

Baseline Survey of Minority Concentrated Districts

Morigaon District Assam



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Executive Summary

Baseline Survey of Minority Concentrated Districts

<u>Priorities</u> <u>Electrification</u> <u>Housing</u> <u>Sanitation</u> <u>Health</u> <u>Work</u> <u>Participation</u>

TOP

Morigaon District, Assam

he purpose of the Baseline Survey of the Minority Concentration Districts (MDCS) was to assess the development deficits in the district and identification of priority areas for policy interventions to be structured in the line of the Prime Minister's 15- Point Programme, which will be in the form of a Multisector Development Programme (MsDP) for the entire district. In order to do this, ten indicators - eight of which were identified and applied by the Ministry of Minority Affairs, Government of India for identifying the Minority Concentrated Districts across the country along with two additional indicators for assessing health status have been used. Since the basic purpose of the Baseline was specified as a pre-requisite for preparation of Multi-sector District Development Plan (MsDP) for the Minority Concentrated Districts (MCDs) characterised by relative backwardness and to bring those district at least to the national level, most recent national level official estimates were taken for finding the development deficits in terms of the ten selected indicators. Taking deficit so derived as weights, the indicators representing specific sectors are ranked on a ten point score-scale. The exercise results in following relative ranking for the Morigaon district, Assam. The national estimates of the selected indicators (1-8) are estimated on the basis of NSS 2004 -2005 rounds while (9-10) are from NFHS - 3 with due approval from the Ministry.

Sl No	Indicators	Survey Results	India (NSS 2004- 05)	Deficit	Priority assigned
Socio-economic indicators					
1	Rate of literacy	74.96	67.30	7.66	7
2	Rate of female literacy	68.94	57.10	11.84	8
3	Work participation rate	53.53	38.00	15.53	10
4	Female work participation rate	10.02	21.50	-11.48	5
Basic amenities indicators					
5	Percentage of pucca houses	12.74	59.40	-46.66	2
6	Percentage of households with access				
	to safe drinking water	88.78	87.90	0.88	6
7	Percentage of households with			_	
	sanitation facilities	16.56	39.20	-22.64	3
8	Percentage of electrified households	18.44	67.90	-49.46	1
Health indicators					
9	Percentage of fully vaccinated children	58.49	43.50	14.99	9
10	Percentage of institutional delivery	20.70	38.70	-18.00	4



Morigaon is comparatively a smaller district of Assam with slow pace of economic progress. However, in terms of basic human capabilities, as evident from the Human Development Index (HDI), the district has been performing well over the years. Due to lower rate of industrialization and traditional agricultural practices, the district economy profile has not been encouraging to substantiate the aspirations of economic better off of the inhabitants. It is to be noted in this context that the district has tremendous possibilities of development almost in all the fields of its economy. However, there are several development deficits leading to its economic stagnation. Particularly, the rural areas are marked with severe problems of the basic requirements of life including education, health, sanitation, transport and communication and so on. The urgency is to enhance the quality of the life of the people and to provide economic security. Moreover, the problems faced by the district are not basically religion-centric. All the communities living in the have been confronting with similar problems of economic deprivation leading to a serious threat of maintaining the basic status of living. The striking deficits are highlighted below:

• The District requires immediate attention towards electrification and provisioning of housing. The existing schemes for achieving these have immense scope to further their reach and provide benefits.

It is also prominent in the study that high level unemployment and incidence of underemployment dominate the rural Morigaon. Appropriate action must be taken to provide adequate employment opportunities to the rural youth. The pressure of unemployment may be reduced a lot by creating self-employment avenues or by creating an environment to encourage youths to take up self-employment activities. Implementation of effective training, financing and monitoring of the trained personnel may be the best feasible step towards relieving the pressure of unemployment.

• The overall condition of housing in the rural areas of the district has not been found satisfactory. The policies of the government to provide adequate and hygienic living space for the rural community should provide greater stress on these premises.

• The problems of sanitation and safe drinking water are also serious problems of the rural areas of Morigaon. Although the majority of the households have access to safe drinking water, a sizeable portion of the religious minorities and SC/ST population use drinking water from unsafe sources. In order to ensure safe drinking water, government intervention is urgently sought.

• The literacy rate of the district is below the State average. The rural areas are highly deprived of required education infrastructure leading to an alarming rate of illiteracy. Government intervention is urgently sought in removing these lags through the provisioning of better education infrastructure, adult literacy programme, and education scholarship etc. In implementing these, the religious minority and the ST & SC population should be given top most priority.

• The agricultural sector should be revamped with farm mechanization, introduction of multiple cropping, providing crop loans at susbsidised rate and provision for adequate marketing of agricultural products. Besides, the Government may also sort out a policy to provide farm level training to the actual cultivators for scientific cultivation. This will



make farm level production efficient as well as profitable. Development of horticulture, sericulture and related activities should also be geared up.

• It is significant to note that engraved with the problems of illiteracy, low level of living and ignorance, the village households are also not keen on being benefited by the public health services whatsoever is available. It is found in the survey that the most of the child delivery cases take place at home under the guidance and support of the untrained personnel. The rate of full immunisation is also very poor. Such deprivation is created by the village households themselves. Awareness generation about their rights and responsibilities should be prime concern in this regard.

• The survey also establishes that the villages are witnessing poor social measures. A good number of the BPL families are not yet having BPL cards. The PDS has not been fully successful in achieving its target. Insufficient and poor quality commodities, discrepancies in the conduct of the PDS etc dominate the system.

The communities, irrespective of their religion and castes, suffer from the common perceptions that they are deprived of land, housing, health, education and employment. The major aspirations of the people that have emerged through the survey are communication, safe drinking water, and better health care and employment opportunities.