BASELINE SURVEY OF MINORITY CONCENTRATION DISTRICT

Executive Summary of Kishanganj District (Bihar)

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 these indicators and bring it to the all India level through a multi-sector development plan under the eleventh five year plan. Since, it is expected that there must be changes in these indicators after 2001, a baseline survey has been conducted to formulate the multi-sectoral development plan with the latest deficits and priorities.
- Kishanganj, one of the most backward districts of Bihar, stands at the bottom of the 90 minority concentration districts.

District Profile (2001 census based):

- In 2001, the population of Kishanganj district was 12.94 lakhs and 91 per cent of the population was living in rural areas.
- Majority of the population (70.7 per cent) was of minority communities. Sex ratio was 940 female per thousand male and literacy rate was 31.02 per cent (lower than the state and national average).
- Rural areas are lacking proper health facilities. One-fourth of the villages of district Kishanganj have a PHC and only 15 per cent have MCW centre.
- The major source of water supply is tube wells and hand pumps, and tap water facility is available to a very small proportion (0.4 per cent) of the population of Kishangani district.
- Educational facilities exclusively catering to the needs of girls students are very meager and a high/higher secondary school exclusively for girls is available at a distance of 12.8 km.
- Health facilities are very inadequate and none of the sample village has a PHC, hospital/dispensary, maternal and child care centre, and family planning clinic. Accessibility to health facilities is not satisfactory. Development and welfare orientation organizations are lacking in most of the villages.

Survey findings: Socio-economic Conditions and other Ame nities in 2008

In 2008 (survey findings), Kishanganj lagged behind the all India average in seven out of eight indicators and also lagged behind the all India level in terms of two more health related indicators. Table 1 below shows the gap between all India and district figures vis-à-vis ten indicators and prioritises the development intervention vis-à-vis eight indicators. The district figure is based on the survey findings (2008) and all India figures are of 2004-05 and 2005-06. The distance from the all India figures may be higher, as all India data are a little old.

Table 1: Development Gaps and Priorities for the Multi-sector Plan

SI. No.	Indicators	Kishanganj 2008	All India 2005	Gap Between All India and District	Priority based on the gap
		1	2	(3=1-2)	4
1	Rate of literacy	54.62	67.3	-12.68	4
2	Rate of female literacy	47.13	57.1	-9.97	5
3	Work participation rate	34.89	38.0	-3.11	7
4	Female work participation rate	14.59	21.5	-6.91	6
5	Percentage of households with pucca walls	8.11	59.4	-51.29	2
6	Percentage of households with safe drinking water	98.33	87.9	10.43	8
7	Percentage of households with electricity	6.67	67.9	-61.23	1
8	Percentage of households with water close set latrines	7.22	39.2	-31.98	3
9	Percentage of fully vaccinated children	7.51	43.5	-35.99	-
10	Percentage of child delivery in a health facility	9.86	38.7	-28.84	-

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

Development Priorities as per Eight Indicators:

1. Electricity:

Availability of electricity remains the most critical gap. Only a small proportion of the households (6.67 per cent) have electricity, of them 8.17 per cent and 6.30 percent of Hindu and Muslim households respectively have electricity and none of others have electricity connection. The district lags behind all India figure by a huge 61.23 point.

The Rajiv Gandhi Rural Electrification Mission (RGREM) targets universalisation of electricity connection to the rural households by the end of 2009 and there is a memorandum of understanding between Government of Bihar and Rural Electrification Corporation (REC), Government of India (GoI) for extending electric connection to all the villages of Kishanganj. It seems that the progress appears nowhere to the target.

2. Houses with Pucca Walls:

All weather protected, pucca house, remains second important critical gap, as only 8.11 per cent of the households are living in Pucca houses (Hindus 13.46 per cent and Muslims 6.30 per cent). More than half of them lives in thatched houses, and more than one-fifth have semi-pucca houses. There is a difference of 51.29 points between all India and district figure in this regard. 43.27 per cent of the Hindu and 14.79 per cent of the Muslim households have houses under Indira Awas Yojana (IAY)/government provided.

Thus, the number of houses constructed under IAY, which is not a universal programme, is quite insufficient to fill the gap in the district. Overall, the qualitative and quantitative availability of the housing in the rural areas is not satisfactory and calls for vigorous implementation of IAY so as to include more and more beneficiaries under its ambit and to extend the area of its coverage too to include more and more poverty stricken households under the scheme. IAY can be topped up with the multi-sectoral plan.

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

3. In-house Toilet Facilities:

In-house toilet facility is third important critical gap in rural areas of Kishanganj. 92.78 per cent of households are without any toilet facilities and defecating in open and of them 95.19 per cent and 92.09 per cent belongs to Hindu and Muslim community. The drainage system is also very poor. There is not much differential between Hindu and Muslim households regarding toilet and drainage facilities, which shows uniform lack of sanitation facilities in the rural household.

