	Private school	Total Not rolled	All
POP		86	6	12	104
	%	82.69	5.77	11.54	100
POOR		71	17	11	99
	%	71.72	17.17	11.11	100
NSP		19	7	3	29
	%	65.52	24.14	10.34	100
NP		8	13	3	24
	%	33.33	54.17	12.5	100
Total		184	43	29	256
	%	71.88	16.8	11.33	100

Economic Category	Conomic Category % of dropped out		
POP	12.2	6	
POOR	5.71	6.25	
NSP	0	8.5	
NP	6.25	8.33	

Table: 5.7 Distribution of Drop Outs and Age At Which Dropping Out
by Economic Category

Table: 5.8a	Household	Satisfaction	Levels	on	Teacher Attendance
	by (Occupational	Catego	ory	

Occupational O	Category	Satisfied	Dissatisfied	All
SEAG		46	9	55
	%	83.64	16.36	100
SENAG		21	1	22
	%	95.45	4.55	100
WEAG		35	0	35
	%	100	0	100
WENAG		47	3	50
	%	94	6	100
Total		149	13	162
	%	91.98	8.02	100

			Opinion				
Occupational (Lategory	Satisfied	Satisfied Dissatisfied Indifferer		All		
SEAG		48	7	0	55		
	%	87.27	12.73	0	100		
SENAG		20	2	0	22		
	%	90.91	9.09	0	100		
WEAG		31	4	0	35		
	%	88.57	11.43	0	100		
WENAG		43	6	1	50		
	%	86	12	2	100		
Total		142	19	1	162		
	%	87.65	11.73	0.62	100		

Table 5.8bHousehold Satisfaction Levels on Treatment of Students
by Teachers by Occupational Category

 Table 5.8c
 Household Satisfaction Levels on Things Taught At Schools

 by Occupational Category

			A 11		
Occupational (Category	Satisfied Dissatisfied Indifferent		Indifferent	All
SEAG		47	8	0	55
	%	85.45	14.55	0	100
SENAG		19	3	0	22
	%	86.36	13.64	0	100
WEAG		32	2	1	35
	%	91.43	5.71	2.86	100
WENAG		47	3	0	50
	%	94	6	0	100
Total		145	16	1	162
	%	89.51	9.88	0.62	100

			. 11		
Occupational (Category	Satisfied	Dissatisfied	Indifferent	All
SEAG		48	7	0	55
	%	87.27	12.73	0	100
SENAG		19	2	1	22
	%	86.36	9.09	4.55	100
WEAG		29	5	1	35
	%	82.86	14.29	2.86	100
WENAG		41	7	2	50
	%	82	14	4	100
Total		137	21	4	162
	%	84.57	12.96	2.47	100

Table 5.8dHouseholdSatisfaction LevelsRegarding FacilitiesAvailable atSchools by Occupational Category : All Districts

			Total		
Occupational C	ategory	Satisfied	Satisfied Dissatisfied In		Total
SEAG		42	8	5	55
	%	76.36	14.55	9.09	100
SENAG		20	2	0	22
	%	90.91	9.09	0	100
WEAG		30	0	5	35
	%	85.71	0	14.29	100
WENAG		39	8	3	50
	%	78	16	6	100
Total		131	18	13	162
	%	80.86	11.11	8.02	100

Table 5.8eHousehold Satisfaction Levels Regarding Mid-day Meals
by Occupational Category : All Districts

Household R	Responce	SC	ST	BC	OC	All
Yes		35	10	58	38	141
	%	85.37	40.00	69.05	84.44	72.31
No		6	15	26	7	54
	%	14.63	60.00	30.95	15.56	27.69
Total		41	25	84	45	195
	%	100.00	100.00	100.00	100.00	100.00

Table 5.8f Household Responses Regarding NOAP Programmes by Social Group

 Table 5.8g
 Household Responses Regarding Annapurna Scheme by Social Group

нынь						
Household R	esponce	SC	ST	BC	OC	All
Yes		19	1	16	19	55
	%	44.19	4.00	19.05	42.22	27.92
No		24	24	68	26	142
	%	55.81	96.00	80.95	57.78	72.08
Total		43	25	84	45	197
	%	100.00	100.00	100.00	100.00	100.00

Household Ro	esponce	SC	ST	BC	OC	All
Yes		22	13	48	33	116
	%	55.00	52.00	57.14	73.33	59.79
No		18	12	36	12	78
	%	45.00	48.00	42.86	26.67	40.21
Total		40	25	84	45	194
	%	100.00	100.00	100.00	100.00	100.00

Table 5.8hHousehold Responses Regarding SGSY Programmes
by Social Group

Table 5.8iHousehold Responses Regarding Free Text Book Programme
by Social Group

H L LLD						
Household R	esponce	SC	ST	BC	OC	All
Yes		38	7	56	31	132
	%	88.37	28.00	66.67	68.89	67.01
No		5	18	28	14	65
	%	11.63	72.00	33.33	31.11	32.99
Total		43	25	84	45	132
	%	100.00	100.00	100.00	100.00	100.00

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