

## EXECUTIVE SUMMARY AND RECOMMENDATIONS ON DEVELOPMENT PRIORITY

### Background:

- The Ministry of Minority Affairs (GOI) has identified 90 minority-concentrated backward districts using eight indicators of socio-economic development and amenities based on 2001 census data with a purpose to improve all the eight indicators and bring them to the all-India level through a multi-sector development plan (MSDP) under the Eleventh Five Year Plan. Since it is expected that there may be changes in those indicators after 2001, a baseline survey has been conducted to inform the multi-sectoral development plan with the latest deficits and priorities.
- Buldhana is a backward district of Maharashtra and is one of the 90 minority-concentration districts in India.

### District profile (2001 census-based)

- Buldhana is primarily a rural district with 79 percent of the total population living in the rural areas.
- Minorities constitute 25 percent of the total population; Muslims 9 percent and Buddhists 15 percent of the total population. The *tehsil*-wise minority community representation in Buldhana shows that in four *tehsils* i.e., Khamgaon (34 percent), Buldhana (27 percent), Chikli (26 percent) and Shegaon (26 percent), the minority population is more than the district average of 25 percent. The lowest level of minority population is in Lonar (17 percent) and Malkapur (16.8 percent). In the other *tehsil*, the ratio of minority population is as follows: Jalgaon (20 percent), Sangrampur (25 percent), Nandura (25 percent), Motala (25 percent), Mehkar (23 percent), Deolgaon Raja (23 percent), Sindhked Raja (24 percent)
- The overall literacy rate is 76 percent that is nine points above the national average (67 percent). Similarly, the female literacy rate is 64 percent, which is also above the national average. Even the sex ratio, i.e. 946, is above the state and all-India level. However, it is declining.
- The overall work participation rate and female work participation rate are 39 percent and 23 percent respectively, which is just above the national average.

About 84 percent of the labour force is engaged in agriculture and related activities.

### Survey findings: Socio-economic Conditions and other Amenities in 2008

In 2008, Buldhana lagged behind the all-India average in four out of eight indicators such as safe drinking water, electrification, sanitation. Apart from this, it also lagged behind the all-India average in terms of two health indicators such as percentage of fully vaccinated children and institutional delivery of children. The data in the following Table shows the gap between the all-India and district figures vis-a-vis eight indicators. The district figure is based on the survey findings (2008) and the all-India figures are for 2005-2006. The distance from the all-India figures may be higher, as all-India data are a little old.

**Table 1: Development Deficit in Buldhana District**

| Sl. No. | Indicators  | Buldhana 2008 | All India 2005 | Development Gaps Bet All India & District | Development Priority of the District |
|---------|---|---------------|----------------|---|--------------------------------------|
|         |   | (1)           | (2)            | (3=1-2)                                   | (4)                                  |
| 1       | Rate of literacy                                    | 77.2          | 67.3           | 9.88                                      | 7                                    |
| 2       | Rate of female literacy                             | 67.7          | 57.1           | 10.62                                     | 8                                    |
| 3       | Work participation rate                             | 38.8          | 38.0           | 0.77                                      | 5                                    |
| 4       | Female work participation rate                      | 23.5          | 21.5           | 1.95                                      | 6                                    |
| 5       | Percentage of households with <i>pucca</i> walls    | 43.8          | 59.4           | -15.62                                    | 3                                    |
| 6       | Percentage of households with safe drinking water   | 46.9          | 87.9           | -41.01                                    | 1                                    |
| 7       | Percentage of households with electricity           | 64.9          | 67.9           | -3.01                                     | 4                                    |
| 8       | Percentage of households with water closet latrines | 15.8          | 39.2           | -23.42                                    | 2                                    |
| 9       | Percentage of fully vaccinated children             | 91.5          | 43.5           | 47.99                                     | -                                    |
| 10      | Percentage of child delivery in a health facility   | 52.9          | 38.7           | 14.17                                     | -                                    |

Note: (1) Survey data of the district (Col. 1) pertains to the rural area only, but all-India data (Col. 2) pertains to total.