All this makes it clear that the scheme like Total Sanitation Campaign (TSC), a Centre sponsored scheme, aiming at universalisation of sanitation facilities is going on for quite some time with the target to achieve universalisation of sanitation facilities by the end of 2009, has not made even a modest dent on the rural sanitation and drainage in Kishanganj district, and the existing situation clearly indicates that the district would completely miss the target, which calls for better implementation of the TSC and to extend its coverage to uncovered villages through the multi-sector development plan.

4. Overall Literacy Rate particularly Female Literacy Rate:

There is a modest improvement in overall and female literacy rates of the rural population in the district since 2001, due to the Sarva Shiksh Abhiyan and the Mid-day meal scheme. The overall literacy rate has increased from 31.02 per cent in 2001 to 54.59 per cent in 2008 and the female literacy has also improved and stood at 47.13 per cent in 2008. Nevertheless, the district lags behind all India average and, hence, needs serious attention. Some important reasons are: non-availability of primary schools, poor enrolment ratio and high drop-out rates.

More than one-fifth of the children are never enrolled and some of them left after enrollment. Higher distance is one of the potent deterrent factors in enrollment specifically of girls. Gender disparity in educational attainments is very glaring and will likely to adversely affect their socioeconomic amelioration and empowerment.

Overall, the educational attainment is not satisfactory, which have its strong repercussions on future advancement in life. There are a number of villages, which are still without primary school and further the number of girl's school is quite low. Hence, expansion of primary and elementary schools, both for boys and girls, should be taken on a priority basis along with effective measures to minimise drop-outs. It seems that the SSA scheme has not made a significant dent on the provisioning of basic educational services in the rural areas of the district, which needs to be penetrated with fresh rigour.

5. Employment Opportunities more so for Women:

Work participation rate is 34.89, which is comparatively very low for women (34.89 per cent). Work force participation is quite low and agriculture, forestry and fishing are the dominant activities wherein more than half of the households' members are engaged. Gender differentials in industry-wise distribution of main workers are quite sharp in agriculture, forestry and fishing. Self-employment in non-agricultural activities is very low (4 per cent), which needs to be propagated on a larger scale. Male work force participation rate is more than half, whereas the female work force participation is as low as 14.59 per cent with wide variations across the religious communities, lowest for Muslim (11.59 per cent) and highest for other groups (29.63 per cent).

The opportunities for self-employment in non-agricultural economic pursuits are very small and about 4 per cent of them are engaged in such activities. Given the low level of literacy and availability of salaried jobs, the self-employment opportunities outside the agriculture sector needs to be propagated on a larger scale. One-fourth of the unemployed households has preferred business and cultivation and has shown preference for occupations in which they have required skills. More or less the same is true of Hindu and Muslim community with minor variations. There is need to implement local skill based micro credit income generating programmes specifically SGSY in the district to ameliorate their livelihood conditions.

Additional Areas of Intervention

- 1. Access to health facilities is another area of concern, as majority of the villages are without any medical facilities. Inaccessibility to health facilities is a major deterrent in its utilization. Institutional delivery of child is only 9.86 percent (government hospital 5.80 per cent and private hospitals 4.06 per cent) with significant variations across the religious groups and only 7.51 per cent of the children are fully vaccinated due to lack of awareness and inaccessibility. The number of PHC and sub-centre per one lakh population is also low in the district. The availability of health facilities has critical bearing on the overall economic conditions of the households, particularly their indebtedness, as medical expenditure is the main reason for the indebtedness of the households in a large number of cases. Thus, there is urgent need to activate the health para-professionals to increase the coverage of National Rural Health Mission (NRHM) in rural areas of the district, besides mobile health clinics are also to be provided to them under NRHM.
- 2. More than one-third of the households are indebted; of them more than one-fourth and one-third are respectively Hindu and Muslim. The non-institutional sources of indebtedness are predominant (more than three-fourth of households). Keeping in view the more prevalence of non-institutional source of credit, there is need to promote the scheme of micro credit through self help groups (SHGs) for which more branches of rural banks also needed to be open in the district, so that the exploitation of poor people in the hands of money lenders and sahukars should be minimized.
- 3. All weather road connectivity is another glaring infrastructural deficit. As per 2001 Census, most of the villages are without all weather road connectivity. Though rural connectivity has improved since then, yet significant numbers of villages are still without all weather roads.
- 4. There are wider gaps in awareness of the government schemes and benefits derived there from across Hindu, Muslim and others, which needs to be bridged, so that the benefits of these schemes must be reaped by larger chunk of the rural society of the district.
- 5. 93 per cent of the households belong to below poverty level (BPL) category, with negligible variations across Hindu and Muslim households, and of them 53.33 per cent are possessing BPL ration card and 51 per cent are availing facility of PDS. Such a huge difference in falling under BPL category and holding BPL ration card and availing benefits from PDS is a matter of very serious concern and the gaps need to be plugged at earliest, so that the poor must get their due share, which could also supplement households' nutrition. There is also need to rejuvenate the PDS to improve its working and performance as well as coverage and make it corruption free.