(2) Data in Col 2 from Sl. No. 5 to 8 pertains to year 2005-06 from NFHS-3 and the rest of the data in Col. 2 pertain to the year 2004-05 from NSSO.

### Priorities for Multi-Sectoral Development Plan

- **Safe drinking water (Rank 1):** Access to safe drinking water is available to only 46.89 percent of the households. However, most of them depend on the public water distribution systems like public wells, public tanks and tube wells. In some cases, people have to walk more than 2 kms to fetch water. In this regard the MSDP may have to look at the viable options such as construction of common wells, public taps

in those areas in those areas where there is poor access to safe drinking water is reported at the district level.

- **Water Closet latrines (Rank 2):** In-house toilets are available to only less than 16 percent of the house holds. Though there is a universal programme called the Total Sanitation Campaign targeted at achieving 100 percent coverage of in-house toilets by the year 2011, the status of the in-house toilet facilities suggests that the district is far behind the target. Moreover, it is unlikely that there will be universal coverage by the target period. Therefore, the MSDP can review the progress of the TSC and develop plan for those *tehsil* that have less access to toilet facilities at present.
- **Housing conditions (Rank 3):** Nearly 56 percent of the households are living in non-*pucca* houses. There is considerably better awareness about the Indira Awaz Yojana and since the demand for housing is so high in the district, the government policy should focus more on large scale construction and distribution of housing. Therefore, housing allotments should be increased, may be following a block-wise approach. The number of houses under the Indira Awaz Yojana in Buldhana can be increased with substantial funding support from the present scheme for housing. This can be given to those blocks or *tehsils* which have minority-concentration.
- **Household electricity (Rank 4):** The status of households with electricity in Buldhana district is not at the desirable level as only 64 percent of the households have access to electricity. The major issue is the irregular and erratic power supply. It is thus essential to look for and promote alternate energy sources in Buldhana. This is also essential to promote micro-enterprise activities in the district.
- **Work participation and female work participation (Rank 5 and 6):** Though the work participation rate is in line with the national average, it is not sufficient to absorb the working population in the district. Both the educated youth and uneducated population are looking for jobs in the villages. Since it is an agrarian district; Buldhana needs to work towards the development of micro-enterprises that are based on agriculture. Also, the educated youth should be provided with sufficient technical and financial support to start up new enterprises.
  - More focus on the NREGA interventions should be given and it should be made a double development tool to address the issues of infra -structure as well as unemployment in the state.
  - Some skill training should be provided to start micro -enterprises using self help groups (SHGs) or Swarnajayanti Gram Swarozgar Yojana (SGSYs), currently hardly seen in Buldhana.

- On-farm and off-farm activities should be developed in Buldhana as already a significant number of the people are engaged in different types of off-farm activities. These can be promoted to increase the work participation by promoting household- based economic activities.
- **Literacy rate and female literacy rate(Rank 7 and 8):** The prevailing literacy rate and female literacy rate in Buldhana is relatively better and also shows an impressive growth rate. With regard to education, Buldhana needs more middle and higher schools. It also needs to have vocational training institutes at the *tehsil* level to cater to the needs of the local people. There should be better schools with lady teachers in all villages. Increasing the number of middle and secondary schools and establishing polytechnics and ITIs may be considered. Apart from this, other schemes such as mid-day meals and scholarships, books and uniforms etc may be provided as they are known to act as a major attraction for children to attend school, which would lead to an improvement in the female literacy rate and overall literacy rate. Other suggested schemes for improving literacy, particularly female literacy include more lady teachers, provision of free education, including uniforms, books, etc to girls, especially those from the minority communities and socially backward communities, incentives for high attendance, etc.

**Other key areas:**

- **Health infra-structure:** The ratio of access to health services in Buldhana is one of the lowest in the country. Moreover, the present health infrastructure is not fully equipped to address all the health needs of the people. Since health is a key development indicator, it is essential to invest in the public health arena as well, so the MSDP should focus on improving the hospital and paramedical support in the villages, including establishing more PHC sub-centres and ICDS centres. The use of the ICDS centre as a multi-purpose centre, used as the ASHA centre as well may be considered and if the building is constructed for ICDS centers, it can be used for multiple purposes in the villages.